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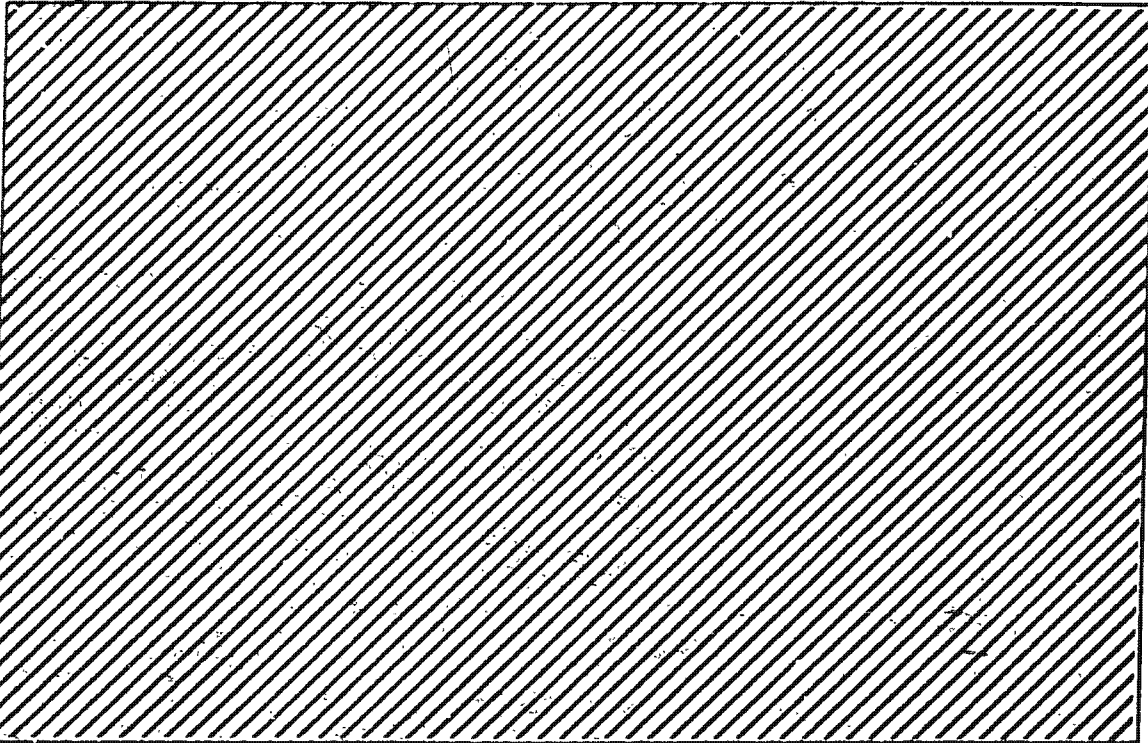
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ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)

FLORES, Daniel

NAME AND RELATIONSHIP OF DEPENDENT*

self

CLAIM NUMBER

79 0606

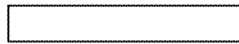
There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 1/4/79.

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

DATE OF NOTICE

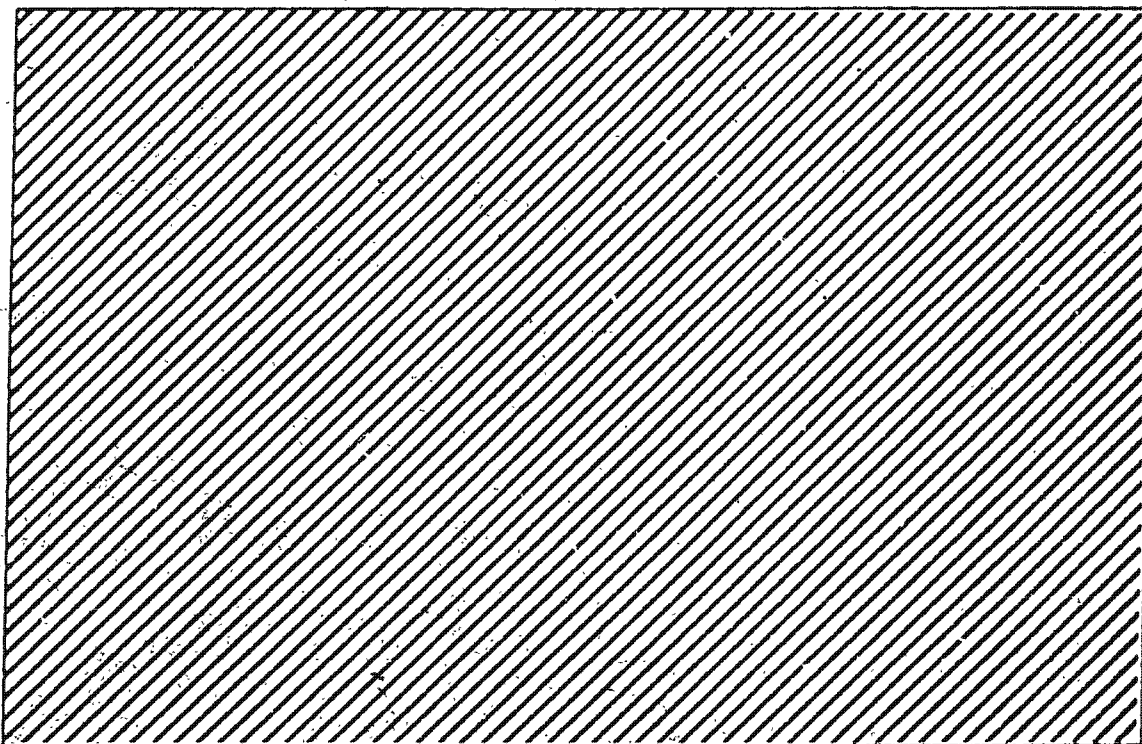
7 Jun 1979

SIGNATURE OF BIC REPRESENTATIVE



NOTICE OF OFFICIAL DISABILITY CLAIM FILE


ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
FLORES, Daniel	Self	78-0668

There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 4/12/78.

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

DATE OF NOTICE	SIGNATURE OF BSD REPRESENTATIVE
6/6/78	

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

81 JAN 1978

C REQUEST FOR PERSONNEL ACTION		DATE PREPARED 27 January 1978	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) Flores, Daniel		
3 NATURE OF PERSONNEL ACTION Reassignment		4 EFFECTIVE DATE REQUESTED MONTH: 02 DAY: 11 YEAR: 78	5 CATEGORY OF EMPLOYMENT Regular
6 FUNDS V TO V CF TO V	V TO CF CF TO CF	7. PAN AND NCCA 8035 0990 0000	8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Foreign Field Station		10 LOCATION OF OFFICIAL STATION	
11. POSITION TITLE Operations Officer	12 POSITION NUMBER GK76	13 CAREER SERVICE DESIGNATION DOG	
14 CLASSIFICATION SCHEDULE (GS, LB, IN.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 13 2	17. SALARY OR RATE 26887
18 REMARKS Reassigned from position FS35 CMS/MSB <i>This action reflects WGT- 1/29/78</i>			
18A SIGNATURE OF REQUESTING OFFICIAL J. Halpin		DATE SIGNED 1/27/78	18B SIGNATURE OF OFFICIAL CMS 13
		DATE SIGNED 1/29/78	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING 51620 LA	22 STATION CODE 45075
23 INTEGRITY CODE	24 HOOPTS CODE 3	25 DATE OF BIRTH	26 DATE OF GRADE
27 DATE OF LEI	28 SITE EMPLOY	29 SPECIAL REFERENCE	30 RETIREMENT DATA
31 SEPARATION DATA CODE	32 CORRECTION / LABELLATION DATA	33 SECURITY REG. NO	34 SEC
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY
39 FEDERAL HEALTH INSURANCE	40 SOCIAL SECURITY NO	41 POSITION CONTROL CERTIFICATION 1-27-78 A28	42 LEAVE CAT CODE
43 FEDERAL TAX DATA	44 STATE TAX DATA	45 O P APPROVAL	46 DATE APPROVED 1-31-78

FORM 1152 USE PREVIOUS EDITION

SECRET

82 IMPDET CL. BY. 007622

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REQUEST FOR PCS OVERSEAS EVALUATION

1 NAME (Last, First, Middle) Flores, Laniel	2 REQUEST DATE (DD-MO-YY) 12 Sept 77	3 APPLICANT HAS APPLICANT SEEN BY OMS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	4 APPLICANT HAS APPLICANT PREVIOUSLY BEEN SEEN BY OMS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
---	--	--	--

5 GRADE 13	6 APPLICATION CD All	7 DIRECTORATE/OFFICE DIVISION DDO/LA	8 SOCIAL SECURITY NO. 5270	9 POSITION TITLE Ops Officer	10 SEX M
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19 DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)

12 DEPENDENT NAME (Last, FI-MI)	13 SOCSEC NO.	14 DOB (DD/MY)	15 SEX	16 RELATIONSHIP	17 DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)

20 REQUESTED ACTION (more than one action is acceptable)

APPLICANT:	PRE EMPLOYMENT...	EOD
ASSIGNMENTS:	O/S PCS	STATION
	O/S TDY	POSITION
	O/S RETURNEE	FITNESS FOR DUTY
	O/S TDY STANDBY	RETURN TO DUTY
	O/S PLANNING	SPECIAL TRAINING
SEPARATION:	RETIREMENT	MDR/CIARDS
ROUTINE:	REGULAR ANNUAL	EXECUTIVE ANNUAL
		MDR/CSC
		MPT/PHE

21 COMMENTS

Assignment to [redacted] has been cancelled. Subject is now being considered for [redacted]

22 REQUESTING DIRECTORATE/OFFICE DIV DDO/LA/PLRS	23 ROOM/BLDG 313110 Hqs	24 EXTENSION 5270	25 SIGNATURE OF REQUESTING OFFICER
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26 OFFICE OF SECURITY DISPOSITION

27 OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION

QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS

JAMES WILKS [redacted] 7 OCT 1977

Chairman, Overseas Candidate Review Panel

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28 IMPROVED BY

SECRET
(When Filled In)

28 1977

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 21 March 1977	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, DANIEL				
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT SYSTEM				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 10 77		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CP TO V		V TO CP X CP TO CP		7 PAY AND HQCA 7135-4534-0000		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643, Sect. 203
9 ORGANIZATIONAL DESIGNATIONS DDO/LA				10. LOCATION OF OFFICIAL STATION WASH., D.C.		
11. POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION DQG	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) 45		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 13	17 SALARY OR RATE 5	
18 REMARKS SUBJECT REMOVED FROM SYSTEM IN ACCORDANCE WITH HN 20-763.						
18A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTEREGE CODE	24 MOOTHS CODE
25 DATE OF BIRTH	26 DATE OF GRADE		27 DATE OF LSI			
28 RET EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 - CIV 2 - OPM 3 - FLS 4 - BOB		31 SEPARATION DATA CODE	32 CORRECT OR CANCELLATION DATA TYPE	
33 SECURITY REQ NO	34 SER	35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE
38 CAREER CATEGORY	39 FEGLI HEALTH INSURANCE		40 SOCIAL SECURITY NO			
41 PERIODS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA		
45 POSITION CONTROL CERTIFICATION 3-24 77 [Signature]	46 O.P. APPROVAL	47 STATE TAX DATA		48 STATE TAX DATA		DATE APPROVED 21 MAR 77

FORM 1152 USE PREVIOUS EDITION

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FORM 1152 USE PREVIOUS EDITION

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(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED									
1 SERIAL NUMBER 036130										2 NAME (Last-First-Middle) Flores, Daniel		15 February 1977							
3 NATURE OF PERSONNEL ACTION Reassignment					4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 26 77			5 CATEGORY OF EMPLOYMENT Regular											
6 FUNDS		V TO V		V TO CP		7. FAN AND NSCA 7135-4534 0000		8 LEGAL AUTHORITY (Completed by Office of Personnel)											
CF TO V		X		CF TO CP		9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Cuba Operations Group EA Area													
10 LOCATION OF OFFICIAL STATION Washington, D. C.						11 POSITION TITLE Operations Officer (13)													
12. POSITION NUMBER FS35			13 CAREER SERVICE DESIGNATION DQG			14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 13 1								
17 SALARY OR RATE \$24,308			18 REMARKS Reassigned from DDO/LA Position CQ 66 CMS/MSB 2-17-77																
19A SIGNATURE OF REQUESTING OFFICIAL <i>J. Halpin</i> J. Halpin CLAPERS				DATE SIGNED 15Feb77		OFFICER 				DATE SIGNED 2-24-77									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																			
19 ACTION CODE 37		20 EMPLOY CODE 10		21 OFFICE CODING NUMERIC ALPHABETIC 51500 LA		22 STATION CODE 75013		23 INTEGRITY CODE		24 HQ/RTS CODE		25 DATE OF BIRTH		26 DATE OF GRADE MO DA YR		27 DATE OF LEI MO DA YR			
28 BTE EXPIRES MO DA YR		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-ELC 2-OPRM 3-FLA 4-ROSE		31 SEPARATION DATA CODE		32 CORRECTION CANCELLATION DATA TYPE MO DA YR				33 SECURITY REG. NO		34 SER					
35 VET PREFERENCE CODE 0-NONE 1-5 YR 2-10 YR		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY LMB, RTSP PROV, TLRP		39 HIGH HEALTH INSURANCE CODE 0-WAIVER 1-BES 2-BIG OPT 3-UNAVAILABLE		40 SOCIAL SECURITY NO		41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NO PREVIOUS SERVICE 2-ONE OR MORE (LESS THAN 3 YEARS) 3-TWO OR MORE (MORE THAN 3 YEARS)		42 LEAVE CAT CODE		43 FEDERAL TAX DATA FORM EXEMPTED CODE MO TAX EXEMPTIONS		44 STATE TAX DATA FORM EXEMPTED CODE MO TAX EXEMPTIONS	
45 POSITION CONTROL CERTIFICATION 2-25-77 <i>DEA</i>						46 O.P. APPROVAL 01 MAR 1977			DATE APPROVED 2-24-77										

1152 USE PREVIOUS EDITION

SECRET

FORM 12-1 WFOPT CS BY 007A23

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION	DATE PREPARED 19 January 1977
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1 SERIAL NUMBER 036130 ✓	2 NAME (Last-First-Middle) Flores, Daniel ✓
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3 NATURE OF PERSONNEL ACTION PROMOTION	4 EFFECTIVE DATE REQUESTED MONTH: 01 DAY: 30 YEAR: 77	5 CATEGORY OF EMPLOYMENT Regular
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6 FUNDS V TO V C TO V								7. PAN AND NSCA 7135 45340000	8 (LEGAL AUTHORITY (Complied by Office of Personnel))
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9. ORGANIZATIONAL DESIGNATIONS DDO/LA Division ✓ Cuba Operations Group ✓ VII Area ✓	10 LOCATION OF OFFICIAL STATION Washington, D.C.
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11 POSITION TITLE Operations Officer ✓ (13)	12 POSITION NUMBER CQ66	13 CAREER SERVICE DESIGNATION DQG ✓
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14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15 OCCUPATIONAL SERIES 0136.01 ✓	16 GRADE AND STEP 13 1	17 SALARY OR RATE \$24,508
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18 REMARKS
FROM: GS-12/4, \$22,485
f-12/4

18A SIGNATURE OF REQUESTING OFFICER <i>John Malpin</i> John Malpin, PERS	DATE SIGNED 19 Jan 77	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED 21 Jan 77
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODE	22 SERVICE CODE	23 RETIRE CODE	24 REASON CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
22	10	51500	LA	75013		08/04/35	01/30/77	01/30/77
28 DATE EFFECTIVE	29 DATE OF SEPARATION	30 DATE OF RESIGNATION	31 DATE OF SEPARATION	32 DATE OF RESIGNATION	33 DATE OF RESIGNATION	34 DATE OF RESIGNATION	35 DATE OF RESIGNATION	36 DATE OF RESIGNATION
37 DATE OF RESIGNATION	38 DATE OF RESIGNATION	39 DATE OF RESIGNATION	40 DATE OF RESIGNATION	41 DATE OF RESIGNATION	42 DATE OF RESIGNATION	43 DATE OF RESIGNATION	44 DATE OF RESIGNATION	45 DATE OF RESIGNATION

John Malpin *John Malpin* 21 Jan 77

Handwritten initials

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19 NOV 1976

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
10 November 1976

1 SERIAL NUMBER 036130
2 NAME (Last-First-Middle) Flores, Daniel

3 NATURE OF PERSONNEL ACTION Reassignment
4 EFFECTIVE DATE REQUESTED MONTH 12 DAY 04 YEAR 76
5 CATEGORY OF EMPLOYMENT Regular

6 FUNDS
7. PAN AND NSCA 7135-4534 0000
8 (LEGAL AUTHORITY (Completed by Office of Personnel))

9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division
Cuba Operations Group
WH Area
10 LOCATION OF OFFICIAL STATION Washington, D. C.

11. POSITION TITLE Operations Officer (12)
12 POSITION NUMBER CQ67
13 CAREER SERVICE DESIGNATION DQG

14 CLASSIFICATION SCHEDULE (GS, LS, etc.) GS
15 OCCUPATIONAL SERIES 0136.01
16 GRADE AND STEP 12 8
17 SALARY OR RATE 50485
23/804

18 REMARKS
Reassigned from DDA/OTR Position BD 33
Concur: [Redacted] 10 Nov 76 (telecord)
OTR/PERS
CMS/MSB [Redacted] CMS/MSB 11-16-76

19A SIGNATURE OF REQUESTING OFFICIAL John F. Halpin C/LA/PERS
DATE SIGNED 10 Nov 76
19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER
DATE SIGNED 11/15/76

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES	22 STATION CODE	23 UTILITY CODE	24 ROOMS CODE	25 DATE OF BIRTH	26 DATE OF ENTRY	27 DATE OF LEAVE	
37	10	51500 LA	75013			12/04/35			
28 SET REPORT	29 SYSTEM REFERENCE	30 DETAILMENT DATA	31 SEPARATION DATA CODE	32 LOBBY/ON CARTELLATION DATA	EOD DATA			33 SECURITY	34 SAS
35 NET PREFERENCE	36 MSB (COMP DATE)	37 LOBBY COMP DATE	38 CAREER CATEGORY	39 MSB: RESULTS (PREFERENCE)	40 MSB: SECURITY				
41 MSB: PREFERENCE	42 LEAVE (LST CODE)	43 FEDERAL TAG DATA	44 MSB: TAG DATA	45 MSB: TAG DATA	46 MSB: TAG DATA				

19C SIGNATURE OF REQUESTING OFFICER [Redacted]
19D SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Redacted]

SECRET
EYES ONLY

20 OCT 1976

MEMORANDUM FOR: Chairman, GS-12 Evaluation Board

FROM : Raymond A. Warren
Chief, Latin America Division

SUBJECT : Recommendation for Promotion to
Grade GS-13, Daniel Flores

1. Mr. Daniel Flores was recently assigned to OTR as an operations instructor to capitalize on his fine operational record which he developed during his two field assignments in [redacted] and in [redacted] and his most recent operational assignment with LA/COG. His overall performance has clearly been characterized by exceptional proficiency and he has been rated by his most recent supervisor as "outstanding" for his handling of a sensitive [redacted] case and his development and pursuit of [redacted] operational leads. Mr. Flores has definite growth potential and clearly meets or exceeds the criteria for promotion to Grade GS-13, a promotion which is most strongly recommended.

2. During the past year Mr. Flores was responsible for handling a very sensitive and [redacted] asset. This asset is probably one of the "messiest and disorganized individuals" with whom a case officer in this Agency has had to contend. However, Mr. Flores clearly demonstrated his fine handling abilities in his manipulation and exploitation of this agent. As a result of his guidance and his ability to effectively debrief this person, Mr. Flores was able to make this asset one of our most productive [redacted] sources. During the last year this source [redacted] on subject matter which often commanded attention at the highest levels of our government.

3. Mr. Flores has shown a remarkable growth potential during the last year. He is determined, persistent, serious, and commendably aggressive. He is mature, self-assured, and his operational decisions are sound. His managerial skills are in keeping with his operational potential. He was often called

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upon in the last twelve months to act as Chief of his section, a GS-14 position. He demonstrated sound leadership qualities by stimulating interest and enthusiasm in his staff. His operational programs were aggressive and imaginative. Mr. Flores' supervisory talents combined with his excellent professional skills portend a continuing and successful career in this Agency.

4. While assigned to LA/COG, Mr. Flores was involved in the spotting, assessing, developing access to, and eventually pitching a [redacted] who was the [redacted] in a Latin American country. The recruitment pitch was not successful but the details of this operation were handled in the most professional manner. Mr. Flores developed more leads to [redacted] and [redacted] of [redacted] during this period than any other LA/COG operations officer. He has native fluency in Spanish and feels "at home" operating in the field. While in LA/COG Mr. Flores was called upon to do a considerable amount of TDY travel since he was on call to meet his [redacted] asset anytime, any place whenever the agent [redacted] of [redacted]. In addition to these travels, Mr. Flores did a lot of traveling seeking out and debriefing potential access agents. During this last year he clearly demonstrated his ability to function independently and to assume responsibilities usually reserved for officers much more senior in grade and experience.

5. Mr. Flores was assigned in July 1976 to OTR on a two-year rotational assignment as an operations instructor. Upon completion of this assignment, Mr. Flores will return to this Division to assume responsibilities, either at Headquarters or in the field, commensurate with his demonstrated operational and managerial talents. In recognition of Mr. Flores' outstanding agent handling skills, his overall professional competency, and his obvious growth potential, it is strongly recommended that Mr. Flores be promoted to Grade GS-13.


Raymond A. Warren

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EYES ONLY

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21 September 1976

MEMORANDUM FOR: Chief, OTR/LTD


FROM : Walter R. Cox
Chief, ALT Unit

SUBJECT : Completion of Training Report
Trainee: Daniel Flores
Training Program:

1. For your information and for documentation in Daniel Flores' official personnel file, this memorandum certifies that he received the five-day SAI Persuasion Skills course at an NOCB in Arlington, Virginia, between 11 and 17 August 1976. The instructor was Mr.

2. Briefly, the SAI course is a program in human relations and communications effectiveness on the interpersonal level. It provides the trainee with a framework for analyzing problems usually encountered in supervisory or in agent development, recruitment, and handling situations and with a system for presenting his ideas in a way standing the best chance for success in gaining a target individual's willing acceptance. Flores was an active and most interested participant throughout the program and achieved a good understanding of the basic principles involved. A copy of his course critique is attached for your information.

3. Since Flores is an ALT Instructor, we plan to dispense with the formality of a post-training questionnaire.


Walter R. Cox

Originated by:

F-2 Impdet.
Classified by 024097.

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CTR/ALT
Staff

Trainee: Mr. Daniel Flores
Instructor: Mr. [redacted]

August 1976 -

To assist us in making decisions about future SAI training or application, your answers to the following questions will be most appreciated.

1. Do you feel SAI training was helpful to you? (If you choose to do so, please explain why or how.) This course was extremely useful to me. One of the main features of the course -- how to perceive the other person's objectives before your own -- was of particular interest because, as an instructor it will be one of the main tools I will use in evaluating the level of understanding of each trainee. This experience will also be very helpful to me in my career as a case officer. I can think of several instances where SAI could have helped me turn several failures (recruitment pitches) into successes.

2. Did SAI training provide you with any concepts or tools which can be applied in a practical way to your work problems? To your personal life? Any examples you care to mention?

The benefits that this course will provide for me in my job as an instructor are clear. I am absolutely certain that putting the SAI concept into practice will bring forth not only self satisfaction but career benefits as well. This will also be very helpful to me in my personal life. I can see now that some of the concepts will be put to work immediately.

3. What elements, segments, or aspects of the SAI training were of the most interest or use to you?

The greatest revelation from an operational point of view, was the clarification of perhaps an erroneous idea we have about obtaining our intelligence objectives. I always operated under the belief that the most important thing in my work was to attain my objectives, i.e. the recruitment of an agent. SAI revealed that this is true but it also revealed that it is more important to first consider the target's (agent's) objectives. Once we do this our chances (in my opinion after taking SAI) success would probably increase by at least 90 per cent. If I were to stress one point it would be that more emphasis be placed on dealing with the target's rather than the CO's objectives.

4. Would you recommend SAI training for other of our personnel?

I am sure that many people would be recommended for this training and that all would benefit from it. However, I would strongly recommend that personnel officers be given SAI as a prerequisite to their jobs. It would certainly help them in dealing with large numbers of different people.

5. What other components or categories of personnel do you believe would benefit from SAI training to a degree making it worthwhile for them to receive it?

6. Please comment, if you have any definite opinion, on the duration and pace of the training: too long/short? too fast/slow? The pace of the course was excellent. However, adding one or two more days would certainly help in putting the SAI concepts into practice by the trainee himself. That is, perhaps a live exercise with a person who is not aware of the training situation. A trainee could be tasked to elicit information from an unwitting participant. The use of videotapes and/or movies would help in testing the trainees perceptiveness through the course.

7. Any other comments you may wish to make:

A brief comment about the instructor. He was definitely responsible for the success of the course. Mr. [] showed excellent knowledge of the SAI material and throughout the course kept the student's interest alive by showing tremendous enthusiasm in what he was teaching. The end result of the professionalism that Mr. [] demonstrated in the class is reflected in the comments stated here and in the confidence he instilled in me personally.

8. On a scale of 1 to 5, how would you rate SAI training in relation to other training you have received from the Agency? Please encircle applicable number:

Non-Essential	Slightly Helpful	Generally Helpful	Very Helpful	Essential
1	2	3	4	5
				X

C-nomen

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(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 25 June 1976	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, Daniel			
3. NATURE OF PERSONNEL ACTION Reassignment <i>Change of Function?</i>			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 21 76		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS V TO V CF TO V		7. FAN AND NTCA 0175-3010 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDA/OTR Functional Training Division Operations Training Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Instructor-Ops			12. POSITION NUMBER BD33		13. CAREER SERVICE DESIGNATION DQB
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 1712.32		16. GRADE AND STEP 12 3	
17. SALARY OR RATE 20678		18. REMARKS CONCUR: <i>[Signature]</i> LA/PERS 20678200 Acknowledge ment of category <i>[unclear]</i> <i>[unclear]</i> payroll security Concur: <i>[Signature]</i> DDO/MSB/MPC			
18A. SIGNATURE OF REQUESTING OFFICIAL Harry E. Fitzwater, DTR		DATE SIGNED 25 June 76		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER DDO/CMG/12	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC ALPHABETIC 17500 OTR		22. STATION CODE 75013	23. EMPLOYEE CODE
24. DATE OF BIRTH 03/04/35	25. DATE OF GRADE	26. DATE OF LET	27. SECURITY RISK		
28. RETIREMENT DATA			29. SEPARATION DATA		
30. SPECIAL ASSIGNMENT DATA			31. HEALTH INFORMATION		
32. PERSONNEL OFFICER'S COMMENTS			33. LEADERSHIP DATA		
34. REASON FOR REQUEST			35. OTHER DATA		

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FORM 100-100-100-100

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 26 AUGUST 1975					
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, DANIEL							
3 NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="checkbox"/> STATUS			4 EFFECTIVE DATE REQUESTED MONTH: 09 DAY: 14 YEAR: 75		5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;"><input type="checkbox"/> V TO V</td> <td style="width:33%;"><input type="checkbox"/> V TO C</td> </tr> <tr> <td><input type="checkbox"/> C TO V</td> <td><input checked="" type="checkbox"/> C TO C</td> </tr> </table>		<input type="checkbox"/> V TO V	<input type="checkbox"/> V TO C	<input type="checkbox"/> C TO V	<input checked="" type="checkbox"/> C TO C	7. FAN AND NYCA 6135-4534-0000		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
<input type="checkbox"/> V TO V	<input type="checkbox"/> V TO C								
<input type="checkbox"/> C TO V	<input checked="" type="checkbox"/> C TO C								
9 ORGANIZATIONAL DESIGNATIONS DDO/LATIN-AMERICA DIVISION CUBA OPERATIONS GROUP OPS BRANCH			10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.						
11 POSITION TITLE OPERATIONS OFFICER (14)			12 POSITION NUMBER CQ65		13 CAREER SERVICE DESIGNATION DQB				
14 CLASSIFICATION SCHEDULE (G.S. E.B. etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12 2					
17 SALARY OR RATE \$ 19,078									
18 REMARKS									
18A SIGNATURE OF REQUESTING OFFICIAL <i>H.L. Berthold</i> H.L. BERTHOLD, C/LA/PERS			DATE SIGNED 26 AUG 75		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>				
DATE SIGNED <i>[Signature]</i>									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE 56	20 EMPLOY CODE 10	21 OFFICE CODE 51500	22 STATION CODE LA	23 INITIATOR CODE 17813	24 MODIFIER CODE				
25 DATE OF BIRTH 09/24/35	26 DATE OF GRACE	27 DATE OF LEI	28 OTHER DATA EGO DATA →						
29 DATE OF REFERENCE	30 DATE OF REFERENCE	31 DATE OF REFERENCE	32 DATE OF REFERENCE	33 DATE OF REFERENCE	34 DATE OF REFERENCE				
29. DATE OF REFERENCE (MAY BE MORE THAN ONE)									
30. DATE OF REFERENCE (MAY BE MORE THAN ONE)									
31. DATE OF REFERENCE (MAY BE MORE THAN ONE)									
32. DATE OF REFERENCE (MAY BE MORE THAN ONE)									
33. DATE OF REFERENCE (MAY BE MORE THAN ONE)									
34. DATE OF REFERENCE (MAY BE MORE THAN ONE)									

1117 USE PREVIOUS EDITIONS

SECRET

13 AUGUST 1975 02:42

D-NO

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 10 SEPTEMBER 1974	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, DANIEL			
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 15 74		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CF TO V		V TO CF XX CF TO CF		7 PAN AND NSCA 5135 4534 0000	
8 LEGAL AUTHORITY (Completed by Office of Personnel)			9 ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION WH/COG OPS BRANCH		
10 LOCATION OF OFFICIAL STATION WASH D.C.			11 POSITION NUMBER 1159		12 CAREER SERVICE DESIGNATION DQB
13 COMMUNICATIONS SCHEDULE (G, L, R, etc.) GS		14 OCCUPATIONAL SERIES 0136.01		15 GRADE AND STEP 12 1	
16 SALARY GRADE 17,497		17 REMARKS From position 1134 Wash, D.C. Wash, D.C.			
18 SIGNATURE OF REQUESTING OFFICIAL H.E. BEUTHOLD D/WH/PERS		DATE SIGNED 12 SEP 74		19 APPROVING OFFICER Rubio	
DATE SIGNED 16 Sept 74		20 APPROVING OFFICER			
SPACES BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
21 OFFICE SYMBOL 37 10	22 EMPLOY CODE 513001	23 OFFICE CODES WH	24 STATION CODE 15013	25 ATTACHED CODE 1	26 MONTHS 08 04 35
27 BAR OF REF. 1 08 04 35	28 BAR OF REF. 2	29 BAR OF REF. 3	30 BAR OF REF. 4	31 DATE OF 1st	32 DATE OF 2nd
33 DATE OF 3rd	34 DATE OF 4th	35 DATE OF 5th	36 DATE OF 6th	37 DATE OF 7th	38 DATE OF 8th
FOOD DATA					
29 EXTENSION COMMENTS					

40

42

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
1 SERIAL NUMBER 036130		2 NAME (Last-First-Initial) Flores, Daniel				11 July 74
3 NATURE OF PERSONNEL ACTION Reassignment			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 22 74		5 CATEGORY OF EMPLOYMENT Regular	
6 FUNDS		7. PAN AND NSCA		8 LEGAL AUTHORITY (Completed by Office of Personnel)		
V TO V C TO V		V TO CP C TO CP		5 0135-4534		0000
9. ORGANIZATIONAL DESIGNATIONS DDO/WH Division WH/COG Ops Support Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. CLASSIFICATION SCHEDULE (G.S., F.R., etc.) GS		13 OCCUPATIONAL SERIES 0136.01		12 POSITION NUMBER 1134		13 CAREER SERVICE DESIGNATION DQB
14 GRADE AND STEP 12 1		15 OCCUPATIONAL SERIES		17 SALARY OR RATE \$ 17,497		
18 REMARKS From [] 57085 *						
18A SIGNATURE OF REQUESTING OFFICIAL H. L. Berthold, C/WH/PERS			DATE SIGNED 11 July 74		DATE SIGNED 7/18/74	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE 37 10		21 OFFICE CODES NUMERIC ALPHABETIC 51500 004 75012		23 INTEGRAL CODE		24 MOODS CODE 1
25 DATE OF BIRTH MO DA YR 08 14 35		26 DATE OF GRADE MO DA YR		27 DATE OF LST MO DA YR		28 SECURITY REG NO
29 SET PERFORMING CODE		30 SET EMP DATE		31 LOAN EMP DATE		32 LABOR LIST CODE
33 SET EMP DATE		34 LOAN EMP DATE		35 LABOR LIST CODE		36 SOCIAL SECURITY NO
37 SET EMP DATE		38 LOAN EMP DATE		39 LABOR LIST CODE		40 SOCIAL SECURITY NO
41 SET EMP DATE		42 LOAN EMP DATE		43 LABOR LIST CODE		44 SOCIAL SECURITY NO
45 SET EMP DATE		46 LOAN EMP DATE		47 LABOR LIST CODE		48 SOCIAL SECURITY NO
49 SET EMP DATE		50 LOAN EMP DATE		51 LABOR LIST CODE		52 SOCIAL SECURITY NO
53 SET EMP DATE		54 LOAN EMP DATE		55 LABOR LIST CODE		56 SOCIAL SECURITY NO
57 SET EMP DATE		58 LOAN EMP DATE		59 LABOR LIST CODE		60 SOCIAL SECURITY NO
61 SET EMP DATE		62 LOAN EMP DATE		63 LABOR LIST CODE		64 SOCIAL SECURITY NO
65 SET EMP DATE		66 LOAN EMP DATE		67 LABOR LIST CODE		68 SOCIAL SECURITY NO
69 SET EMP DATE		70 LOAN EMP DATE		71 LABOR LIST CODE		72 SOCIAL SECURITY NO
73 SET EMP DATE		74 LOAN EMP DATE		75 LABOR LIST CODE		76 SOCIAL SECURITY NO
77 SET EMP DATE		78 LOAN EMP DATE		79 LABOR LIST CODE		80 SOCIAL SECURITY NO
81 SET EMP DATE		82 LOAN EMP DATE		83 LABOR LIST CODE		84 SOCIAL SECURITY NO
85 SET EMP DATE		86 LOAN EMP DATE		87 LABOR LIST CODE		88 SOCIAL SECURITY NO
89 SET EMP DATE		90 LOAN EMP DATE		91 LABOR LIST CODE		92 SOCIAL SECURITY NO
93 SET EMP DATE		94 LOAN EMP DATE		95 LABOR LIST CODE		96 SOCIAL SECURITY NO
97 SET EMP DATE		98 LOAN EMP DATE		99 LABOR LIST CODE		100 SOCIAL SECURITY NO

FORM 100

SECRET

CLASSIFIED BY 9-4444

FORM 100

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 18 June 1974	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES DANIEL					
3 NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 23 74		5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS V TO V CP TO V		V TO CP X CP TO CP		7 PAY GRADE 413570XY		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 SECT. 203	
9 ORGANIZATIONAL DESIGNATIONS DDO/WH Division				10 LOCATION OF OFFICIAL STATION			
11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, LS, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 12		17 SALARY OR RATE \$	
18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.							
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
18C DATE SIGNED							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC		22 STATION CODE	23 OFFICER CODE	24 HOURS/LEAVE	25 DATE OF BIRTH 3 08 04 35
26 DATE OF GRADE	27 DATE OF LIT	28 RETIREMENT DATA	29 SEPARATION DATA	30 SEPARATION DATA	31 SEPARATION DATA	32 SEPARATION DATA	33 SECURITY REG NO
34 SET PROVISIONS	35 SET PROVISIONS	36 SET PROVISIONS	37 SET PROVISIONS	38 SET PROVISIONS	39 SET PROVISIONS	40 SET PROVISIONS	41 SET PROVISIONS
42 SET PROVISIONS	43 SET PROVISIONS	44 SET PROVISIONS	45 SET PROVISIONS	46 SET PROVISIONS	47 SET PROVISIONS	48 SET PROVISIONS	49 SET PROVISIONS
50 REMARKS (EXCLUDING COMMENTS BY MEMBER)				51 LEARN CAT		52 OTHER TAB DATA	
53 REMARKS (EXCLUDING COMMENTS BY MEMBER)				54 OTHER TAB DATA		55 OTHER TAB DATA	
56 REMARKS (EXCLUDING COMMENTS BY MEMBER)				57 OTHER TAB DATA		58 OTHER TAB DATA	
59 REMARKS (EXCLUDING COMMENTS BY MEMBER)				60 OTHER TAB DATA		61 OTHER TAB DATA	
62 REMARKS (EXCLUDING COMMENTS BY MEMBER)				63 OTHER TAB DATA		64 OTHER TAB DATA	
65 REMARKS (EXCLUDING COMMENTS BY MEMBER)				66 OTHER TAB DATA		67 OTHER TAB DATA	
68 REMARKS (EXCLUDING COMMENTS BY MEMBER)				69 OTHER TAB DATA		70 OTHER TAB DATA	
71 REMARKS (EXCLUDING COMMENTS BY MEMBER)				72 OTHER TAB DATA		73 OTHER TAB DATA	
74 REMARKS (EXCLUDING COMMENTS BY MEMBER)				75 OTHER TAB DATA		76 OTHER TAB DATA	
77 REMARKS (EXCLUDING COMMENTS BY MEMBER)				78 OTHER TAB DATA		79 OTHER TAB DATA	
80 REMARKS (EXCLUDING COMMENTS BY MEMBER)				81 OTHER TAB DATA		82 OTHER TAB DATA	
83 REMARKS (EXCLUDING COMMENTS BY MEMBER)				84 OTHER TAB DATA		85 OTHER TAB DATA	
86 REMARKS (EXCLUDING COMMENTS BY MEMBER)				87 OTHER TAB DATA		88 OTHER TAB DATA	
89 REMARKS (EXCLUDING COMMENTS BY MEMBER)				90 OTHER TAB DATA		91 OTHER TAB DATA	
92 REMARKS (EXCLUDING COMMENTS BY MEMBER)				93 OTHER TAB DATA		94 OTHER TAB DATA	
95 REMARKS (EXCLUDING COMMENTS BY MEMBER)				96 OTHER TAB DATA		97 OTHER TAB DATA	
98 REMARKS (EXCLUDING COMMENTS BY MEMBER)				99 OTHER TAB DATA		100 OTHER TAB DATA	

45

EOD DATA

SK out

See memo signed by [Signature] dated 6/18/74

1152 USE PREVIOUS EDITIONS (1-71)

SECRET

FORM 100-101 (1-71)

SECRET
(When Filled In)



REQUEST FOR PERSONNEL ACTION

DATE PREPARED

19 NOVEMBER 1973

1 SERIAL NUMBER 036130
2 NAME (Last-First-Middle) FLORES DANIEL

3 NATURE OF PERSONNEL ACTION
PROMOTION

4 EFFECTIVE DATE REQUESTED
MONTH 11 DAY 25 YEAR 73

5 CATEGORY OF EMPLOYMENT
REGULAR

6 FUNDS
V TO V
CF TO V X CF TO CF

7 FAN AND NSCA
4135 1084 0000

8 LEGAL AUTHORITY (Completed by Office of Personnel)

9 ORGANIZATIONAL DESIGNATIONS
DDO/WII DIVISION
FOREIGN FIELD
BR 3 - [] STATION

10 LOCATION OF OFFICIAL STATION
[]

11 POSITION TITLE
OPS OFFICER (12)

12 POSITION NUMBER
0136

13 CAREER SERVICE DESIGNATION
D

14 CLASSIFICATION SCHEDULE (GS, I.B., etc.)
GS

15 OCCUPATIONAL SERIES
0136.01

16 GRADE AND STEP
12 1

17 SALARY OR RATE
\$ 17497

18 REMARKS
From: GS-11.4
HOME BASE: WII
[]
[]

18a []
AC/WII/Pers

DATE SIGNED
19 Nov 73

18b SIGNATURE OF CAREER SERVICE APPROVING OFFICER
[]

DATE SIGNED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 51160 WII 52085	22 STATION CODE	23 INTEGRAL CODE	24 MONTHS CODE 3	25 DATE OF BEGIN MO DA YR 03 10 73	26 DATE OF GRAD MO DA YR 11 12 73	27 DATE OF LEI MO DA YR 11 12 73
28 WTS EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA →			
33 WET PREFERENCE CODE 0 - NONE 1 - 5 FT 2 - 10 FT	34 SERV COMP. DATE MO DA YR	35 LONG COMP DATE MO DA YR	36 CAREER CATEGORY CAR/BSS/PROV/TEMP CODE	37 FEGLI/HEALTH INSURANCE CODE 1 - FEGLI 2 - HEALTH INSURANCE	38 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YEARS) 3 - BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		44 STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO		45 SOCIAL SECURITY NO	
46 POSITION CONTROL CERTIFICATION 1-23-73 29 NOV 1973			47 O.P. APPROVAL [Signature]			48 DATE APPROVED 23 Nov 73		

FORM 1152

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-0311

11 2 APR 68

(8)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 23 Nov 71	
1. SERIAL NUMBER 036130 ✓		2. NAME (Last-First-Middle) FLORES, DANIEL ✓					
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH: 11 DAY: 28 YEAR: 71		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS ▶		V TO V CP TO V		V TO CP CP TO CP		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH <i>Division</i> FOREIGN FIELD BRANCH 3 - [] STATION				10. LOCATION OF OFFICIAL STATION []			
11. POSITION TITLE OPS OFFICER (12)				12. POSITION NUMBER 0136		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 3		17. SALARY OR RATE \$ 13,457 ✓	
18. REMARKS From GS 10. 3 * []							
18A. SIGNATURE OF REQUESTING OFFICIAL []			DATE SIGNED 23 Nov 71		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER []		DATE SIGNED 11/23/71
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 51760 ALPHABETIC: WH		22. STATION CODE 57035	23. INTEGRAL CODE []	24. BUDGET CODE 3	25. DATE OF BIRTH MO. DA. YR.: 08/04/33
26. DATE OF GRADE MO. DA. YR.: 11/25/71	27. DATE OF LEI MO. DA. YR.: 11/25/71	28. SPECIAL RESERVE 1-ESC 2-ORGR 3-FICA 4-None		29. RETIREMENT DATA CODE	30. SEPARATION DATA CODE	31. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	32. SECURITY REG. NO
33. VET PREFERENCE CODE: 0-None, 1-5 PT, 2-10 PT	34. SERV COMP DATE MO. DA. YR.		35. LOBS COMP DATE MO. DA. YR.		36. CAREER CATEGORY CODE	37. FEGLI/HEALTH INSURANCE CODE: 0-WAIVER, 1-REG, 2-REG/OPT, 3-UNAVAILABLE	
38. SOCIAL SECURITY NO	39. PERIODS (FEDERAL GOVERNMENT SERVICE) CODE: 0-NO PREVIOUS SERVICE, 1-NO OTHER IS SERVICE, 2-OTHER IS SERVICE (LESS THAN 3 YEARS), 3-OTHER IS SERVICE (MORE THAN 3 YEARS)		40. LEAVE CAT CODE	41. FEDERAL TAX DATA FORM EXECUTED: 1-YES, 2-NO		42. STATE TAX DATA CODE: MO. TAX EXEMPTIONS, STATE CODE	
43. POSITION CONTROL CERTIFICATION []				44. O P APPROVAL []		DATE APPROVED 11/23/71	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

**FILE
PUNCHED
BY**

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-26	MIDDLE
036130	FLORES	DANIEL	

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 OPI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION	37			40-42
09	24	71					1			570

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREAS	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37			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
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. **178740** DOCUMENT DATE/PERIOD **9/10/71**

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	<input checked="" type="checkbox"/>	
C & L DIVISION CY88.	DATE	SIGNATURE
C & T DIVISION	9/14/71	

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

SECRET
EYES ONLY

18 NOV 1971
Approved by CS Career
Service Panel
[Signature]

17 AUG 1971

MEMORANDUM FOR: Secretary, CSCS Panel A

SUBJECT : Recommendation for Promotion to Grade
GS-11, Daniel Flores

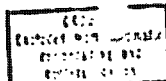
1. It is recommended that Mr. Daniel Flores be promoted from GS-10 to GS-11.

2. Mr. Flores is 36 years old and joined the Agency in March 1962. He has successively been a file clerk, translator, intelligence assistant, career trainee and operations officer. He worked part time for several years so that he could obtain his BA degree from American University. This he did in 1967 with his specialty being Latin American Affairs.

3. Mr. Flores, who is bilingual in English and Spanish, has just completed his first overseas tour as an operations officer in [redacted]. It is on the basis of his very fine performance during this tour that this promotion request is based. Also as a result of his record in [redacted] he has been assigned to [redacted] Station as an operations officer in a position which is rated as GS-13.

4. The Chief of Base, [redacted] and the Chief of Station, [redacted] both have rated Mr. Flores as "Strong" in his fitness reports and both have stated that his performance in [redacted] merited a Quality Step Increase. This QSI request is currently being processed and is based on the outstanding job Mr. Flores did in connection with a very sensitive [redacted] operation. He planned the [redacted] aspects, supervised the installation, located the [redacted] recruited the [redacted] and processed all the intelligence which was produced. The intelligence derived from this source has been of consistently high quality and the operation has been described by the Chief of Station, [redacted] as the best and most productive of all the operations in [redacted]. Throughout all aspects of the operation, Mr. Flores maintained tight control on its security and avoided any problems in this respect.

SECRET
EYES ONLY



SECRET
EYES ONLY

-2-

5. By his performance in [redacted] Mr. Flores has demonstrated that he has found his proper role as an operations officer and that he has potential for growth in this area of endeavor. WH Division strongly recommends that he be promoted to GS-11.

James E. Shannon
William W. Proctor
Chief
Western Hemisphere Division

SECRET
EYES ONLY

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 7 September 1971	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES DANIEL			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 / 14 / 71		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CP TO V		V TO CP X CP TO CP		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084	8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 [] STATION			10. LOCATION OF OFFICIAL STATION []		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0136	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 10 3	17. SALARY OR RATE \$ 12235	
18. REMARKS From DDP/WH #0376 Vice [] Approved 259a attached. From 259a: Mr. Flores' Spanish capabilities are native reading and high speaking which more than meet the language requirements of intermediate reading and speaking for the Station. HB:WH					
18A. SIGNATURE OF REQUESTING OFFICIAL Henry L. Berthold, C/WH/Pers			DATE SIGNED 9/13/71	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED 11/1/71
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37 10	20. EMPLOY CODE 51 100	21. OFFICE CODING NUMERIC ALPHABETIC 60 57035		22. STATION CODE 57035	23. BRIGADE CODE
24. MOONIES CODE 3	25. DATE OF BIRTH MO. DA. YR. 08/04/35		26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.	28. SECURITY REG. NO
29. BTE EXP. MO. DA. YR. XX/XX/XX	30. SPECIAL REFERENCE 1-CSI 2-ORIN 3-FILA 4-ORIN	31. RETIREMENT DATA CODE	32. SEPARATION DATA CODE	33. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	34. SECURITY REG. NO
35. VET PREFERENCE CODE 0-None 1-1 PT 2-10 PT	36. SERV COMP DATE MO. DA. YR.	37. LONG COMP DATE MO. DA. YR.	38. CAREER CATEGORY CODE (AS B13) PROG TEMP	39. FEGLI HEALTH INSURANCE CODE CODE 1-None 2-REG/OPT 3-RELIABLE	40. SOCIAL SECURITY NO
41. PREVIOUS (CIVILIAN GOVERNMENT SERVICE) CODE 0-NO PREVIOUS SERVICE 1-NO DELAY IN SERVICE 2-DELAY IN SERVICE (LESS THAN 3 YEARS) 3-DELAY IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM SECURED CODE MO TAX EXEMPTIONS 1-YES 2-NO	44. STATE TAX DATA FORM SECURED CODE MO TAX STATE CODE 1-YES 2-NO	45. STATE TAX DATA
46. POSITION CONTROL CERTIFICATION			47. OF APPROVAL		DATE APPROVED

1152 USE PREVIOUS EDITION

SECRET

FORM 8-71
10-1000 (USE PREVIOUS EDITIONS)
GPO: 1971 O-370-000

SECRET
EYES ONLY

Approved for Career
Security Panel
27 JUN 1970

2 JUN 1970

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

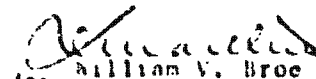
SUBJECT : Recommendation for Promotion to Grade
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-9 to GS-10. Mr. Flores has been in his present grade since April 1969.

2. Mr. Flores joined the Agency in 1962. Initially he was employed on a part-time basis in the WH Division while attending American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the WH Division, he was selected for assignment as an operations officer at the [redacted] Base, where he arrived in May 1969.

3. Mr. Flores has made a most impressive beginning in [redacted]. He has adapted to new tasks and a new environment with a mature assurance and a professional approach. Shortly after arrival in [redacted] the Base was temporarily depleted of other officers. Mr. Flores carried out the duties of acting Chief of Base in a most commendable manner. His fluency in Spanish and his Latin background have been definite assets in the performance of his duties. His performance to date has demonstrated that he handles his agents securely and productively. Both Mr. Flores and his wife have been well accepted within the local community and they carry out their representational duties very effectively.

4. Mr. Flores has proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level higher than his present grade and a promotion at this time is strongly recommended.


William V. Broc
Chief
Western Hemisphere Division

SECRET
EYES ONLY

DISPATCH

CLASSIFICATION
SECRET

FIG. 17

TO: Chief, WI Division

Z

FROM: Chief of Station, [redacted]

FROM: Chief of Base, [redacted]

SUBJECT: ADMINISTRATIVE/PERSONNEL - Promotion for [redacted]

ACTION REQUIRED - REFERENCES

ACTION REQUIRED: See Below

Approved by CS Career
Service Panel
17 JUL 1970

JWILL Flores

During the visit of the Chief, WHD to the Base last November 1969 he mentioned to the COS, [redacted] and the COB that the promotion for ^{Flores} [redacted] (from GS-9 to GS-10) would be forthcoming; he also said this to ^{Flores} [redacted] during a private meeting. Thus far, however, there has been no notice of the promotion action. The COB assumes that the delay is related in some way to the dates set for meeting of the promotion panel for ^{Flores} [redacted] grade. If this assumption is not correct, however, and some further action by the Base is necessary in addition to the recommendation contained in ^{Flores} [redacted] last Fitness Report, the COB would appreciate being advised.

Distribution:
Orig. & 2 - C/WHD
2 - COS, [redacted]

[redacted signature]

15/

[redacted box]

DISPATCH TO

DISPATCH SYMBOL AND NUMBER

DATE

HQST-1474

26 May 1970

CLASSIFICATION

POSTAL SYMBOL

SECRET
SECRET

SECRET
(U.S. Gov. Property)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER		2 NAME (Last-First-Middle)		9 APRIL 1969	
036130		FLORES, DANIEL			
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT
			MONTH DAY YEAR 04 10 69		REGULAR
6 FUNDS		7 FINANCIAL ANALYSIS NO CHARGEABLE	8 LEGAL AUTHORITY (Completed by Office of Personnel)		
V TO V CP TO V		V TO CP CP TO CP	0135 0884		
9 ORGANIZATIONAL DESIGNATIONS			10 LOCATION OF OFFICIAL STATION		
DDP/WH FOREIGN FIELD BRANCH 3			STATION <u>Base</u> <u>Agda</u>		
11 POSITION TITLE		12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION		
OPS OFFICER		0376	D		
14 CLASSIFICATION SCHEDULE (GS, I.R., etc.)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE	
GS		0138.01	09 2	\$ 8744	
18 REMARKS					
X <u>ALL</u> SICK AND <u>ALL</u> HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE					
X MARITAL STATUS: MARRIED					
DATE SIGNED		188 SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
X5013.					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGRIS CODE
55	10	NUMERIC ALPHABETIC 51700 104		19559	3
24 MONTHS	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LET
3	MO DA YR 08 04 35		MO DA YR		MO DA YR
28 RATE EXPRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA	33 SECURITY REQ NO
MO DA YR	1-100 2-100	CODE	CODE	MO DA YR	MO DA YR
34 RET PREFERENCE	35 SERV COMP DATE	36 LONG COMP DATE	37 CAREER CATEGORY	38 FICA HEALTH INSURANCE	39 SOCIAL SECURITY NO
CODE	MO DA YR	MO DA YR	CODE	CODE	CODE
40 PERIODS FULFILLED GOVERNMENT SERVICE	41 LEAVE CAT CODE	42 FEDERAL TAX DATA	43 STATE TAX DATA	44 POSITION CONTROL CERTIFICATION	45 OP APPROVAL
CODE	CODE	CODE	CODE	CODE	CODE
1-NO PREVIOUS SERVICE 2-60 DAYS OR MORE 3-90 DAYS OR MORE (LESS THAN 3 YEARS) 4-90 DAYS OR MORE (MORE THAN 3 YEARS)	1-YES 2-NO	NO TAX EXEMPTIONS 1-YES 2-NO	NO TAX EXEMPTIONS 1-YES 2-NO	DATE APPROVED	DATE APPROVED
				04-21-69	04-21-69

FORM 1152 USE PREVIOUS EDITION

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CONTAINS PROP. INFORMATION UNCLASSIFIED-00

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 3 April 1969	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL			3 NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO NEW FUNDS, AND CHANGE OF SERVICE DESIGNATION	
4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 06 69	5 CATEGORY OF EMPLOYMENT REGULAR		6 FUNDS V TO V CF TO V	7 FINANCIAL ANALYSIS NO CHARGEABLE 9135 0884	8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDP7WH FOREIGN FIELD BRANCH #3 STATION BASE			10 LOCATION OF OFFICIAL STATION		
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 0376	13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (G.S. LB, etc.) GS	15 OCCUPATIONAL SERIES 0136,01	16 GRADE AND STEP 09 2	17 SALARY OR RATE \$ 8744		
18 REMARKS APPROVED 259a ATTACHED. FROM: DDP/WH/Branch 4/Pos. 1441. GS-08, step 2, \$7956/annum. I CONCUR IN CHANGE OF SERVICE DESIGNATION FROM SJ TO D: (Signed on original) 3 Apr 69 CONCUR: OTR/PERS					
18A SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD		DATE SIGNED 3 APR 69	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 4 APR 1969
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 20	20 EMPLOY CODE 10	21 OFFICE CODING SYMBOLIC ALPHABETIC 5170 WH	22 STATION CODE A559	23 INTEGER CODE 3	24 MONTHS CODE 0810435
25 DATE OF BIRTH MO DA YR 04 10 67	26 DATE OF GRADE MO DA YR 04 10 67	27 DATE OF LEI MO DA YR 04 10 67	28 RETIREMENT DATA CODE EOD DATA	29 SEPARATION DATA CODE TYPE NO DA YR	30 CORRECTION CANCELLATION DATA MO DA YR
31 NET PREFERENCE CODE 0- NONE 1- 5 YR 2- 10 YR	32 SERV COMP DATE MO DA YR	33 LONG COMP DATE MO DA YR	34 CAREER CATEGORY CODE LAB RELD PROG TEMP	35 FEGLI HEALTH INSURANCE CODE 0- WAIVED 1- YES	36 SOCIAL SECURITY NO
37 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0- NO PREVIOUS SERVICE 1- NO BREAK IN SERVICE 2- BREAK IN SERVICE (LESS THAN 3 YEARS) 3- BREAK IN SERVICE (MORE THAN 3 YEARS)		38 LEAVE CAT CODE	39 FEDERAL TAX DATA FORM EXECUTED CODE 1- YES 2- NO	40 STATE TAX DATA FORM EXECUTED CODE 1- YES 2- NO	41 STATE TAX DATA FORM EXECUTED CODE 1- YES 2- NO
42 POSITION CONTROL CERTIFICATION			43 OFF OF APPROVAL		44 DATE APPROVED

55

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37

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

23 SEPTEMBER 1968

1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL
----------------------------------	---

3 NATURE OF PERSONNEL ACTION REASSIGNMENT	4 EFFECTIVE DATE REQUESTED MONTH: 10 DAY: 06 YEAR: 68	5 CATEGORY OF EMPLOYMENT REGULAR
---	---	--

6 FUNDS XX V TO V CF TO V	7 FINANCIAL ANALYSIS NO CHARGEABLE 9235 0620	8 LEGAL AUTHORITY (Completed by Office of Personnel)
---------------------------------	--	--

9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 4 SECTION	10 LOCATION OF OFFICIAL STATION WASH., D. C.
---	--

11 POSITION TITLE Ops Officer CAREER TRAINING	12 POSITION NUMBER 1441	13 CAREER SERVICE DESIGNATION SJ
---	-----------------------------------	--

14 CLASSIFICATION SCHEDULE (GS, FS, etc.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 08 2	17 SALARY OR RATE \$7,956
--	--	----------------------------------	-------------------------------------

18. REMARKS

FROM: **DDS/OTR/CAREER TRAINING PROGRAM/0748**

Security *Security* CONCUR: OTR/CTP

1 - Finance
1 - Security

CSIS/SP 0958

18A SIGNATURE OF REQUESTING OFFICER HENRY L. BERTHOLD C/WH/PERSONNEL	DATE SIGNED 24 Sep 68	18B SIGNATURE OF MOVING OFFICER C/CTP	DATE SIGNED
--	---------------------------------	---	-------------

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 51450 ALPHABETIC: WH	22 STATION CODE 73213	23 INTEGRATE CODE	24 HQ/PTS CODE 1	25 DATE OF BIRTH MO DA YR: 08/04/35	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
28 DTE EXPIRES MO DA YR	29 SPECIAL REFERENCE 1-OK 2-DEB 3-FLA 4-PROB	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA MO DA YR	EOD DATA →		33 SECURITY REG NO.	34 SER
35 VET PREFERENCE CODE 0-None 1-1 YR 2-10 YR	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY LAW RESV PROP TYP	39 FEDERAL HEALTH INSURANCE CODE CODE CODE 0-BAIPI 1-YES HEALTH INS CODE	40 SOCIAL SECURITY NO.			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO SERVICE 2-1 YEAR 3-2 YEARS 4-3 YEARS 5-4 YEARS 6-5 YEARS 7-6 YEARS 8-7 YEARS 9-8 YEARS 10-9 YEARS 11-10 YEARS 12-11 YEARS 13-12 YEARS 14-13 YEARS 15-14 YEARS 16-15 YEARS 17-16 YEARS 18-17 YEARS 19-18 YEARS 20-19 YEARS 21-20 YEARS 22-21 YEARS 23-22 YEARS 24-23 YEARS 25-24 YEARS 26-25 YEARS 27-26 YEARS 28-27 YEARS 29-28 YEARS 30-29 YEARS 31-30 YEARS 32-31 YEARS 33-32 YEARS 34-33 YEARS 35-34 YEARS 36-35 YEARS 37-36 YEARS 38-37 YEARS 39-38 YEARS 40-39 YEARS 41-40 YEARS 42-41 YEARS 43-42 YEARS 44-43 YEARS 45-44 YEARS 46-45 YEARS 47-46 YEARS 48-47 YEARS 49-48 YEARS 50-49 YEARS 51-50 YEARS 52-51 YEARS 53-52 YEARS 54-53 YEARS 55-54 YEARS 56-55 YEARS 57-56 YEARS 58-57 YEARS 59-58 YEARS 60-59 YEARS 61-60 YEARS 62-61 YEARS 63-62 YEARS 64-63 YEARS 65-64 YEARS 66-65 YEARS 67-66 YEARS 68-67 YEARS 69-68 YEARS 70-69 YEARS 71-70 YEARS 72-71 YEARS 73-72 YEARS 74-73 YEARS 75-74 YEARS 76-75 YEARS 77-76 YEARS 78-77 YEARS 79-78 YEARS 80-79 YEARS 81-80 YEARS 82-81 YEARS 83-82 YEARS 84-83 YEARS 85-84 YEARS 86-85 YEARS 87-86 YEARS 88-87 YEARS 89-88 YEARS 90-89 YEARS 91-90 YEARS 92-91 YEARS 93-92 YEARS 94-93 YEARS 95-94 YEARS 96-95 YEARS 97-96 YEARS 98-97 YEARS 99-98 YEARS 100-99 YEARS		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS FORM EXECUTED CODE NO TAX EXEMPTIONS		44 STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS FORM EXECUTED CODE NO TAX EXEMPTIONS			
45 POSITION CONTROL CERTIFICATION			46 APPROVAL			DATE		

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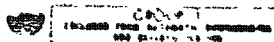
SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED		
1 SERIAL NUMBER 736130										2 NAME (Last-First-Middle) FLORES, Daniel		10 June 1968
3 NATURE OF PERSONNEL ACTION PROMOTION					4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 15 68			5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS		XX	V TO V		V TO G	7 FINANCIAL ANALYSIS NO. CHARGEABLE 8275 2100			8 LEGAL AUTHORITY (Completed by Office of Personnel)			
			CF TO V		CF TO G	9 ORGANIZATIONAL DESIGNATIONS DCG/OTR CAREER TRAINING PROGRAM						10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.
11 POSITION TITLE CAREER TRAINEE					12 POSITION NUMBER 0748		13 CAREER SERVICE DESIGNATION SJ					
14 CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS			15 OCCUPATIONAL SERIES 0090.01		16 GRADE AND STEP 08 2		17 SALARY OR RATE \$ 7630					
18 REMARKS												
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER C/CTP				DATE SIGNED 6/13/68		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 28300 CTP		22 STATION CODE 75013	23 INTEGRAL CODE	24 NOTES CODE	25 DATE OF BIRTH MO. DA. YR. 08 04 35		26 DATE OF GRADE MO. DA. YR.		27 DATE OF LEI MO. DA. YR.	
28 HRS EXP-RES MO. DA. YR.		29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO. DA. YR.		EOD DATA →		33 SECURITY CODE	34 LEI	
35 HRS PREFERENCE CODE 0-0000 1-3 PT 2-10 PT		36 SERV COMP DATE MO. DA. YR.		37 LONG COMP DATE MO. DA. YR.		38 CAREER CATEGORY JOB DES. PROB. TEMP. CODE	39 FEGLI HEALTH INSURANCE CODE 0-WAIVE 1-WF HEALTH INS. CODE		40 SOCIAL SECURITY NO.			
41 PERIODS (FEDERAL GOVERNMENT SERVICE) CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42 LEAVE CAT. CODE	43 FEDERAL TAB DATA FORM EXECUTED CODE NO. TAB EXEMPTIONS		44 STATE TAB DATA FORM EXECUTED CODE NO. STATE CODE					
45 POSITION CONTROL CERTIFICATION RC 6/13/68						46 O.P. APPROVAL			DATE APPROVED 6/13/68			

Form 1152 USE PREVIOUS EDITIONS

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CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

THROUGH : Executive Secretary
CSCT Selection Board

SUBJECT : Application for Career Training Program

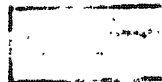
1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.

2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.

3. Should you have any further questions, do not hesitate to call on the Program Officers.

ROBERT B. FREEMAN
Chief, CTP

CONFIDENTIAL



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(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 3 August 1967	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES DANIEL			
3 NATURE OF PERSONNEL ACTION PROMOTION & PAY ADJUSTMENT TO FULL TIME (CORRECTION)			4 EFFECTIVE DATE REQUESTED 01/07/67		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> CF TO V		7 FINANCIAL ANALYSIS NO. CHARGEABLE 8235 0620		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION			10 LOCATION OF OFFICIAL STATION WASH., D. C.		
11 POSITION TITLE INTELLIGENCE ASST			12 POSITION NUMBER 1174	13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (G.S. I.R. IN.) GS		15 OCCUPATIONAL SERIES 0301.28	16 GRADE AND STEP 06 3	17 SALARY OR RATE \$ 6263. ✓	
18 REMARKS FINANCIAL ANALYSIS NO. (#7) TO READ: 8235 0620					
19 SIGNATURE OF REQUESTER Henry LV Berthold C/WH/PERS			DATE SIGNED 8/1/67	20 SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]	
21 DATE OF BIRTH		22 DATE OF ENTRY		23 DATE OF SEPARATION	
24 DATE OF DEATH		25 DATE OF REENTRY		26 DATE OF RESEPARATION	
27 DATE OF REENTRY		28 DATE OF RESEPARATION		29 DATE OF REENTRY	
30 DATE OF RESEPARATION		31 DATE OF REENTRY		32 DATE OF RESEPARATION	
33 DATE OF REENTRY		34 DATE OF RESEPARATION		35 DATE OF REENTRY	
36 DATE OF RESEPARATION		37 DATE OF REENTRY		38 DATE OF RESEPARATION	
39 DATE OF REENTRY		40 DATE OF RESEPARATION		41 DATE OF REENTRY	
42 DATE OF RESEPARATION		43 DATE OF REENTRY		44 DATE OF RESEPARATION	
45 DATE OF REENTRY		46 DATE OF RESEPARATION		47 DATE OF REENTRY	
48 DATE OF RESEPARATION		49 DATE OF REENTRY		50 DATE OF RESEPARATION	
51 DATE OF REENTRY		52 DATE OF RESEPARATION		53 DATE OF REENTRY	
54 DATE OF RESEPARATION		55 DATE OF REENTRY		56 DATE OF RESEPARATION	
57 DATE OF REENTRY		58 DATE OF RESEPARATION		59 DATE OF REENTRY	
60 DATE OF RESEPARATION		61 DATE OF REENTRY		62 DATE OF RESEPARATION	
63 DATE OF REENTRY		64 DATE OF RESEPARATION		65 DATE OF REENTRY	
66 DATE OF RESEPARATION		67 DATE OF REENTRY		68 DATE OF RESEPARATION	
69 DATE OF REENTRY		70 DATE OF RESEPARATION		71 DATE OF REENTRY	
72 DATE OF RESEPARATION		73 DATE OF REENTRY		74 DATE OF RESEPARATION	
75 DATE OF REENTRY		76 DATE OF RESEPARATION		77 DATE OF REENTRY	
78 DATE OF RESEPARATION		79 DATE OF REENTRY		80 DATE OF RESEPARATION	
81 DATE OF REENTRY		82 DATE OF RESEPARATION		83 DATE OF REENTRY	
84 DATE OF RESEPARATION		85 DATE OF REENTRY		86 DATE OF RESEPARATION	
87 DATE OF REENTRY		88 DATE OF RESEPARATION		89 DATE OF REENTRY	
90 DATE OF RESEPARATION		91 DATE OF REENTRY		92 DATE OF RESEPARATION	
93 DATE OF REENTRY		94 DATE OF RESEPARATION		95 DATE OF REENTRY	
96 DATE OF RESEPARATION		97 DATE OF REENTRY		98 DATE OF RESEPARATION	
99 DATE OF REENTRY		100 DATE OF RESEPARATION		101 DATE OF REENTRY	

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(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED				
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) FLORES DANIEL				
3 NATURE OF PERSONNEL ACTION PROMOTION + Pay Adjustment to Full Time				4 EFFECTIVE DATE REQUESTED MONTH: 07 DAY: 30 YEAR: 67		5 CATEGORY OF EMPLOYMENT REGULAR PART-TIME		
6 FUNDS <input checked="" type="checkbox"/> X V TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		7 FINANCIAL ANALYSIS NO CHARGEABLE 8235 1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)				
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION				10 LOCATION OF OFFICIAL STATION WASH., D.C.				
11 POSITION TITLE INTELLIGENCE CLERK ASST (2)				12 POSITION NUMBER 1174		13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (G.S. I.B. etc.) GS		15 OCCUPATIONAL SERIES 0301.28		16 GRADE AND STEP 06 3		17 SALARY OR RATE \$ 6263.		
18 REMARKS Subject is returning to full-time duty on ³⁰ July 1967. Subject will graduate from Georgetown Univ. this month.								
19 [Signature Box] C/WH/PEPS				DATE SIGNED 28 June		18a SIGNATURE OF CAREER SERVICE SUPERVISING OFFICER [Signature]		
DATE SIGNED 28 June		DATE SIGNED 7 July						
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC	22 STATION CODE	23 OFFICIAL CODE	24 MODIFIER CODE	25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
22	10	43800	WH	7503	1	08/04/32	02/30/67	02/30/67
28 BIRTH DATE MO DA YR	29 SPECIAL EMPLOYMENT	30 PAY GRADE	31 SEPARATION DATE CODE	32 SEPARATION DATE	33 COLLECTION/RECALL DATE	[OD DATA]		34 SECURITY
35 NET PERIODIC	36 NEW EMP DATE	37 LONG LEAF BAZ	38 LABOR CATEGORY	39 FEELI RESULT	40 SOCIAL SECURITY NO			
41 PERSONNEL OFFICER'S SIGNATURE	42 SIGNATURE	43 SIGNATURE	44 SIGNATURE	45 SIGNATURE	46 SIGNATURE	47 SIGNATURE	48 SIGNATURE	49 SIGNATURE
50 PERSONNEL OFFICER'S SIGNATURE [Signature]				51 SIGNATURE [Signature]				

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July 21

MEMORANDUM FOR: Secretary CSCS Panel, Section D

SUBJECT : Recommendation for the Promotion of Mr.
Daniel Flores From GS-05 to GS-06.

1. Mr. Flores has been working in WH/COG and its predecessor groups since 1963. His fitness reports have been consistently good and the comments of his supervisors laudatory. In mid-1965 Mr. Flores was changed from full-time to part-time staff employee in order to allow him to attend American University on a full-time basis. His course of study leads to a Bachelor's Degree in Political Science with emphasis in Latin American affairs. Mr. Flores has made the Dean's List the past two semesters and will receive his degree in August 1967.

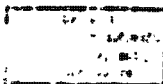
2. Throughout his career Mr. Flores has shown himself to be a strongly motivated employee, willing and capable. The calibre of his performance has been consistently good and he has shown steady improvement as he acquired the skills and knowledge of intelligence business. He is reliable and conscientious and we have good reason to expect that he will develop into a very competent operations officer. He will apply for the CT program in September and his application will be wholeheartedly supported by WH/COG.

3. In WH/COG Mr. Flores has served as an Intelligence Assistant in support of CI operations. In addition he has assisted in the training of agents in communications. Mr. Flores is bi-lingual - Spanish and English - and is adept as an operational Translator-Interpreter.

4. Mr. Flores was promoted to GS-05 on 16 March 1964. He has been performing duties at GS-06 level for the past two years and it is sincerely recommended that he be promoted promptly to GS-06.

William V. Broo
William V. Broo
Chief
Western Hemisphere Division

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(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORENZ MANTER			
3 NATURE OF PERSONNEL ACTION CHANGE EMPLOY			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08/15/66		5 CATEGORY OF EMPLOYMENT PART TIME
6 FUNDS X V TO V CF TO V		7 COST CENTER NO CHARGE 7235 1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATIONS TOP/WH WH/C THREE LITRICE BRANCH OCCUPATIONAL SUPPORT SECTION			10 LOCATION OF OFFICIAL STATION WASH., D.C.		
11 POSITION TITLE INTERSECTION CLERK (S)			12 POSITION NUMBER 1176	13 CAREER SERVICE DESIGNATION d	
14 CLASSIFICATION SCHEDULE (GS, FB, etc.) GS		15 OCCUPATIONAL SERIES 0301.27	16 GRADE AND STEP 05 4	17 SALARY OR RATE \$ 5859.	
18 REMARKS From: WH/C.Intel Br., R & R Sec.DC # 1181					
19 [Redacted]		DATE SIGNED 14 Sept 66		100 SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Redacted]	DATE SIGNED 11/16/66
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 37 20	20 EMPLOY CODE 51500	21 OFFICE CODING ALPHABETIC WH	22 STATION CODE 2503	23 INTEGRAL CODE 1	24 MOODS CODE 08/01/35
25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR	28 INTS EXP-RES MO DA YR	29 SPECIAL REFERABLE 1-CM 2-FICA 3-BORN	30 RETIREMENT DATA CODE
31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATE MO DA YR	33 SECURITY REG NO	34 SER	EOD DATA →	
35 VET PREFERENCE CODE 0-None 1-5 PT 2-10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY LAB SERV PROV TEMP	39 FEET HEALTH INSURANCE CODE 0-BAVIER 1-RES	40 SOCIAL SECURITY NO
41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE EST CODE	43 FEDERAL TAX DATA FORM PREVIOUS 1-RES 2-NO		44 STATE TAX DATA CODE 1-RES 2-NO
45 POSITION CONTROL CERTIFICATION 09-19-66 A			46 LSP APPROVAL [Signature]		DATE APPROVED

SECRET
(When Filled In)

9 September 1966

MEMORANDUM FOR: Mr. Daniel Flores

THROUGH : Head of CS 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.

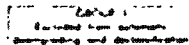
2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. This in no way affects your current 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 e 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.


Emmett D. Echols
Director of Personnel

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CENTRAL INTELLIGENCE AGENCY
WASHINGTON, D.C. 20505

17 JAN 1966

Claimant: **Daniel Flores**
File No.: **7000438**

Mr. Wilfred J. Harren
Chief of Section
Division of Claims Services
Bureau of Employees' Compensation
Washington, D. C. 20211

Dear Mr. Harren:

Reference is made to Subject's claim for benefits of the
Federal Employees' Compensation Act.

Enclosed is additional information submitted by claimant.

If we may be of further assistance in this matter, please
so advise.

Very truly yours,

/s/ B. DeFelice

B. DeFelice
Office of Personnel

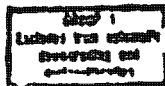
Enclosures:

As stated

Distribution: ✓

O-addressee, 1-D/Pers, 1-BCB
OP/BSD/BCB/[] (14 January 1966)

SECRET



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) HUGHES, Daniel ✓	
3 NATURE OF PERSONNEL ACTION TRANSFERENCE			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 1 1965		5 CATEGORY OF EMPLOYMENT Part Time
6 FUNDS X V TO V CF TO V		V TO CF CF TO CF	7 COST CENTER NO CHARGE ABLE 6235-1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C Intelligence Branch Reports and Requirements Section			10 LOCATION OF OFFICIAL STATION Washington, D.C.		
11 POSITION TITLE TELE. ROOM (1)			12 POSITION NUMBER 1134	13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GV, LH, etc) GS (06)		15 OCCUPATIONAL SERIES 0301.27	16 GRADE AND STEP 05 (3)	17 SALARY OR RATE \$ 5330	
18 REMARKS From: DDP/WH/CI St., #1130, D.C.					
DATE SIGNED 08/11/65		13 Aug 65		DATE SIGNED 8/20/65	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 37	20 EMPLOY CODE 20	21 OFFICE CODING NUMERIC ALPHABETIC 51500 UH		22 STATION CODE 75315	23 INTEGREE CODE
24 HDQTRS CODE 1 08 04 135		25 DATE OF BIRTH MO DA YR		26 DATE OF GRADE MO DA YR	
27 DATE OF LEI MO DA YR		28 NTE EXPIRES MO DA YR		29 SPECIAL REFERENCE	
30 RETIREMENT DATA 1-ESC 2-FICA 3-NONE		31 SEPARATION DATA CODE	32 CORRECTION LABELLATION DATA TYPE MO DA YR		33 SECURITY REG NO
34 SEX	35 NET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY (AP REG PROV TEMP)	39 FEGLI HEALTH INSURANCE CODE CODE 0-WAIVER 1-YES
40 SOCIAL SECURITY NO		41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NONE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1-YES 2-NONE
44 STATE TAX DATA FORM EXECUTED CODE NO TAX STATE CODE 1-YES 2-NONE		45 POSITION CONTROL CERTIFICATION 9-20-65 WJL		46 OP APPROVAL DATE APPROVED 8/20/65	

Recorded by
CSPD
CJM

EOD DATA →

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(When Filled In)

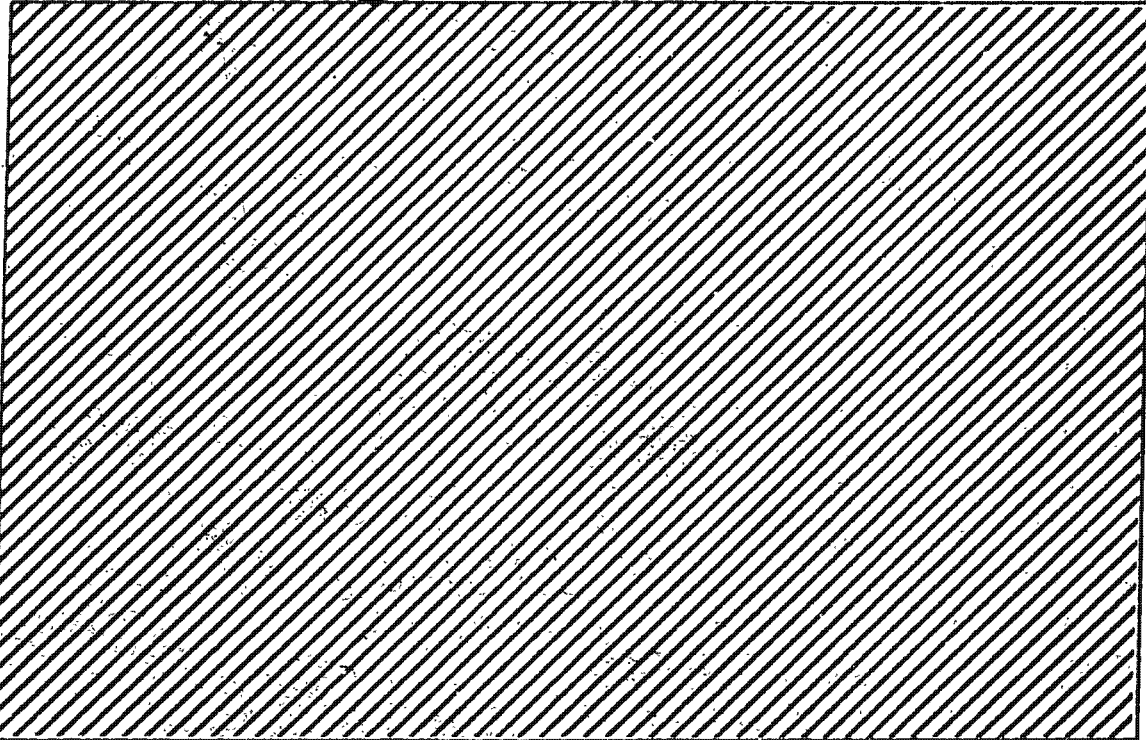
REQUEST FOR PERSONNEL ACTION					DATE PREPARED				
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel			15 January 1965				
3 NATURE OF PERSONNEL ACTION PAY ADJUSTMENT (TO PART TIME) FROM FULL TIME				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 08 65		5 CATEGORY OF EMPLOYMENT Regular (PART TIME)			
6 FUNDS		7 COST CENTER NO CHARGE-ABLE 5235-1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)					
9 ORGANIZATIONAL DESIGNATIONS DPP Special Affairs Staff Counter-Intelligence Staff Operations Section				10. LOCATION OF OFFICIAL STATION Washington, D.C.					
11 POSITION TITLE INTELLIGENCE ASST. (D)			12 POSITION NUMBER 1130	13 CAREER SERVICE DESIGNATION D					
14. CLASSIFICATION SCHEDULE (G.S. 1 B, etc.) GS (35)		15 OCCUPATIONAL SERIES 0301.23	16 GRADE AND STEP 05 (2)	17 SALARY OR RATE \$ 5165					
18 REMARKS Subject to work on regularly scheduled tour not to exceed 19 hours per week. Subject will be working Monday through Friday, from 1400 to 1700.									
<div style="border: 1px solid black; padding: 5px; display: inline-block;">Recorded by CSPD <i>am</i></div> <div style="text-align: right; margin-top: 10px;"><i>Approved by Edm. CSP/D</i></div>									
C/WH/Pers.		DATE SIGNED 1/22/65		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 1/22/65			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 38	20 EMPLOY CODE 36	21 OFFICE CODING NUMERIC ALPHABETIC 42/160 14-3		22 STATION CODE 25013	23 INTEGRAL CODE	24 MONTHS CODE 1	25 DATE OF BIRTH MO. DA. YR. 03/16/35	26 DATE OF GRADE MO. DA. YR. 03/16/64	27 DATE OF LEI MO. DA. YR. 03/16/64
28. HRS EXPIRES MO. DA. YR.		29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-CSC 2-FICA 3-NONE		31 SEPARATION DATA CODE	32 CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.		33 SECURITY REQ NO	34 SEX
35 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36 SERV COMP DATE MO DA. YR		37 LONG COMP DATE MO DA. YR.		38 CAREER CATEGORY CODE (AR RELY PROJ TEMP)	39 FEGLI HEALTH INSURANCE CODE 0-NONET 1-YES HEALTH INS CODE		40 SOCIAL SECURITY NO	
41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO PREVIOUS SERVICE 2-BREAK IN SERVICE 3-BREAK IN SERVICE (LESS THAN 3 YEARS) 4-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE MO. TAX EXEMPTIONS		44 STATE TAX DATA FORM EXECUTED CODE MO TAX STATE CODE		45 POSITION CONTROL CERTIFICATION		46 OP APPROVAL
7/1 Kearney 02/05/65								DATE APPROVED	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) Florus, Daniel	NAME AND RELATIONSHIP OF DEPENDENT* Self	CLAIM NUMBER 63-514
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There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 2 September 1964.

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

DATE OF NOTICE 12 JUN 1965	SIGNATURE OF SIO REPRESENTATIVE <i>B. De Felice</i>
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

6 January 1965

MEMORANDUM FOR: Chief, CSPO

SUBJECT : Conversion to Part-Time Staff Employment
Mr. Daniel Flores

1. Mr. Daniel Flores is an Intelligence Assistant, GS-07, assigned to the CI Staff of WH/SA. He is currently pursuing a program of studies in Government at the American University with special concentration on Latin American Affairs. To complete the major portion of his remaining requirements for the bachelor's degree, he is planning to attend the University full-time for a year. Any requirements still outstanding at the end of that period would be completed at night.

2. The employee's duties in the CI Staff involves the translation of [] messages received from and sent to [] assisting in the training of [] in [] and communications procedures, and miscellaneous support functions in the CI Branch. He has proved invaluable because he has native fluency in every-day Spanish and is familiar with [] and communication techniques, problems, and training procedures. In addition to Mr. Flores' utility for such cases as may arise in the future, he is personally acquainted with [] of the [] now in place [] and with the numerous problems which constantly arise in their handling.

3. In view of the need for Mr. Flores' services, the Chief, CI Staff, has asked the employee if he would be willing to continue in his present capacity on a part-time basis. The employee has indicated that he would accept such an arrangement. It is accordingly requested that WH/SA be permitted to convert him from a full-time staff employee to one employed on a part-time, regular tour of duty basis. Subject would be utilized for a total of 18 hours per week, the maximum time that his school program will permit him to devote to Agency duties.

[]
C/WH/Personnel

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

22 July 1964

1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, Daniel
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3 NATURE OF PERSONNEL ACTION Reassignment	4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 28 1 1964	5 CATEGORY OF EMPLOYMENT Regular
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6 FUNDS X V TO V CF TO V	7 COST CENTER NO. CHARGE 5235-1162	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS DDP SAS Counter-Intell Staff Operations Section	10 LOCATION OF OFFICIAL STATION Wash., D.C.
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11 POSITION TITLE Intelligence Asst	12 POSITION NUMBER 1130	13 CAREER SERVICE DESIGNATION D
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14 CLASSIFICATION OF SERVICE (GS, E, P, etc.) GS	15 OCCUPATIONAL SERIES 0301.28	16 GRADE AND STEP 05 (2)	17 SALARY OR RATE \$ 4850
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18 REMARKS
From: SAS No. 0922 Tracy 37F

Recorded by
CSPD
[Signature]

DATE SIGNED C/WH/Pers 27 Jul 64	SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	DATE SIGNED 27 July 1964
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 49150 525 74013	22 STATION CODE 74013	23 INTEGRATE CODE 1	24 HOOVER CODE 1	25 DATE OF BIRTH MO DA YR 08 04 1935	26 DATE OF LEAVE MO DA YR	27 DATE OF LET MO DA YR
28 NET EFFICIENCY MO DA YR	29 SPECIAL ABILITIES	30 RETIREMENT DATA 1 - CIV 2 - MIL 3 - NONE	31 SEPARATION DATA CODE	32 CORRECTION LABELLING DATA TYPE MO DA YR	EOD DATA →		33 SECURITY REQ NO	34 SEE
35 NET PREFERENCE CODE 0 - NONE 1 - 1 PT 2 - 1/2 PT	36 SALT COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY CODE	39 HEALTH INSURANCE CODE CODE 0 - NONE 1 - YES	40 SOCIAL SECURITY NO			
41 PREVIOUS EMPLOYMENT SERVICE DATA CODE 1 - ON FEDERAL SERVICE 2 - ON STATE OR LOCAL 3 - ON FEDERAL (75) (25) (25) 4 - ON STATE OR LOCAL (25) (25) (25)	42 LEAVE CAT CODE	43 PROGRAM REGULATED 1 - YES 2 - NO	44 FEDERAL TAX DATA CODE MO DA YR	45 STATE TAX DATA CODE MO DA YR	46 STATE CODE			
47 POSITION NUMBER IDENTIFICATION 27 Jul 64			48 OFF APPROVAL <i>[Signature]</i>			DATE APPROVED 27 July 1964		

36
F

SECRET

FORM 1000-100-1 (REV. 1-64)

14-00000

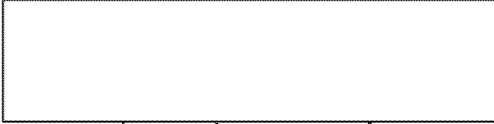
19 December 1963

MEMORANDUM FOR: Clandestine Services,
Career Services Panel

SUBJECT : Mr. Daniel Flores -
Recommendation for Promotion

1. Mr. Flores has been with the Agency for about eighteen (18) months and has been a member of SAS since June 1963. During the six (6) months he has been with SAS he has demonstrated intelligence and initiative. In addition to his fulfilling his primary responsibility as a translator, he quickly picked up the knowledge and experience necessary for an Intelligence Assistant in the Operations Support Section. His duties and responsibilities accordingly have been broadened. He has demonstrated ability to function independently as a member of the Operations Support Staff. He is cooperative and has maintained a cheerful disposition under pressure and through many late hours and weekends of duty.

2. In view of his excellent performance in SAS, his intelligence and ability, and his growth potential for a career in CIA, I strongly recommend that he be promoted to GS-5 as soon as possible.


Chief, SAS/Intel J

APPROVAL RECOMMENDED

DESMOND FITZGERALD
Chief, Special Affairs Staff

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 23 April 1963				
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, Daniel						
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH 05 DAY 1 YEAR 63		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS X		7. COST CENTER NO. CHARGEABLE 3232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)				
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Research Branch Reports, Records, Translation Section			10. LOCATION OF OFFICIAL STATION Washington, D.C.					
11. POSITION TITLE TRANSLATOR		12. POSITION NUMBER 0702	13. CAREER SERVICE DESIGNATION D					
14. CLASSIFICATION SCHEDULE (GS, LD, etc.) GS		15. OCCUPATIONAL SERIES 0031.01	16. GRADE AND STEP 04 (2)	17. SALARY OR RATE \$ 4250				
18. REMARKS From: DDP/OPSER/RID, Ref. Br. #01147.DC Tracy 9 CONCURRENCE: [Signature] Chief of Admin OPSERV/RID								
Recorded by CSPD <i>[Signature]</i>								
4/24/63 1 of Security								
DATE SIGNED C/SAS/Perf. 24/4/63		189. SIGNATURE OF CAREER SERVICE APPROVING [Signature]		DATE SIGNED 1 May 63				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE 37	20. EMPLOY. CODE 10	21. OFFICE CODE NO. NUMERIC 61350 ALPHABETIC SAS	22. STATION CODE 75013	23. OFFICIAL CODE 1	24. DATE OF BIRTH 08/04/35	25. DATE OF DEATH	26. DATE OF DEPT.	27. DATE OF RES.
28. TITLE CAP. REF.		29. SPEC. REFERENCE	30. RETIREMENT CODE	31. OFFICIAL CODE	32. CORRECTION/PENALTY ON DATA	FOD DATA →		33. SEC. REF. NO.
35. HLT. PREFERENCE		36. SEAS. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. RES. / HEALTH INSURANCE		40. SEC. REF. NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA		42. MILITARY SER. DATA		43. FEDERAL SER. DATA		44. STATE SER. DATA		
45. POSITION CONTROL CERTIFICATION [Signature]		46. APPROVAL [Signature]		47. DATE APPROVED 1 May 63				

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 25 September 1961	
1. SERIAL NUMBER 15310		2. NAME (Last-First-Middle) FLORES Daniel				
3. NATURE OF PERSONNEL ACTION Excepted Appointment			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 03 11 62		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X V TO V CF TO V		7. COST CENTER NO. CHARGE-ABLE 2226 1200 1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP OPSER R I DIV Reference Branch Index Section - Night Shift			10. LOCATION OF OFFICIAL STATION Wash., D. C.			
11. POSITION TITLE File Clerk		12. POSITION NUMBER 0147	12A. PCR CONTROL NO.	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0305.01	16. GRADE AND STEP 04 1		17. SALARY OR RATE 4040	
18. REMARKS Regular tour of duty 3:30 PM to 12:00 PM daily/ Subject to trial period and medical Recorded by CMD						
19. SIGNATURE OF REQUESTING OFFICIAL Walter H. ... Chief, RID/ADM.			20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
21. ACTION CODE 11	22. EMPLOY CODE 10	23. OFFICE CODES 39400	24. STATION CODE RI	25. NLS CODE 1	26. NLS CODE 1	27. DATE OF HIRE 03 11 62
28. BIR EMP RES NO. DA. YA.	29. SPECIAL RESERVE'S 1 = CS 2 = FICA 3 = NWS	30. SET POINT DATA 1	31. SEPARATION DATA CODE P	32. SELECTION CANDIDATURE DATA NO. DA. YA.	33. SECURITY REQ. NO. 07100	34. SER NO. M1
35. NET. PREFERENCE CODE C	36. SER. COMP. DATE 03 11 62	37. LONG. COMP. DATE 03 11 62	38. M. SING. TRIP. F. COD 1	39. FEEL. HEALTH ASSESS. 1	40. SOCIAL SECURITY NO. 460-42-6230	
41. PREVIOUS EMPLOYMENT SERVICE DATA NO. DA. YA.	42. FEDERAL TAX DATA CODE	43. STATE TAX DATA CODE	44. FORM INCL. 1 1	45. FORM INCL. 2 0	46. FORM INCL. 3 1	47. FORM INCL. 4 08
48. POSITION CONTROL CERTIFICATION 03-12-62			49. O.P. APPROVAL			

14 February 1962

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

We are pleased to inform you that your appointment with this Agency has been approved at Grade GS-4, salary \$4040.00 per annum, as Clerk.

Your permanent employment will depend upon the completion of the following processing at the time of entering on duty: taking the oath of office, signing a loyalty affidavit, participating in a final security interview. Should anything of an unfavorable nature arise during this period, your employment will not result in a permanent appointment.

We hope you will be able to join us at an early date. Please dial 351-2781 and ask for Mrs. Shirley Wells, as soon as possible, in order to arrange an entrance-on-duty date. We would appreciate your selecting a Monday.

Please report to the Receptionist at 1016 - 16th Street, N. W., Room 201 at 8:15 a.m. and ask for Mrs. Wells on the reporting for duty date that you establish with this office. This address is located on 16th Street between K and L Streets opposite Hotel Statler.

Your gross earnings will be subject to deductions for Federal income tax and 6 1/2 percent for the United States Civil Service Retirement Fund. In addition, the benefits of low-cost group life insurance, which will be discussed with you at the time of your entrance on duty, are available to Federal civilian employees. This insurance is not obligatory. However, if you do not wish coverage, which is automatic, you should sign a Waiver of Life Insurance Coverage form at the time you enter on duty.

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You will not receive a pay check for approximately four weeks after your entrance on duty.

If you have any problems, Mrs. Wells will be glad to discuss them with you when you call.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/mjt
File sent to: Shirley Wells

26 January 1962

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Processing of your application for employment with this Agency is continuing. Please advise us if any circumstance should arise which might affect your interest in a position with us.

Your continued interest and patience are appreciated.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/sjm
File sent to: Wells

20 October 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

In connection with your application with this Agency, it will be necessary for you to come to our Medical Office in Central Building, 2430 E Street, N. W., for a pre-employment medical examination which will include determination of physical health and emotional stability.

An appointment may be scheduled by dialing 351-2781 and asking for Mrs. Shirley Wells.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corros/car
file sent to shirley wells

12 October 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Your application for employment with this Agency has been reviewed with interest and the processing of your case has been initiated for a full-time position on the 3:30 p.m. to 12:00 p.m. shift at Grade GS-4, salary \$4040.00 per annum, plus a ten percent night differential for the hours from 6:00 p.m. to 12:00 p.m., as Clerk.

Your final appointment is dependent upon a number of factors including character and reference investigations, and other processing procedures which may require as long as 120 days. You may be sure that this processing is being accomplished as rapidly as possible.

During this period please notify us of any changes in your present status such as change in address, employment, marital status, etc. If you cannot accept the position or if you have any questions concerning your application, you should write to Mrs. Shirley Wells.

Members of this Agency are entitled to the regular United States Government leave and retirement benefits. Our salaries conform to the rates prescribed by Congress for United States Government agencies.

Thank you for your cooperation and patience during this waiting period.

Very truly yours,

A. D. Echols
Director of Personnel

OP/Corres/car
file sent to shirley wells

SECRET
(When Filled In)

REQUEST FOR SECURITY CLEARANCE				REQUEST NO. (1-2) 07:00 REQUEST DATE (10-11) 6 October 1961 YEAR OF BIRTH (20-30) 4 August 1935
NAME (LAST - FIRST - MIDDLE) FLORES, DANIEL				
POSITION TITLE FILE CLERK	POSITION NUMBER (31 - 33) 0117	OCCUP. CODE (37 - 43) 0304.01	GRADE (40-46) GS-04	
LOCATION (CITY, STATE, COUNTRY) WASHINGTON, D. C.		ASSIGNMENT (OFFICE, DIVISION, BRANCH) DDP/OPSER		
TYPE OF APPLICANT <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> CONTRACT <input type="checkbox"/> MILITARY	CONVERSION ACTION	IF OTHER, SPECIFY:	ORGN. CODE (48-50) 3900	
NAME OF REQUESTER (OR OFFICIAL)		TYPE OF ASSIGNMENT AND PURGE		
		<input checked="" type="checkbox"/> HGS <input type="checkbox"/> USF <input type="checkbox"/> PF <input checked="" type="checkbox"/> V <input type="checkbox"/> UV		
CLEARANCE REQUIRED	PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)		SECRET <input checked="" type="checkbox"/> FULL	
ATTACHMENTS	<input checked="" type="checkbox"/> PERSONAL HISTORY STATEMENT <input checked="" type="checkbox"/> PHOTOGRAPHS	<input checked="" type="checkbox"/> APPENDIX I <input type="checkbox"/> APPENDIX II	<input checked="" type="checkbox"/> REQUEST FOR WAIVER <input type="checkbox"/> REPORT OF INTERVIEW	
VETERANS STATUS	<input checked="" type="checkbox"/> MALE - VETERAN <input type="checkbox"/> MALE - NON-VETERAN	<input type="checkbox"/> FEMALE - VETERAN <input type="checkbox"/> FEMALE - NON-VETERAN	HQTRS & FUND (50) 1 CLEARANCE (51) 3 RECRUIT. CODE (53-54) 105 VET PREP. & SER (55)	

FULL REQUESTED 6 October 1961
Regular tour of duty 3:30 PM to 12:00 PM daily.

1 - SO
1 - OTF

SPACE BELOW FOR OS USE ONLY

15 September 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Appropriate members of our staff are reviewing your application for employment to determine whether we have a position available for a person of your qualifications. Although we cannot predict the length of time needed for this review, every effort will be made to reach an early decision. We will keep you as fully informed as possible regarding the status of your case.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres-bt
file sent to Mr.

CONFIDENTIAL
(When Filled In)

REPORT OF INTERVIEW		DATE OF INTERVIEW 21 August 1961 ✓	SOURCE gen info
CANDIDATE (Last, First, Middle) Flores, Daniel		PLACE OF BIRTH San Marcos, Texas	DATE OF BIRTH 4 August 1935
TEMPORARY ADDRESS		PHONE	
PERMANENT ADDRESS Washington, D.C.		PHONE 265-8322	
BUSINESS ADDRESS		PHONE	
PLACE OF INTERVIEW 15th St		DATE AVAILABLE Immediately on clearance	TESTS SET
REG (Office, serial) RI clerk 3:30-midnight		GS-4	19-32-33-84
<p>Mr. Flores had just been recently released from active duty with the USMC when he came in for interview. He has served two tours which included Security guard Embassy duty in Peru and Bolivia. His wife was formerly stationed at the Embassy with Dept. of State. He appears to be a mature young man, clean cut, neat appearance, dark complexion and coloring. He is planning to continue his college education at C.U. and is available to work the 3:30 - midnight PI shift. A clerical position at the GS-4 level was discussed in the interview. His wife is a secretary with a law firm in town; they have no children.</p> <p>xxxx</p> <p>Mr. Flores is in excellent health and had a very good record with the Marine Corps. Knows of nothing in his background that would be unfavorable in event of reference check. At initial interview he stated that he had no foreign connections, however, after contacting his family in Texas it was determined that his step-mother was born in Mexico and although she came to the US in 1922, she has never become a US citizen.</p> <p>Full clearance.</p>			
DATE SENT TO HQ: 8 5 -t 61		INTERVIEWER: Joy Cooney	

FORM 1667a

CONFIDENTIAL

16-581

14-00000

CENTRAL INTELLIGENCE AGENCY

WASHINGTON 25, D. C.

Applicant Information
Sheet No. 1

To all persons applying for employment
with the Central Intelligence Agency:

This paper is the first step in applying for employment or consultant
status with the Central Intelligence Agency. No application may proceed
beyond this first step if the applicant is not in agreement with the condi-
tions stated below:

General Considerations:

1. The National Security Act of 26 July 1947 (Public Law 253, 80th
Congress) which created the Central Intelligence Agency places upon the
Agency the responsibility:

- a. "to advise the National Security Council in matters concerning
such intelligence activities of the Government departments and agencies
as relate to the national security;
- b. "to make recommendations to the National Security Council
for the coordination of such intelligence activities of the depart-
ments and agencies of the Government as relate to the national
security;
- c. "to correlate and evaluate intelligence relating to the
national security, and provide for the appropriate dissemination
of such intelligence within the Government . . . ;
- d. "to perform, for the benefit of the existing intelligence
agencies, such additional services of common concern as the National
Security Council determines can be more efficiently accomplished
centrally;
- e. "to perform such other functions and duties related to
intelligence affecting the national security as the National Security
Council may from time to time direct."

14-00000

The special character of this national responsibility requires the Agency to maintain correspondingly special employment criteria which may be different from the routine or normal employment standards of other Government departments and agencies which do not have the highly sensitive responsibility borne by the Central Intelligence Agency. It follows that the investigation of applicants prerequisite to their acceptance is a time-consuming process which, in addition to loyalty and security checks, includes evaluation of competence, physical and emotional fitness, and availability of a suitable position at such time as employment may be offered. This is called "clearance" of an applicant.

2. Investigation of an applicant may reveal something which prevents his clearance - perhaps something of which the applicant is genuinely unaware, perhaps something which only the special employment criteria of the Agency make unacceptable. In any event, adverse findings by the Agency are conclusive and final so far as the Agency is concerned, and no statement of specific reasons is made to the applicant.

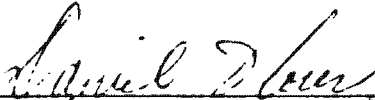
3. Employment by the Central Intelligence Agency is not a right upon which an applicant can insist. Offer of employment which is subject to full clearance does not constitute a commitment on the Agency's part giving an unsuccessful applicant grounds for any claim against the Agency. Acceptance of employment upon the condition of clearance is at the applicant's risk, taken with the knowledge that a very substantial percentage of applicants are not cleared.

Statement of Understanding
and Agreement

I have read, understand, and agree to the foregoing General Considerations. If not accepted for employment by the Central Intelligence Agency, I will make no claim or demand in conflict with those considerations.

I have also seen and read Applicant Information Sheet No. 2.

SIGNED at Washington, D. C., this 10th day of September, 1961.



(Signature of Applicant)
Daniel Flores

SECRET

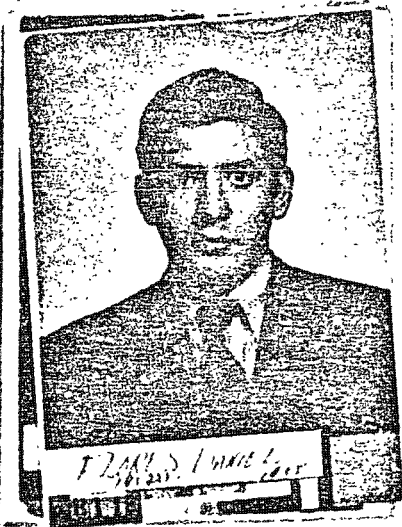
REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

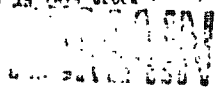
H a n d l e W i t h C a r e



SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP				DATE	FILE NO.
				6 OCTOBER 75	15675
TC: (CHECK)	<input checked="" type="checkbox"/>	CHIEF, CONTROL DIVISION, OP		SS NUMBER	
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION, OP		EMPLOYEE NUMBER	036150
	<input checked="" type="checkbox"/>	CHIEF, (OPERATING COMPONENT FOR ACTION) ATTN: LA		ID CARD NUMBER	
REF.	Form 1522 Dated 18 Aug 75			OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> CANCELLED
STATUS	<input checked="" type="checkbox"/>	STAFF	<input type="checkbox"/>	CONTRACT	
SUBJECT	UNIT				

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)		CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)	
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <u>60D</u>	<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TOY</u> OTHER (Specify)	EFFECTIVE DATE:	SUBMIT FORM 3254 <u>W-2</u> TO BE ISSUED (NR 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (NR 20-7)		SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (NR 20-7)	EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>
<input checked="" type="checkbox"/> SUBMIT FORM 3254 <u>W-2</u> TO BE ISSUED. (NR 20-11)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS	SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.
<input checked="" type="checkbox"/> SUBMIT FORM 1522 FOR ANY CHANGE AFFECTING THIS COVER. (NR 240-20)		DO NOT WRITE IN THIS BLOCK	
<input checked="" type="checkbox"/> SUBMIT FORM 1523 FOR TRANSFERRING COVER RESPONSIBILITY. (NR 240-20)			
<input checked="" type="checkbox"/> EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD			

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FORM 1551

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NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE	FILE NO.
		23 APRIL 1974	15675
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP		
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER	036130
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) WH	ID CARD NUMBER	
ATTN:	CHIEF SUPPORT STAFF	OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> DISCONTINUED
REF:	FORM 2458, DATED 16 JANUARY 1974		
SUBJECT	UNIT		
DANIEL FLORES			

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 EOD <input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify) _____	SUBMIT FORM 372 TO BE ISSUED: 16 APR 74 N-2
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY 4 (HNB 20-7)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 375 (HNB 20-11)	EAA: CATEGORY I _____ CATEGORY II _____
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR CHANGING TELEPHONE COVER. (HNB 240-20)	THIS MEMO MUST REMAIN ON TOP OF FILE
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HNB 240-20)	
<input checked="" type="checkbox"/> EAA: CATEGORY I _____ CATEGORY II <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> SUBMIT FORM 2888 FOR AGE HOSPITALIZATION CARD REWARDS AND OR COVER HISTORY	
PERFORMANCE EVALUATION: EP:61P 1974 1 15675 1974 2 15675 1974 3 15675 1974 4 15675	

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NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 27 November 1967	
TO: (CCM-41)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	FILE NUMBER 15675	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 036130	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER 1151	
ATTN:	Mr. []	OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED
REF:	Verbal Request		<input type="checkbox"/> DISCONTINUED
SUBJECT	<input checked="" type="checkbox"/> FLORES, Daniel (NMI)	UNIT	

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS <small>(opmeco 20-800-11)</small>	<input type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS <small>(opmeco 20-800-11)</small>
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE COB _____	DATE (as of COB)
B. CONTINUING AS OF COB 3 Dec 67	
<input checked="" type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. <small>(HNB 20-7)</small>	<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. <small>(HNB 20-7)</small>
<input checked="" type="checkbox"/> ASCERTAIN THAT [] W-2 BEING ISSUED. <small>(HR 20-661-1)</small>	<input type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS.
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. <small>(HR 240-20)</small>	DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. <small>(HR 240-20)</small>	
CONCUR IN ISSUANCE	
	AGE HOSPITALIZATION CARD
	NACS HOSPITALIZATION CARD

REMARKS AND/OR COVER HISTORY

Nar 62 - Dec 62 Overt

EDF/ []

DISTRIBUTION: []

1551

James H. []

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All

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"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12165 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 OCTOBER 1979

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLCRES DANIEL	0036130	LA	GS 13 3	\$31,333
				5656

1. SERIAL NO		2. NAME		3. ORGANIZATION		4. PLANS		5. LWOP HOURS		
036130		DANIEL FLCRES		LA						
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	QSI	ADJ.
GS	3	\$28,025	08/26/79	GS	3	\$31,333	10/07/79			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<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										
FORM 1073 3601 PAY CHANGE NOTIFICATION										

Handwritten notes and initials on the right side of the form, including "3/25/80" and "C.E."

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12067 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 6 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 06 OCTOBER 1978

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLORES DANIEL	0036130	LA	GS 13 2	\$28,368

5678

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 OTHER NOTES			
0036130		FLORES DANIEL		91 62C							
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION			
Grade	Step	Salary	EFFECTIVE DATE	Grade	Step	Salary	EFFECTIVE DATE	WGT	OST	ADJ.	
GS	13	2	28,368	01/29/76	GS	13	3	29,260	01/28/79		
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE											
SIGNATURE							DATE				
							11/27/78				
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD											
						APPROVED BY					
FORM 10-73 560F 14 57											

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SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL								
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE MO DA YR 02 11 78		5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS		V TO V		V TO CF		7. FAN AND NSCA		8. USC OR OTHER LEGAL AUTHORITY		
		CF TO V		CF TO CF		8035 0990 0000		50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION FOREIGN FIELD					10. LOCATION OF OFFICIAL STATION					
[] STATION					[]					
[] BRANCH					[]					
11. POSITION TITLE OPERATIONS OFFICER				12. POSITION NUMBER GK76		13. SERVICE DESIGNATION DDG				
14. CLASSIFICATION SCHEDULE (GS, W, etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 2		17. SALARY OR RATE 26689			
18. REMARKS										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 51620 LA		22. STATION CODE 45075	23. INTERLEAVE CODE	24. HOURS CODE 3	25. DATE OF BIRTH MO DA YR 08 04 35		26. DATE OF GRADE MO DA YR	
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CSC 2. CIA 3. FVA 4. NFAE		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR		33. SECURITY REQ NO		34. SEX
35. VET PREFERENCE CCGA 0 NONE 1 5 YR 2 10 YR		36. SERV COMP DATE MO DA YR		37. LONG COMP. DATE MO DA YR		38. CAREER CATEGORY LAR RESV PRUV EMP		39. FECL / HEALTH INSURANCE CODE CODE 0 WAIVER 1-YES		40. SOCIAL SECURITY NO
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CCGA 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 2 YRS. 3 BREAK IN SERVICE MORE THAN 2 YRS.				42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE FED TAX EXEMPTIONS			44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMP STATE CODE		
SIGNATURE OR OTHER AUTHENTICATION										
[Signature]										

FORM 1150
5 Feb May 10 78

Use Previous Edition

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82 APR 1978 C. BY 001822

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"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12016 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLCRES DANIEL	0036130	LA	GS 13 1	\$26,022
				5927

CPD: 7 APR 77

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT AND DISABILITY SYSTEM			4 EFFECTIVE DATE MO DA YR 04 10 77
5 CATEGORY OF EMPLOYMENT REGULAR			6 FUNDS V TO V CF TO V X V TO CF CF TO CF
7 FAN AND NSCA 7135 4534 0000		8 CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203	
9. ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE		12 POSITION NUMBER	13 SERVICE DESIGNATION DQG
14 CLASSIFICATION SCHEDULE (SS, LS, etc)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP 13	17 SALARY OR RATE
18 REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. Employ Code	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTEGRE CODE	24. Hdqtrs Code	25. DATE OF BIRTH MO DA YR		26. DATE OF GRADE MO DA YR		27. DATE OF LEI MO DA YR	
28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CIV 2. CIA 3. FCA 4. NONE		31. SEPARATION DATA CODE	32. Correction / Cancellation Data TYPE MO DA YR			33. SECURITY REQ NO	34. SEX			
35. VET PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CAR RESV EPAN EMP		39. FEGLI / HEALTH INSURANCE FEGLI 0 / WAIVER 1 YES		40. SOCIAL SECURITY NO					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS. 3 BREAK IN SERVICE MORE THAN 3 YRS.			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMP						

SOD DATA →

SIGNATURE OR OTHER AUTHENTICATION

SECRET

PLF: 01 MAR 77

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)									
036130		FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT					
REASSIGNMENT				02 26 77		REGULAR					
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		7135 4534 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION							
DDO/LA DIVISION CUBA OPERATIONS GROUP EA AREA				WASH., D.C.							
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION					
OPERATIONS OFFICER				F335		D2G					
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE					
GS		0136.01		13 1		24308					
18 REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGRAL CODE	24 MONTHS CODE	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF LEI	
37	10	51500	LA	75013	1	08 04 35					
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REG NO	34 SER
										EOD DATA	
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA				44 STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION											

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(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		7 NAME (LAST-FIRST-MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE 01 30 77
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V	V TO CF	7 FAN AND NSCA 7135 4534 0000
	CF TO V	CF TO CF	
9 ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION CUBA OPERATIONS GROUP WH AREA		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE OPERATIONS OFFICER		12 POSITION NUMBER CG66	13 SERVICE DESIGNATION O3G
14 CLASSIFICATION SYMBOL (GS, GS, etc.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 13 1	17 SALARY OR RATE 24308
18 REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODE 51500 LA	22 STATION CODE 75013	23 DISTRICT 1	24 HOURS 03 04 35	25 DATE OF BIRTH 01 30 77	26 DATE OF DEATH	27 DAY OF DEATH
28 HIRE STATUS	29 SPECIAL REQUIREMENTS	30 DEPARTMENT DATA	31 SEPARATION DATA	32 CONTRACT INFORMATION	33 SECURITY	34 MISC	JOB DATA	
35 PAY PRINTING	36 NEW EMP (DATE)	37 TRANSFER (DATE)	38 CASUAL ASSIGNMENT	39 TEMPORARY ASSIGNMENT	40 SOCIAL SECURITY NO.			
41 FEDERAL GOVERNMENT EMPLOYEE	42 STATE EMPLOYEE	43 LOCAL GOVERNMENT EMPLOYEE	44 FEDERAL EMPLOYEE	45 STATE EMPLOYEE	46 LOCAL GOVERNMENT EMPLOYEE			

SIGNATURE OF OFFICE AUTHORITY

KKK: 6 DEC 76

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
1 SERIAL NUMBER		2 NAME LAST-FIRST-MIDDLE													
036130		FLORES DANIEL													
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT						
REASSIGNMENT						12 04 76			REGULAR						
6 FUNDS		V TO V		V TO CF		7 TAN AND NSCA			8 CSC OR OTHER LEGAL AUTHORITY						
CF TO V		X		CF TO CF		7135 4534 0000			50 USC 403 J						
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION									
DDG/LA DIVISION CUBA OPERATIONS GROUP WH AREA						WASH., D.C.									
11 POSITION TITLE						12 POSITION NUMBER			13 SERVICE DESIGNATION						
OPERATIONS OFFICER						CC67			DQG						
14 CLASSIFICATION SCHEDULE (GS, IS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP			17 SALARY OR RATE						
GS			0136.01			12.4			22485						
18 REMARKS															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19 ACTIVITY CODE		20 OFFICE CODE		21 STATION CODE		22 INTEGREE CODE		23 HOURS CODE		24 DATE OF BIRTH		25 DATE OF GRADE		26 DATE OF LEI	
37 10		515001 LA		75013		1		03 04 35							
28 NTE EXP. DATE		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction/Conciliation Code		33 SECURITY REG. NO.		34 SER.			
										EOD DATA					
35 VET. PREFERENCE		36 SERV. COMP. DATE		37 LEAVE CAT. CODE		38 CAREER CATEGORY		39 FEEDBACK/HEALTH INSURANCE		40 SOCIAL SECURITY NO.					
41 FEDERAL GOVERNMENT SERVICE				42 LEAVE CAT. CODE				43 FEDERAL TAX DATA				44 STATE TAX DATA			
45 SIGNATURE OR OTHER AUTHENTICATION															
FROM CIA															

PIF

1. SERIAL NO.		NAME		3. EMPLOYER'S NO.		4. ADDRESS		5. PHONE NO.		
J 1000		JAMES EARL RAY		117		1000				
6. OLD SALARY RATE				7. NEW SALARY RATE				8. EFFECTIVE DATE		
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date	WGT	QSI	ADJ
1	1	10.00	11/25/75	1	1	10.00	11/25/75			
CERTIFICATION AND AUTHORIZATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<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 10.73 560E Use previous editions PAY CHANGE NOTIFICATION (4 51)										

PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11541 PURSUANT TO AUTHORITY OF E.O. AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND E.O. EXECUTIVE ORDER 11822.

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1976

ADDF
 PETERS CENTER

SERIAL CASH. STATE OF MISSISSIPPI
 02130 17 500 OF 05 12 3

NEW
 SALARY
 10.0000

NRK: 19 JULY 76

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(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DCP

1 SERIAL NUMBER 53613	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION REASSIGNMENT - CHANGE OF FUNCTIONAL CATEGORY	4 EFFECTIVE DATE MO DA YR JG 21 76	5 CATEGORY OF EMPLOYMENT REGULAR
--	--	-------------------------------------

6 FUNDS	V TO V	V TO CF	7 TAN AND NSCA T175 3012 3500	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 433 J
	CF TO V	X CF TO CF		

9 ORGANIZATIONAL DESIGNATIONS DDA/OTR FUNCTIONAL TRAINING DIVISION OPERATIONS TRAINING BRANCH	10 LOCATION OF OFFICIAL STATION WASH., D.C.
--	--

11 POSITION TITLE INSTRUCTOR OPS	12 POSITION NUMBER BD33	13 SERVICE DESIGNATION DOG
-------------------------------------	----------------------------	-------------------------------

14 CLASSIFICATION SCHEDULE NOS. (B, OR I) GS	15 OCCUPATIONAL SERIES 1712.32	16 GRADE AND STEP 12 3	17 SALARY OR RATE 25078
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18 REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37	20 EMPLOY CODE 15	21 OFFICE CODING NUMERIC 175 JY ALPHABETIC OTR	22 STATION CODE 75 J13	23 INTEREST CODE	24 RESERVE CODE 1	25 DATE OF BIRTH MO DA YR J8 11 35	26 DATE OF GRADE MO DA YR	27 DATE OF LET MO DA YR
28 WTE EXPRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 CSC 2 CIA 3 I/A 4 N/A	31 SEPARATION DATA CODE	32 Correction/Contestation Data TYPE MO DA YR	33 SECURITY REQ NO.		34 SEX	
35 VET PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY LAB ESSE EPON STMP	39 FEGLI / HEALTH INSURANCE CODE 0 WAIVED 1 YES HEALTH INS CODE	40 SOCIAL SECURITY NO.			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BRAGS IN SERVICE 2 BRAGS IN SERVICE LESS THAN 3 YRS. 3 BRAGS IN SERVICE MORE THAN 3 YRS.	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EMPLOYED 1 YES 2 NO	44 STATE TAX DATA FORM EMPLOYED 1 YES 2 NO	45 STATE CODE				

SIGNATURE OR OTHER AUTHENTICATION

FROM: LA

AFG
SECRET

DM

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11803 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 2	\$20,052

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11811 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 1	\$18,463

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 31 MAY 1974.

FLORES DANIEL

036130

41351084

1 SERIAL NO		2 NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
036130		FLORES DANIEL			51 500		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 12	2	19,076	11/24/74	GS 12	3	19,693	11/23/75			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<i>[Signature]</i>							<i>[Date]</i>			
<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										
CLERK'S INITIALS		FLORES DANIEL						BY: <i>[Signature]</i>		
FORM 7-60 500E		PAY CHANGE NOTIFICATION						14 511		

REF: 10 SEP 75

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER 13317		2 NAME (LAST FIRST MIDDLE) FLORIS DANIEL									
3 NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="checkbox"/> STATUS						4 EFFECTIVE DATE MO DA YR 09 14 75		5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY			
		CF TO V		CF TO CF		6155 1574		51 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS DOO/LA DIVISION CUSA OPERATIONS GROUP CPS BRANCH						10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE OPERATIONS OFFICER						12 POSITION NUMBER CQ05		13 SERVICE DESIGNATION DQB			
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 6136.01		16 GRADE AND STEP 12 2		17 SALARY OR RATE 19070				
18 REMARKS WASH., D.C.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE 56	20 EMPLOY CODE 1	21 OFFICE CODING NUMERIC ALPHABETIC 5157 LA		22 STATION CODE 7513	23 INTEGREE CODE	24 Major Code 1	25 DATE OF BIRTH MO DA YR 03 04 35		26 DATE OF GRADE MO DA YR		27 DATE OF LEI MO DA YR
28 NTE EXPIRES MO DA YR		29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 CSC 2 CIA 3 FGA 4 NONE		31 SEPARATION DATA CODE	32 Correction / Cancellation Data TYPE MO DA YR		EOD DATA →		33 SECURITY REG NO	34 SER
35 VET PREFERENCE CODE 0 NONE 1 5 YR 2 10 YR		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY CAR SER FROM Step		39 FEGLI / HEALTH INSURANCE CODE 0 WAIVER 1 YES		40 SOCIAL SECURITY NO	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE AFTER 3 YRS 3 BREAK IN SERVICE MORE THAN 3 YRS			42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXEMPTED 1 YES 2 NO			44 STATE TAX DATA FORM EXEMPTED 1 YES 2 NO				
SIGNATURE OR OTHER AUTHENTICATION											
										<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">19 SEP 75 <i>BL</i></p> </div>	

LMP: 27 SEPT 74

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL								
3 NATURE OF PERSONNEL ACTION REASSIGNMENT					4 EFFECTIVE DATE MO DA YR 09 15 74		5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CXC OR OTHER LEGAL AUTHORITY		
CF TO V		X		CF TO CF		5135 4534 0000		50 USC 403 J		
9 ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION WH/COG OPS BRANCH					10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE OPS OFFICER					12 POSITION NUMBER 1159		13 SERVICE DESIGNATION DQB			
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12 1		17 SALARY OR RATE 17497			
18 REMARKS WASH., D.C.										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE 37	20 Employ Code 10	21 OFFICE CODING NUMBER ALPHABETIC 51500 WH		22 STATION CODE 75013	23 INTEREST CODE 	24 Hdqtrs Code 1	25 DATE OF BIRTH MO DA YR 08 04 35		26 DATE OF GRADE MO DA YR 	27 DATE OF LET MO DA YR
28 NTE EXPIRES MO DA YR 		29 SPECIAL REFERENCE 	30 RETIREMENT DATA CODE 		31 SEPARATION DATA CODE 	32 Correction / Correction Code TYPE MO DA YR 		33 SECURITY REQ NO 		34 SER
35 VET PREFERENCE CODE 	36 SERV COMP DATE MO DA YR 		37 LONG COMP DATE MO DA YR 		38 CAREER CATEGORY CODE 		39 FEGLI / HEALTH INSURANCE CODE 		40 SOCIAL SECURITY NO 	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 			42 LEAVE CAT CODE 	43 FEDERAL TAX DATA CODE 			44 STATE TAX DATA CODE 			
45 SIGNATURE OR OTHER AUTHENTICATION										
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED <i>JK 9/27/74</i> </div>										

SECRET

(When Filled In)

NOV 19 APR 74

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 15115		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE MO DA YR 7 29 74
5 CATEGORY OF EMPLOYMENT REGULAR			6 FUND 6155 4838
7 FAN AND NSCA 77 1		8 CSC OR OTHER LEGAL AUTHORITY 33 USC 433 J	
9 ORGANIZATIONAL DESIGNATIONS DDO/MI DIVISION MI/OSG OPS SUPPORT BRANCH		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 1154	13 SERVICE DESIGNATION OCS
14 CLASSIFICATION SCHEDULE (OS 18, etc.) GS	15 OCCUPATIONAL SERIES 3136.01	16 GRADE AND STEP 12 1	17 SALARY OR RATE 17497
18 REMARKS LIMA, PERU			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 EMPLOY CODE 1	21 OFFICE CODING NUMBER ALPHABETIC 51509 MI	22 STATION CODE 7521
23 DATE OF BIRTH MO DA YR 11 11 50	24 DATE OF GRADE MO DA YR	25 DATE OF LST MO DA YR	26 SPECIAL REFERENCE
27 RETIREMENT DATA 1 LIC 2 LIA 3 PLA 4 NONE	28 SEPARATION DATA CODE	29 CORRECTION/COMPLETION DATA 1 YES 2 NO	30 SECURITY REG NO
31 NET PREFERENCE 1 NONE 2 1 HR 3 2 HR 4 3 HR	32 SERV COMP DATE MO DA YR	33 LOAN COMP DATE MO DA YR	34 CARRIER CATEGORY 100 200 300 400 500 600 700 800 900
35 FEDERAL CIVILIAN GOVERNMENT SERVICE 1 NO FEDERAL SERVICE 2 NOT SERVED IN SERVICE 3 SERVED IN SERVICE AFTER 1950 4 SERVED IN SERVICE BEFORE 1950	36 LEAVE CAT CODE	37 FEDERAL TAX DATA	38 STATE TAX DATA
SIGNATURE OR OTHER AUTHENTICATION			
			<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0; font-size: 1.2em;">OK 5/19/74</p> </div>

SECRET

ONS: 27 JUN 74

SECRET
(When Filled In)

106

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 888134	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM	4 EFFECTIVE DATE MO DA YR 06 27 74	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS	7 FAN AND NSCA 4135 1324 011	8 CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203
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9 ORGANIZATIONAL DESIGNATION DDO/NA DIVISION	10 LOCATION OF OFFICIAL STATION
---	---------------------------------

11 POSITION TITLE	12 POSITION NUMBER	13 SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (SEE 18 USC)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP 12	17 SALARY GR DATE
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18 REMARKS
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 CODES CODING ALPHABETIC	22 STATION CODE	23 PAYABLE CODE	24 PAYMENT CODE	25 DATE OF BIRTH MO DA YR	26 DATE OF LEAVE MO DA YR	27 DATE OF LET MO DA YR
28 NET SALARY	29 PAYMENT DEFERRABLE	30 RETIREMENT DATA 1. YR 2. YR 3. YR 4. YR	31 OPERATIONAL DATA CODE	32 CORRECTION / CANCELLATION DATE YR MO DA YR	33 SECURITY REG NO	34 SER	NO DATA	
35 VET PRESENT	36 MILITARY COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY	39 FEDERAL HEALTH INSURANCE 1. CODE 2. YR	40 SOCIAL SECURITY NO			
41 PREVIOUS FEDERAL EMPLOYMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA 1. CODE 2. YR	44 STATE TAX DATA 1. CODE 2. YR					

SIGNATURE OF OTHER AUTHENTICATION

POSTED
OK 28 JUN 74

330 03 DEC 73

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

008

1 SERIAL NUMBER 030130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE 11 25 73
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V	V TO CF	7 PAN AND NSCA
	CF TO V	X	CF TO CF
		4135 1084	0000
9 ORGANIZATIONAL DESIGNATIONS		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
DDO/WH DIVISION FOREIGN FIELD BRANCH 3		10 LOCATION OF OFFICIAL STATION	
STATION			
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 0136	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (OS, LB, etc.) GS		15 OCCUPATIONAL SERIES 6136.01	16 GRADE AND STEP 12 1
		17 SALARY OR RATE 17487	
18 REMARKS HOME CASE: WH			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 EMPLOYER CODE 10	21 OFFICE CODING 51760 WH	22 STATION CODE 57085	23 INTEGRITY CODE	24 HOURS CODE 3	25 DATE OF BIRTH 08 04 35	26 DATE OF GRADE 11 25 73	27 DATE OF LET 11 25 73
28 INT EXPRESS	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION / CANCELLATION DATE	IOD DATA		33 SECURITY REQ NO	34 SER
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 REGI HEALTH INSURANCE		40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA				

SIGNATURE OF OTHER AUTHENTICATION

WAR-12473

SECRET
DMS

DB

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11759 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	760	CF GS 11 4	\$16,138

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	760	CF GS 11 4	\$15,394

0.55

1 SERIAL NO.		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP REASON		
036133		FLORES DANIEL		51 700		CF				
6 OLD SALARY RATE				7. NEW SALARY RATE				8 TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	CI	ADJ	
GS 11	3	\$14,197	11/24/71	GS 11	3	\$14,197	11/29/72			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE						DATE				
						8 September 1972				
<input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLERKS INITIALS						AUDITED BY				
M R I E										
FORM 7-66 560 E Use previous editions		PAY CHANGE NOTIFICATION								(4-51)

COME FIRST
 STAR DIVISION

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 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: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51 700	CF	GS 11 3	\$14,197

BS: 8 DEC 71

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
PROMOTION						11 28 71		REGULAR			
6 FUNDS		V TO V		V TO CP		7 Financial Analysis No. Chargeable		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CP		2135 1084 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION					
DDP/WH DIVISION FOREIGN FIELD BRANCH 3, [] STATION						[]					
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION			
OPS OFFICER						0136		D			
14 CLASSIFICATION SCHEDULE (GS, FS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP		17 SALARY OR RATE			
GS			0136.01			11 3		13457			
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 INITIATION CODE											
24 PAYMENT CODE											
25 DATE OF BIRTH											
26 DATE OF GRADE											
27 DATE OF LEI											
28 PTE EXPIRES											
29 SPECIAL REFERENCE											
30 RETIREMENT DATA											
31 SEPARATION DATA CODE											
32 Correction / Cancellation Data											
33 SECURITY REG NO											
34 SER											
35 VET PREFERENCE											
36 SERV COMP DATE											
37 LONG COMP DATE											
38 CAREER CATEGORY											
39 FEGLI / HEALTH INSURANCE											
40 SOCIAL SECURITY NO											
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE											
42 LEAVE CAT CODE											
43 FEDERAL TAX DATA											
44 STATE TAX DATA											
45 SIGNATURE OR OTHER AUTHENTICATION											

POSTED

12-9-71

SECRET

FD-503 1150
May 67

Use Previous Edition

SECRET

(When Filled In)

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
036130		FLORES DANIEL		51 700		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	10	2	\$11,901	07/26/70	GS	10	2	\$12,295	07/25/71
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
				6 May 1971					
<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				AUDITED BY					
FORM 560 E Use previous editions				PAY CHANGE NOTIFICATION				(4-51)	

Jul 19
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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 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
FLORES DANIEL	036130	51 700	CF	GS 10 2	\$11,901

SECRET
(When Filled In)

BSJ: 10 AUG 70

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)											
036130		FLORES DANIEL											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
PROMOTION				MO DA YR 07 29 70		REGULAR							
6. FUNDS		V TO V		V TO CF		7. Functional Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY					
CF TO V		X		CF TO CF		1135 0884 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP/WH FOREIGN FIELD BRANCH 3						STATION BASE							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER				0376		D							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE				
GS			0136.01			10 2			11231				
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. INTEGRITY CODE	24. MAJOR CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		
22	10	51700/WH		19559		3	MO DA YR 08 04 35		MO DA YR 07 26 70		MO DA YR 07 26 70		
28. INT. EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION / CONCERN DATA		33. SECURITY REQ NO		34. SIA	
MO DA YR 07 25 72		81						EOD DATA					
35. VET PREFERENCE			36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. HEALTH INSURANCE			40. SOCIAL SECURITY NO	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION													

POSTED

08 AUG 1970

BSJ

SECRET

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11-00
100-10-01
Use Previous Form

655

1 SERIAL NO.		2. NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS		
036130		FLURES DANIEL			91 700		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 09	2	\$ 9,631	04/06/69	GS 09	3	\$ 9,942	04/05/70				
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.											
SIGNATURE						DATE					
<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											
CLEAR'S INITIALS				R. W. H. T. L. E.				AUDITED BY			
FORM 7-60 560 E		Use previous editions		PAY CHANGE NOTIFICATION						(4.31)	

5/12/70

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WMM

L.S.

"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 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	700	GS 09 2	8 9,631

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11924 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: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	700	GS 09 2	810,210

JLD: 24 APR 69

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

COF

1 SERIAL NUMBER 036130	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION	4 EFFECTIVE DATE 04 10 69	5 CATEGORY OF EMPLOYMENT 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	50 USC 403 J

9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3	10 LOCATION OF OFFICIAL STATION STATION BASE
--	--

11 POSITION TITLE OPS OFFICER	12 POSITION NUMBER 0376	13 SERVICE DESIGNATION D
----------------------------------	----------------------------	-----------------------------

14 CLASSIFICATION SCHEDULE (OS, LS, BK)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
GS	0136.01	09 2	8744

18 REMARKS

MARITAL STATUS: MARRIED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 55	20 EMPLOY CODE 10	21 OFFICE CODING 51700 WH	22 STATION CODE 19559	23 INTEGRAL CODE	24 PAY PLAN CODE 3	25 DATE OF BIRTH 08 04 35	26 DATE OF GRADE	27 DATE OF CE
28 NTE EXPIRES	29 SPEC. AL. REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION - CANCELLATION DATA	33 SECURITY BEN. NO.		34 SER.	
35 VET PREFERENCE	36 SERV. COMP. DATE	37 LONGER COMP. DATE	38 CAREER CATEGORY	39 REG. HEALTH INSURANCE	40 SOCIAL SECURITY NO.			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 (STATE CAT. CODE)	43 FEDERAL TAX DATA	44 STATE TAX DATA	45 SIGNATURE OR OTHER AUTHENTICATION				

POSTED

04-24-69 JLD

SECRET

PLW

FORM 1152
1-69
GPO: 1969 O-348-847

SECRET
(When Filled In)

JLE: 22 APR 69

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO CONFIDENTIAL FUNDS AND CHANGE OF SERVICE DESIGNATION			4 EFFECTIVE DATE 04 16 69
5 CATEGORY OF EMPLOYMENT REGULAR			6 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
7 FUNDING AGENCY No. Chargeable	8 CSC OR OTHER LEGAL AUTHORITY		
9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3	10 LOCATION OF OFFICIAL STATION		
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 0376	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS 18 44)	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP GS 2	17 SALARY OR RATE 8744
18 REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 20	20 EMPLOY CODE 10	21 OFFICE CODING NUMBER 51700	21 OFFICE CODING ALPHABETIC WH	22 STATION CODE 19559	23 PAY GRADE CODE 3	24 DATE OF BIRTH 08 04 35	24 DATE OF GRADE 04 06 69	27 DATE OF LEI 04 06 69
28 PAY SERIES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 Collection/Consentation Code	33 SECURITY REQ NO		34 SER	
30 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 REGU / HEALTH INSURANCE	40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA			

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042369 0/62

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JLU: 7 OCT 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL								
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				4 EFFECTIVE DATE 10 06 68		5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS X		V TO V CF TO V		V TO CF CF TO CF		7 Financial Analysis No. Chargeable 9235 0620 0000		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J		
9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 4 SECTION				10 LOCATION OF OFFICIAL STATION WASH., D.C.						
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 1441		13 SERVICE DESIGNATION SJ				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 08 2		17 SALARY OR RATE 7956				
18 REMARKS										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING 51450 WH		22 STATION CODE 75013	23 INTEGREE CODE	24 PAY GRADE 1	25 DATE OF BIRTH 08 04 35		26 DATE OF GRADE	27 DATE OF LEI
28 NTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction / Cancellation Date		33 SECURITY REQ NO	
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGU / HEALTH INSURANCE		40 SOCIAL SECURITY NO
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE		43 FEDERAL TAX DATA				44 STATE TAX DATA		
41 CODE		42 CODE		43 CODE		43 CODE		44 CODE		44 CODE
SIGNATURE OR OTHER AUTHENTICATION										
FROM CTP										
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>105885</p> <p><i>[Signature]</i></p> </div>										

FORM 1150
1-68
May 1967

Use Previous Edition

SECRET

SF.

Included here automatically accompanying and for information

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	28	300	V GS 08 2	\$ 7,630	\$ 7,956

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	28	300	V GS 06 3	\$ 6,263	\$ 6,547

JLB: 24 JUN 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																																																																																																																																																																										
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)																																																																																																																																																																								
036130		FLORES DANIEL																																																																																																																																																																								
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT																																																																																																																																																																		
PROMOTION						06 16 68		REGULAR																																																																																																																																																																		
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY																																																																																																																																																																		
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DDS/OTR CAREER TRAINING PROGRAM						WASH., D.C.																																																																																																																																																																				
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CAREER TRAINEE						0748		SJ																																																																																																																																																																		
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																																																																																																										
<table border="1"> <tr> <td>19. ACTION CODE</td> <td>20. EMPLOY CODE</td> <td colspan="2">21. OFFICE CODING</td> <td>22. STATION CODE</td> <td>23. INTEGREE CODE</td> <td>24. HIRING COND.</td> <td colspan="2">25. DATE OF BIRTH</td> <td colspan="2">26. DATE OF GRADE</td> <td colspan="2">27. DATE OF LEI</td> </tr> <tr> <td>22</td> <td>10</td> <td>NUMBER</td> <td>ALPHABETIC</td> <td>75013</td> <td></td> <td>1</td> <td>MO</td> <td>DA</td> <td>YE</td> <td>MO</td> <td>DA</td> <td>YE</td> </tr> <tr> <td></td> <td></td> <td>26300</td> <td>CTP</td> <td></td> <td></td> <td></td> <td>06</td> <td>04</td> <td>35</td> <td>06</td> <td>16</td> <td>68</td> </tr> <tr> <td colspan="2">28. INT. EXPIRES</td> <td colspan="2">29. SPECIAL REFERENCE</td> <td colspan="2">30. RETIREMENT DATA</td> <td colspan="2">31. SEPARATION DATA CODE</td> <td colspan="2">32. Correction - Cancellation Data</td> <td colspan="2">33. SECURITY REQ NO</td> <td>34. SER.</td> </tr> <tr> <td>MO</td> <td>DA</td> <td>YE</td> <td></td> <td>1. CSC</td> <td>2. CIA</td> <td>3. FCA</td> <td>4. NOMB</td> <td>TYPE</td> <td>MO</td> <td>DA</td> <td>YE</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2">35. VET PREFERENCE</td> <td colspan="2">36. SERV. COMP. DATE</td> <td colspan="2">37. LONG COMP. DATE</td> <td colspan="2">38. CAREER CATEGORY</td> <td colspan="2">39. FEGLI / HEALTH INSURANCE</td> <td colspan="3">40. SOCIAL SECURITY NO.</td> </tr> <tr> <td>CODE</td> <td>0. NONE 1. 5 PT 2. 10 PT</td> <td>MO</td> <td>DA</td> <td>YE</td> <td>MO</td> <td>DA</td> <td>YE</td> <td>CAF</td> <td>BSV</td> <td>CODE</td> <td>CODE</td> <td>0. WAIVER 1. YES</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="4">41. PREVIOUS CIVILIAN GOVERNMENT SERVICE</td> <td colspan="2">42. LEAVE CAT. CODE</td> <td colspan="4">43. FEDERAL TAX DATA</td> <td colspan="4">44. STATE TAX DATA</td> </tr> <tr> <td>CODE</td> <td colspan="3">0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 YRS. 3. BREAK IN SERVICE MORE THAN 3 YRS.</td> <td colspan="2"></td> <td colspan="2">FORM EXECUTED</td> <td colspan="2">CODE</td> <td colspan="2">NO TAX EXEMPTIONS</td> <td colspan="2">FORM EXECUTED</td> </tr> <tr> <td></td> <td colspan="3"></td> <td colspan="2"></td> <td colspan="2">1. YES 2. NO</td> <td colspan="2"></td> <td colspan="2">1. YES 2. NO</td> <td colspan="2">CODE</td> </tr> </table>												19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HIRING COND.	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		22	10	NUMBER	ALPHABETIC	75013		1	MO	DA	YE	MO	DA	YE			26300	CTP				06	04	35	06	16	68	28. INT. EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction - Cancellation Data		33. SECURITY REQ NO		34. SER.	MO	DA	YE		1. CSC	2. CIA	3. FCA	4. NOMB	TYPE	MO	DA	YE															35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.			CODE	0. NONE 1. 5 PT 2. 10 PT	MO	DA	YE	MO	DA	YE	CAF	BSV	CODE	CODE	0. WAIVER 1. YES														41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA				CODE	0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 YRS. 3. BREAK IN SERVICE MORE THAN 3 YRS.					FORM EXECUTED		CODE		NO TAX EXEMPTIONS		FORM EXECUTED								1. YES 2. NO				1. YES 2. NO		CODE	
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HIRING COND.	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI																																																																																																																																																															
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POSTED
PC
 6-24-68

SECRET
(When Filled In)

FVD: 15 DEC 67

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 2 NAME (LAST FIRST MIDDLE)
030130 FLORES DANIEL

3 NATURE OF PERSONNEL ACTION 4 EFFECTIVE DATE 5 CATEGORY OF EMPLOYMENT
PROMOTION AND CHANGE OF SERVICE DESIGNATION 12 | 17 | 67 REGULAR

6 FUNDS 7 Financial Analysis No. Chargeable 8 CSC OR OTHER LEGAL AUTHORITY
X V TO V V TO CF 6275 2100 0000 50 USC 403 J
CF TO V CF TO CF

9 ORGANIZATIONAL DESIGNATIONS 10 LOCATION OF OFFICIAL STATION
JCS/OTR CAREER TRAINING PROGRAM WASH., D.C.

11 POSITION TITLE 12 POSITION NUMBER 13 SERVICE DESIGNATION
CAREER TRAINEE 0748 SJ

14 CLASSIFICATION SCHEDULE (GS, LO, etc.) 15 OCCUPATIONAL SERIES 16 GRADE AND STEP 17 SALARY OR RATE
GS 0000.01 07 2 6859

18 REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 Employ Code	21 OFFICE CODING		22 STATION CODE	23 INTEGREE CODE	24 Hdqtrs Code	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEA
22	10	NUMERIC	ALPHABETIC	75013		1	MO DA YR	MO DA YR	MO DA YR
		28300	CTP				08 04 35	12 17 67	12 17 67
28. HTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA		33 SECURITY REQ NO	34 SER REQ NO
MO DA YR			1 - CSC 2 - CIA 3 - PICA 4 - NONE			TYPE MO DA YR			
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE	38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO.
CODE	0 - NONE 1 - 5 PT 2 - 10 PT	MO DA YR	MO DA YR	MO DA YR	CAR PERS TEMP	CODE	CODE	0 - WAIVER 1 - YES	HEALTH INS CODE
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA		
CODE		CODE		FORM EXECUTED: CODE			FORM EXECUTED: CODE		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				1 - YES 2 - NO			1 - YES 2 - NO		

EOD DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED
RW
12-26-67

FORM 1150

Use Previous Edition

SECRET

FVD

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

MAH: 20 SEPT 67

NOTIFICATION OF PERSONNEL ACTION															
OCF															
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)													
036130		FLORES DANIEL													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
CHANGE OF COST CENTER NUMBER						09 07 67		REGULAR							
6. FUNDS		X		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY					
CF TO V		CF TO CF		8235 0620 0000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONS SUPPORT SECTION						WASH., D.C.									
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION							
INTELLIGENCE ASST						1174		D							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE						
GS			0301.28			06 3			6263						
18. REMARKS															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. Hdqtrs. Code	25. DATE OF BIRTH			26. DATE OF GRADE			27. DATE OF LEI		
37	10	NUMERIC	ALPHABETIC	75013		1	MO	DA	YR	MO	DA	YR	MO	DA	YR
		51500	WH				08	04	35						
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REG NO.		34. SER		
NO	DA	YR		1 - CSC	CODE			TYPE	MO	DA	YR				
				2 - CIA											
				3 - FICA											
				4 - OTHER											
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE			40. SOCIAL SECURITY NO.				
CODE	0 - NONE	NO	DA	YR	NO	DA	YR	CODE	CODE	0 - WAIVER	HEALTH INS CODE				
	1 - 5 PT									1 - YES					
	2 - 10 PT									2 - YES					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA						
CODE	0 - NO PREVIOUS SERVICE					FORM EXECUTED			CODE		FORM EXECUTED				
	1 - NO BREAK IN SERVICE					1 - YES					1 - YES				
	2 - BREAK IN SERVICE LESS THAN 3 YRS					2 - NO					2 - NO				
	3 - BREAK IN SERVICE MORE THAN 3 YRS														
SIGNATURE OR OTHER AUTHENTICATION															
												11/20/67			

FORM 1150

Use Previous Edition

SECRET

MAH

GROUP 1 Excluded from automatic downgrading and declassification

(When Filled In)

SECRET 6-43
(When Filled In)

Pub

NOTIFICATION OF PERSONNEL ACTION

OCS 10/07/67

1 SERIAL NUMBER 036130	2 NAME (LAST-FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION CONV. TO CAREER EMPLOYEE STATUS	4 EFFECTIVE DATE MO. DA. YE. 03 11 65			5 CATEGORY OF EMPLOYMENT
	7 FINANCIAL ANALYSIS NO (CHARGEABLE)		8 CSC OR OTHER LEGAL AUTHORITY	
A FUNDS	<input checked="" type="checkbox"/> X	V TO V		V TO CF
		CF TO V	CF TO CF	

9 ORGANIZATIONAL DESIGNATIONS DUP/HM DIVISION	10 LOCATION OF OFFICIAL STATION
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11 POSITION TITLE	12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (GS, LB, etc.)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
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18 REMARKS

SIGNATURE OF OTHER AUTHENTICATION

FOR FILED
[Signature]

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET
(When Filled In)

MAIL: 28 JULY 67

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

036130 FLORES DANIEL

3. NATURE OF PERSONNEL ACTION
PROMOTION & PAY ADJUSTMENT TO FULL TIME

4. EFFECTIVE DATE 5. CATEGORY OF EMPLOYMENT

NO DA YR 07 130 167 REGULAR

6. FUNDS
X V TO V
CF TO V
V TO CF
CF TO CF

7. Financial Analysis No. Chargeable 8. CSC OR OTHER LEGAL AUTHORITY

8235 1152 0000 50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS

10. LOCATION OF OFFICIAL STATION

DDP/WH
WH/COG
INTELLIGENCE BRANCH
OPERATIONAL SUPPORT SECTION

WASH., D.C.

11. POSITION TITLE

12. POSITION NUMBER

13. SERVICE DESIGNATION

INTELLIGENCE ASST

1174

D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)

15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY GS RATE

GS

0301,28

06 3

6263

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. EMPLOYEE CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
28	10	51500 WH	75013			08 104 25 17	07 130 67	07 130 67
29. HTE EXPIRES	30. SPECIAL EMPLOYMENT	31. RETIREMENT DATA	32. SEPARATION DATA CODE	33. CORRECTION/CANCELLATION DATA	34. SECURITY REQ NO	EOD DATA		35. SEC
36. VET PREFERENCE	37. LBY COMP DATE	38. LONG EMP DATE	39. CAREER CATEGORY	40. FEES / DEDUCTIONS	41. SOCIAL SECURITY NO			
42. PREVIOUS CIVILIAN GOVERNMENT SERVICE			43. LEAVE CAT		44. FEDERAL TAX DATA		45. STATE TAX DATA	

SIGNATURE OR OTHER AUTHENTICATION

POSTED

08 07 67

FORM 1150

Use Previous Edition

SECRET

OFFICE OF PERSONNEL

(When Filled In)

653

Serial No.		Name		Emp. Center Number		LWOP Status				
036130		FLORES DANIEL		51 500 V						
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last In. Date	Grade	Step	Salary	Effective Date	PSI	ISI	ADI
GS 05	3	5,573	03/14/65	GS 05	4	5,694	03/13/66			
8 Remarks and Authentication										
<p>✓ NO EXCESS LWOP ✓ IN PAY STATUS AT END OF WAITING PERIOD ✓ LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>DA</i> AUDITED BY <i>[Signature]</i></p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: <i>[Signature]</i> DATE 9 FEB 66</p>										
PAY CHANGE NOTIFICATION										

Form 145 500E May 2-65

(4-51)

"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
FLORES DANIEL	036130	51	500 V	GS 05 4	\$ 5,694	\$ 5,859

FJH: 21 SEPT 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				09 19 66		PART TIME					
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X		7235 1162 0000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION				WASH., D.C.							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION					
INTELLIGENCE CLERK				1176		D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0301.27		05 4		5859					
REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
18. ACTION CODE	19. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTERSEE CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEV	
7	36	NUMERIC ALPHABETIC		75013		1	MO DA YR		MO DA YR	MO DA YR	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.	34. SER
								KOD DATA			
35. JYET PREFERENCE		36. SERV COMP DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. PEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 2px solid black; padding: 10px; display: inline-block;"> <p style="font-size: 24px; margin: 0;">POSTED</p> </div>											

FORM 1150

Use Previous Edition

SECRET

Label 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

RZF: 28 JAN 66

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		2 NAME (LAST-FIRST MIDDLE) FLORES DANIEL							
3 NATURE OF PERSONNEL ACTION CHG IN STRENGTH COUNT			4 EFFECTIVE DATE 01 30 66	5 CATEGORY OF EMPLOYMENT PART TIME					
6 FUNDS X		V TO V CF TO V	V TO CF CF TO CF	7 COST CENTER NO. CHARGEABLE 6235 1162 0000	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J				
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION			10 LOCATION OF OFFICIAL STATION WASH., D.C.						
11 POSITION TITLE INTELLIGENCE CLERK			12 POSITION NUMBER 1184	13 SERVICE DESIGNATION D					
14 CLASSIFICATION SCHEDULE (GS, LO, etc.) GS		15 OCCUPATIONAL SERIES 0301.27	16 GRADE AND STEP 05 3	17 SALARY OR RATE 5523					
18 REMARKS THIS ACTION CORRECTS COMPUTER CODING TO REFLECT CHANGE IN STRENGTH COUNT OF PART TIME PERSONNEL IN ACCORDANCE WITH PROVISIONS OF HR-20-10, REVISED 21 DECEMBER 1965.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE 33	20 EMPLOY. CODE 36	21 OFFICE CODING NUMERIC: 51500 ALPHABETIC: WH		22 STATION CODE 75013	23 INTEGRAL CODE	24 HOURS CODE	25 DATE OF BIRTH 08 04 35	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
28 HTE EXPIRES MO DA YR		29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 - COL 2 - FICA 3 - NONE	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA →		33 SECURITY REQ NO	34 SER
35 VET. PREFERENCE CODE 0 - NONE 1 - 5 YR 2 - 10 YR		36 SERV COMP DATE MO DA YR	37 LONG COMP. DATE MO DA YR	38 CAREER CATEGORY CODE	39 FEGLI / HEALTH INSURANCE CODE 0 - WAIVED 1 - YES		40 SOCIAL SECURITY NO		
41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (1-56 THRU 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)			42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED 1 - YES 2 - NO		44 STATE TAX DATA CODE NO. TAX STATE CODE			
SIGNATURE OR OTHER AUTHENTICATION									

FORM 1150
11 62

Use Previous Edition

SECRET

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FORM 1150-100
1-62
11-62

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	SI	500	V GS 05 3	\$ 5,330	\$ 5,523

25 AUG 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130		2. NAME (LAST-FIRST-MIDDLE) FLORES DANIEL	
----------------------------	--	--	--

3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE 08 25 65		5. CATEGORY OF EMPLOYMENT PART TIME	
6. FUNDS		7. COST CENTER NO. (CHARGEABLE)		8. CSC OR OTHER LEGAL AUTHORITY		
X		6235 1162 (XXX)		50 USC 403 J		

9. ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION			10. LOCATION OF OFFICIAL STATION WASH., D.C.		
--	--	--	---	--	--

11. POSITION TITLE INTELLIGENCE CLERK		12. POSITION NUMBER 1184		13. SERVICE DESIGNATION D	
--	--	-----------------------------	--	------------------------------	--

14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0301.27		16. GRADE AND STEP 05 3		17. SALARY OR RATE 5330	
--	--	------------------------------------	--	----------------------------	--	----------------------------	--

18. REMARKS

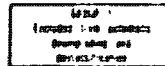
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION NO. (Employ Code)		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. MAINT. CODE		25. DATE OF BIRTH			26. DATE OF GRADE			27. DATE OF LEI		
37		20 515(X) WH		75(1)3				1		08 14 35								
28. NEE EXPIRES			29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REQ NO		34. SEX				
									EOD DATA									
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE			40. SOCIAL SECURITY NO.							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA								

SIGNATURE OR OTHER AUTHENTICATION

8-27-65 W

J. Flores



1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours				
036130		FLORES DANIEL		49 130 ^{36F} _v						
5. OLD SALARY RATE				6. NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PS	LS	ADJ.
GS 05	2	\$ 5,165	03/15/64	GS 05	3	\$ 5,330	03/14/65			
8 Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>YKS</i> AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>[Signature]</i> DATE 15 Feb. 1964										
PAY CHANGE NOTIFICATION										

MAR 11 1965

DLB: 5 FEB 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER 036130		2. NAME (LAST-FIRST-MIDDLE) FLORES DANIEL										
3. NATURE OF PERSONNEL ACTION PAY ADJUSTMENT TO PART TIME FROM FULL TIME				4. EFFECTIVE DATE MO. DA. YR 02 03 65		5. CATEGORY OF EMPLOYMENT PART TIME						
6. FUNDS		V TO V X		V TO CP		7. COST CENTER NO. CHARGEABLE 5235 1162 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION					10. LOCATION OF OFFICIAL STATION WASH., D. C.							
11. POSITION TITLE INTELLIGENCE ASST					12. POSITION NUMBER 1130		13. SERVICE DESIGNATION D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15. OCCUPATIONAL SERIES 0301.28		16. GRADE AND STEP 05 2		17. SALARY OR RATE 5165					
18. REMARKS SUBJECT TO WORK ON REGULARLY SCHEDULED TOUR NOT TO EXCEED 19 HOURS PER WEEK. SUBJECT WILL BE WORKING MONDAY THROUGH FRIDAY, FROM 1400 TO 1700.												
31 50 SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE 28	20. EMPLOY CODE 38	21. OFFICE CODING NUMERIC ALPHABETIC 49150 SAS		22. STATION CODE 75013	23. INTEGREE CODE	24. HOURS CODE 1	25. DATE OF BIRTH MO DA YR 03 04 35		26. DATE OF GRADE MO DA YR 03 16 64		27. DATE OF LEI MO DA YR 03 16 64	
28. USE EXPIRES MO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1 - CSC 2 - PICA 3 - NONE		31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA TYPE MO DA YR		33. SECURITY REQ NO		34. SER
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT		36. SERV COMP DATE MO DA YR		37. LONG. COMP. DATE MO DA YR		38. CAREER CATEGORY CAR RES PRCA TEMP		39. FEGLI / HEALTH INSURANCE CODE CODE 0 - WAIVER 1 - YES		40. SOCIAL SECURITY NO		
41. PREVIOUS GOVERNMENT SERVICE DATA 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YRS 3 - BREAK IN SERVICE MORE THAN 3 YRS				42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED CODE NO TAX STATE CODE 1 - YES 2 - NO				
SIGNATURE OR OTHER AUTHENTICATION										POSTED 02/05/65 WK		

DLB: 9 FEB 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION PAY ADJUSTMENT TO PART TIME FROM FULL TIME (CORRECTION)			4. EFFECTIVE DATE MO DA YR 02 08 65
5. CATEGORY OF EMPLOYMENT PART TIME			6. COST CENTER NO CHARGEABLE 5235 1162 0000
7. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			8. CSC OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION		10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE INTELLIGENCE ASST		12. POSITION NUMBER 1130	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc) GS	15. OCCUPATIONAL SERIES 0301.28	16. GRADE AND STEP 05 2	17. SALARY OR RATE 5165
18. REMARKS THIS ACTION CORRECTS FORM 1150 EFFECTIVE DATE 02/08/65 AS FOLLOWS: ITEM #19, ACTION CODE, WHICH READ 28, TO READ 31. ITEM #20, EMPLOYEE CODE, WHICH READ 36, TO READ 20.			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 31	20. EMPLOY CODE 20	21. OFFICE CODES NUMERICAL ALPHABETIC 49150 SAS	22. STATION CODE 75013	23. INTELLIGENCE CODE	24. GRADE CODE 1	25. DATE OF BIRTH MO DA YR 08 04 35	26. DATE OF GRADE MO DA YR 03 16 64	27. DATE OF LET MO DA YR 03 16 64
28. NTE EXPIRES MO DA YR	29. SPECIAL DEFERMENT	30. RETIREMENT DATA 1. CODE 2. DATE	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE MO DA YR	33. SECURITY RTO NO	EOD DATA		
34. VET PREFERENCE CODE 0 0000 1 0001 2 0002	35. SMOY COMP DATE MO DA YR	36. LOMV COMP DATE MO DA YR	37. CAREER CATEGORY CODE	38. FECA/HEALTH INSURANCE CODE	39. SOCIAL SECURITY NO			
40. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 NO PREVIOUS SERVICE 1 NO SERVICE IN SERVICE 2 SERVICE IN SERVICE (LESS THAN 1 YEAR) 3 SERVICE IN SERVICE (MORE THAN 1 YEAR)		41. LEAVE CODE CODE	42. FEEDBACK DATA CODE	43. LEAVE DATA CODE				

SIGNATURE OR OTHER AUTHENTICATION

FOSTED

[Handwritten Signature]

1150 1150

Use Previous Edition

SECRET

1150

USE PREVIOUS EDITION

When Filled In

MHC: 6 AUG 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT				08 06 64		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		5235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
DDP/SAS COUNTER-INTELL STAFF OPERATIONS SECTION				WASH., D.C.					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION			
INTELLIGENCE ASST				1130		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0301.28		05 2		4850			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES
37	10	49150	SAS	75013	1	1	08 04 35		
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA		33. SECURITY REG NO	34. SER
						EOD DATA			
35. RET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE	
40. PREVIOUS GOVERNMENT SERVICE DATA				41. LEAVE CAT CODE		42. FEDERAL TAX DATA		43. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 10-111D 08/13/64 JPK </div>									

FORM 1130

Use Previous Edition

SECRET 6 AUG 1964

Check
Number - not calculate
Date - fill in
Signature

(When Filled In)

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 07/01/64

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLCRBS DANIEL	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE MO DA YR 06 19 64
5 CATEGORY OF EMPLOYMENT		6 FUNDS	
7 COST CENTER NO CHARGEABLE 4232 1000 1000		8 CY OR OTHER LEGAL AUTHORITY	
9 ORGANIZATIONAL DESIGNATIONS DDP/SAS INTELL ST OPS SUP SEC		10 LOCATION OF OFFICIAL STATION WASH., D. C.	
11 POSITION TITLE TRANSLATOR		12 POSITION NUMBER 0922	13 CAREER SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LB, etc) GS	15 OCCUPATIONAL SERIES 1049.01	16 GRADE AND STEP 05	17 SALARY OR RATE
18 REMARKS			
SIGNATURE OR OTHER AUTHENTICATION <i>7/1/64 [Signature]</i>			

Form 1120
1-63 (MFL 1-63)

Use Previous
Edition

SECRET

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GPO: 1964 O-341-122

(When Filled In)

1. Serial No 036130		2. Name FLORES DANIEL		3. Cost Center Number 49 350		4. LWOP Hours 38F V 2 1 1 70				
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ
GS 04	2	\$ 4,355	03/17/63	GS 04	4	\$ 4,495	03/15/64			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / 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						DATE				
[Signature]						31 Jan 1964				
PAY CHANGE NOTIFICATION										

DEC 24 1964
 3 53 PM '64

Form 961 560 Obsolete Previous Edition (4-51)

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. RATING CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LET	
22	10	49350	SAS	75013	1	08	04	35	03	15	64	03	15	64			
28. WTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO		34. SER					
										EOD DATA →							
35. VET PREFERENCE		36. SERV. COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA							
SIGNATURE OR OTHER AUTHENTICATION																	
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> POSTED 03/17/64 [Signature] </div>																	

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1950, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 9 JANUARY 1964.

NAME	SERIAL	ORGAN FUNDS	GR-ST	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	49 350 V	GS 04 2	\$ 4,250	\$ 4,395

SECRET
(When Filled In)

RZP: 3 MAY 63

NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)							
036130		FLORES DANIEL							
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
REASSIGNMENT				05 09 63		REGULAR			
6 FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		3222 1000 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SPECIAL AFFAIRS STAFF RESEARCH BRANCH REPORTS, RECORDS, TRANSLATION SEC					WASH., D.C.				
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION			
TRANSLATOR				0702		D			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			0031.01		04 2		4250		
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE	
37		10		01350 SAS		75013			
24. DATE OF BIRTH		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI			
03 04 35		03 04 35							
28. DATE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA	
								EOD DATA	
33. NET PREFERENCE		34. SER (COMP DATE)		35. LONG (COMP DATE)		36. CAREER CATEGORY		37. FEELI / HEALTH INSURANCE	
38. PREVIOUS GOVERNMENT SERVICE DATA				39. LEAVE CAT		40. FEDERAL TAX DATA		41. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">12 May 1963 J.D.</p> </div>									

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

AMPD 07/31/63

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL		4 EFFECTIVE DATE MO DA YE 07 21 63		5 CATEGORY OF EMPLOYMENT	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				7 COST CENTER NO (CHARGEABLE) 4232 1000 1000		8 CSC OR OTHER LEGAL AUTHORITY	
6 FUNDS		X	V TO V	V TO CF			
			CF TO V	CF TO CF			
9 ORGANIZATIONAL DESIGNATIONS DDP/SAS				10 LOCATION OF OFFICIAL STATION WASH., D.C.			
11 POSITION TITLE TRANSLATOR				12 POSITION NUMBER 0702		13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS 18, etc) GS		15 OCCUPATIONAL SERIES 1045:01		16 GRADE AND STEP 04		17 SALARY OR RATE	
18 REMARKS							
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>POSTED</p> <p>10/14/63 JK</p> </div>							
SIGNATURE OR OTHER AUTHENTICATION							

BWS: 13 MARCH 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT				
EXCEPTED APPOINTMENT (CAREER PROVISIONAL)					MO DA YR 03 11 62		REGULAR				
6 FUNDS		V TO V		V TO CF		7 COST CENTER NO. CHARGEABLE		8 CSC OR OTHER LEGAL AUTHORITY			
X						2226 1200 1000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION						
DDP OPSER R I DIV REFERENCE BRANCH INDEX SECTION - NICHT SHIFT					WASH., D. C.						
11 POSITION TITLE					12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION				
FILE CLERK					0147		D				
14 CLASSIFICATION SCHEDULE (GS, LB, etc)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE				
GS			0305.01		04 1		4040				
18 REMARKS											
SUBJECT TO THE SATISFACTORY COMPLETION OF A TRIAL PERIOD OF ONE YEAR. SUBJECT TO THE SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGREE CODE	24 Hdqtrs. Code	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI
11	10	NUMERIC	ALPHABETIC	75013		1	MO DA YR	MO DA YR	MO DA YR	MO DA YR	
		39400	RI				08 04 35	03 11 62	03 11 62		
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REG NO.	34 SEX
MO DA YR			1 CSC 2 PFA 3 NONE	CODE		TYPE	MO DA YR			07100	MI
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 MIL. SERV CREDIT/LED		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO	
CODE	0 NONE 1 5 PT 2 10 PT	MO DA YR	MO DA YR	MO DA YR	1 YES 2 NO	CODE	CODE	0 - WAIVER 1 YES	HEALTH INS CODE	460486230	
0		03 11 58	03 11 62			P	1				
41 PREVIOUS GOVERNMENT SERVICE DATA				42 LEAVE CAT		43 FEDERAL TAX DATA		44 STATE TAX DATA			
CODE	0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 12 MOS) 3 BREAK IN SERVICE (MORE THAN 12 MOS)			CODE	44A EXECUTED 1 YES 2 NO	CODE	44B TAX EXEMPTIONS	FORM EXECUTED 1 YES 2 NO	CSSE EASMP	NO TAX	STATE CODE
0				6		1	0		1	0	08
SIGNATURE OR OTHER AUTHENTICATION											

CLASSIFICATION

FITNESS REPORT

SECTION A						GENERAL INFORMATION							
1. EMPLOYEE NUMBER		2. NAME (Last, First, Middle)				3. DATE OF BIRTH		4. SEX	5. GRADE		6. SU		
		Flores, Daniel				4Aug35		M	GS13		DQG		
7. OFFICIAL POSITION TITLE				8. DEPARTMENT OF ASSIGNMENT				9. REPORTING PERIOD		10. REPORTING PERIOD		11. REPORTING PERIOD	
Ops Officer				DDO/LA									
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT									
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (FROM-TO)				14. DATE REPORT DUE IN U.P.						
			10Oct78 - 30Sep79										

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—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 D.

M—Marginal 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.

P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

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	RATING LETTER
SEE ATTACHED [] TELEPOUCH 51744 (in 3383966) dtd 13 Nov 79.	
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
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, personal 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

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 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 D, attach a separate sheet.

NOV 15 3 01 PM '79

MAIL ROOM

SEE ATTACHED.

SECTION E

CERTIFICATION AND COMMENTS

1. 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

13 Nov 79

DCOS

Robert Berg /S/

2. BY EMPLOYEE

I HAVE OR HAVE NOT ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

13 Nov 79

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

13 Nov 79

COS

/S/

4. BY EMPLOYEE

I HAVE OR HAVE NOT ATTACHED A STATEMENT CONCERNING THE REVIEWER'S EVALUATION OF MY PERFORMANCE.

13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

CLASSIFICATION

/20/ *EYES ONLY*

CONFIDENTIAL

FRP:

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (653) INFO: RF, FILE, (7/W)

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PAGE 001

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TOR: 132307Z NOV 79

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CONFIDENTIAL 132241Z NOV 79 DEFERRED TELEPOUCH

CITE [] 51744

TO: WASHINGTON.

FOR: C/LA/PERS

SUBJECT: ADMIN/RYPAT/PERS/FR FOR []

Daniel Flores

1. GIVEN BELOW IS THE FITNESS REPORT FOR [] FOR THE PERIOD 1 OCT 78 TO 30 SEP 79. RATINGS ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD D. CHALDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY RONALD F. BRIERLEY, COS. THE REPORT HAS BEEN REVIEWED AND CERTIFIED BY SUBJECT. SIGNED COPY OF FORM 45A BEING POUCHED.

2. THE FOLLOWING INFO IS KEYED TO FORM 45N, SECTION A:
1. 03H130; 4. M; 5. GS-13; 6. DOG; 9. [] 10. CAREER;
11. ANNUAL; 12. 1 OCT 78 TO 30 SEP 79.

3. SECTION B. PERFORMANCE EVALUATION - SPECIFIC DUTIES:
1. DIRECTS THE ACTIVITIES OF AN [] MAN CI [] TEAM RESPONSIBLE TO THE STATION. RATING LETTER - S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST [] AND [] IN []. RATING LETTER - S.

3. CASE OFFICER FOR AGENTS AND OPERATIONS DIRECTED AGAINST THE [] TARGET. RATING LETTER - S.

4. SUPPORTS STATION OPERATIONS AND ACTIVITIES DIRECTED AGAINST THE [] AND OTHER TARGETS.

5. CASE OFFICER FOR []. RATING LETTER - S.

OVERALL RATING - STRONG.

0-63 2 [] 51744 C O N F I D E N T I A L

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4. SECTION C - NARRATIVE COMMENTS.

SHORTLY BEFORE THE DEPARTURE OF THE FORMER COS, HE SUBMITTED A SPECIAL MEMORANDUM ON SUBJECT'S PERFORMANCE ([REDACTED] 50702) WHICH CONCENTRATED MOSTLY ON SUBJECT'S RESPONSIBILITIES IN THE CI FIELD. A COPY OF THIS MEMORANDUM IS AVAILABLE IN SUBJECT'S PERSONNEL FILE. THE UNDERSIGNED FULLY ENDORSES THE LAUDATORY COMMENTS IN THAT MEMORANDUM, BUT SINCE SUBJECT HAS TAKEN ON BROADER RESPONSIBILITIES, IT IS NECESSARY TO COMMENT ON OTHER ASPECTS OF HIS WORK.

FOR THE PAST MONTHS, SUBJECT HAS BEEN DIVIDING HIS TIME ABOUT EQUALLY BETWEEN HIS CI RESPONSIBILITIES AND OTHER STATION OBJECTIVES, PRINCIPALLY THE [REDACTED] TARGET. SUBJECT WAS GIVEN THESE ADDITIONAL DUTIES BECAUSE THE CI OPERATIONS GROUP IS WELL ORGANIZED AND REQUIRES LESS DIRECT C/O INPUT, AND ALSO BECAUSE OF THE NEED TO DEDICATE ALL AVAILABLE RESOURCES AGAINST THE [REDACTED] TARGET. THIS STATION IS [REDACTED] OF [REDACTED] WITHIN THE DIRECTORATE WHICH HAVE BEEN SELECTED FOR A CONCENTRATED EFFORT AGAINST [REDACTED] AND THIS TARGET NOW RANKS NUMBER ONE AMONG THE STATION'S MANY PRIORITY OBJECTIVES. SUBJECT'S PAST EXPERIENCE IN [REDACTED] OPERATIONS, HIS ABILITY TO [REDACTED] AS A [REDACTED] IN THIS COUNTRY, AND HIS OTHER STRENGTHS, WERE THE INGREDIENTS WHICH THE STATION NEEDED TO EXPLOIT IN THIS EFFORT.

SUBJECT HAS TAKEN OVER THE PRINCIPAL STATION OPERATION DIRECTED AGAINST [REDACTED]. THIS WAS A FAIRLY NEW OPERATION AT THE TIME IT WAS ASSIGNED TO SUBJECT AND IT WILL MATURE UNDER HIS DIRECTION. FOR REASONS OF SENSITIVITY, A MORE DETAILED REVIEW OF SUBJECT'S WORK ON THIS OPERATION CANNOT BE PROVIDED, BUT THE RECORD SHOULD NOTE THAT DURING THE PAST THREE MONTHS, HE HAS HANDLED THIS OPERATION IN A THOROUGHLY PROFESSIONAL MANNER WITH STEADY PROGRESS BEING MADE TO FULLY EXPLOIT THE OPERATIONAL AND REPORTING POTENTIAL. ALSO DURING THIS REPORTING PERIOD, SUBJECT RENEWED CONTACT THROUGH HIS OWN EFFORTS WITH A FORMER REPORTING ASSET WHO HAD DRIFTED AWAY FROM COLLABORATION WITH THE ORGANIZATION. SUBJECT IS NOW ATTEMPTING TO BREATHE NEW LIFE INTO THIS OPERATION AND BRING IT BACK UNDER CONTROL.

SUBJECT ALSO COOPERATED WITH ANOTHER GOVERNMENT AGENCY IN ATTEMPTING TO RE-ESTABLISH CONTACT WITH A [REDACTED]

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PAGE 003
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[REDACTED] DURING THE TARGET'S VISIT TO THE [REDACTED] AREA. SUBJECT WAS IN CHARGE OF COORDINATING THIS OPERATION WITH [REDACTED] AND WITH THE OTHER AGENCY. THE OPERATION WAS SUCCESSFUL FROM THE POINT OF VIEW OF ARRANGING A MEETING WITH THE TARGET, BUT SINCE THE TARGET'S RETURN TO THE [REDACTED] HE HAS REFUSED EFFORTS BY SUBJECT TO CONTINUE CONTACT.

ANOTHER EFFORT AGAINST THE [REDACTED] TARGET UNDER SUBJECT'S RESPONSIBILITY INVOLVES THE RESOURCES OF THE SPECIAL CI OPERATIONS GROUP. FOR SOME MONTHS NOW, THIS GROUP HAS BEEN TRYING TO MOUNT A [REDACTED] AND PROSPECTS REMAIN ENCOURAGING THAT THIS EFFORT WILL SOON BE OPERATIONAL. THIS IS A FAIRLY COMPLEX UNDERTAKING WHICH REQUIRES PATIENCE AND AN ELEMENT OF GOOD LUCK IN ORDER TO BE SUCCESSFUL. SUBJECT DESERVES CONSIDERABLE CREDIT FOR THE PROGRESS MADE THUS FAR AND IF EVERYTHING GOES ACCORDING TO PLAN, THIS OPERATION SHOULD BE PRODUCING WITHIN A SHORT PERIOD OF TIME.

APART FROM HIS WORK AGAINST THE [REDACTED] TARGET, SUBJECT WAS SUCCESSFUL IN [REDACTED] AND LATER WAS ABLE TO [REDACTED] WITH THE [REDACTED] HIMSELF. FOLLOWING UP ON A LEAD FROM ANOTHER SOURCE THAT A [REDACTED] WITH A [REDACTED] SUBJECT USED HIS NATIVE LANGUAGE AND [REDACTED] AND [REDACTED] UNDER THE GUISE OF BEING A [REDACTED] WHO WANTED TO MONITOR THE [REDACTED] ASSESSMENT INFORMATION OBTAINED FROM THE [REDACTED] GREATLY FACILITATED THE ABILITY OF SUBJECT TO [REDACTED] ONCE CONTACT WAS MADE. SUBJECT WAS ABLE TO DISCERN THAT THE TARGET WAS POTENTIALLY VULNERABLE ON [REDACTED] BUT TIME DID NOT PERMIT THIS VULNERABILITY FROM BEING EXPLOITED BEFORE THE TARGET COMPLETED HIS TOUR AND DEPARTED THE COUNTRY. STATION REGRETS THAT A LEAD TO THIS TARGET WAS NOT IDENTIFIED EARLIER, BUT THIS DOES NOT DETRACT FROM THE PROFESSIONAL MANNER IN WHICH SUBJECT EXPLOITED EVERY OPPORTUNITY TO PUSH THIS CASE FORWARD AGAINST AN UNREALISTIC DEADLINE.

THIS REPORTING PERIOD HAS AGAIN BEEN ONE OF CONSIDERABLE ACTIVITY ON THE PART OF SUBJECT IN WHICH HE HAS DEMONSTRATED HIS TALENT FOR OPERATIONS AND PARTICULARLY HIS ABILITY TO

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DEVELOP AND HANDLE AGENTS. HE HAS DISPLAYED VERSATILITY AND FLEXIBILITY IN PURSUING HIS TARGETS AND IS EVER ALERT FOR VULNERABILITIES WHICH CAN BE EXPLOITED. HE USES GOOD JUDGMENT IN HANDLING HIS CASES AND HIS TRADecraft PROCEDURES DURING THIS PERIOD HAVE BEEN SOUND. IT SHOULD ALSO BE NOTED THAT THE PARTICULAR CASES WHICH HE IS INVOLVED ARE NOT EASY ONES. THEY REQUIRE HARD WORK, AND THE FULL RANGE OF CASE OFFICER EXPERIENCE IN ORDER TO PUSH THEM FORWARD. HIS RESPONSIBILITIES IN THE CI FIELD ARE EQUALLY DEMANDING. SUBJECT HAS MADE A VERY POSITIVE CONTRIBUTION TO THE WORK OF THIS STATION DURING THIS REPORTING PERIOD AND WELL DESERVES A RATING OF STRONG FOR HIS VARIOUS DUTIES AND A STRONG FOR HIS OVERALL PERFORMANCE.

5. COMMENTS BY REVIEWING OFFICER:

I CONCUR WITH THIS EVALUATION AND BELIEVE IT IS MOST COMPREHENSIVE AND OBJECTIVE. HAVING WORKED WITH SUBJECT DURING AN EARLIER PERIOD OF HIS CAREER WHEN HE WAS THEN A GOOD OFFICER (1970-72), I AM STRUCK BY THE REMARKABLE PROGRESS HE HAS MADE IN THREE KEY AREAS: OPERATIONAL THINKING AND ANALYSIS, WRITING, AND SOUND, PROFESSIONAL APPLICATION OF BASIC OPERATIONAL PRINCIPLES.

I AM DELIGHTED THIS HIGHLY CAPABLE, AGGRESSIVE OFFICER WILL BE REMAINING A THIRD YEAR AT THIS STATION AND LOOK FORWARD TO A MAJOR CONTRIBUTION FROM HIM IN MOST OPERATIONAL AREAS OF PRESENT PRIORITY CONCERN. RVN 13 NOV 79 DRV D9C.3.

END OF MESSAGE

CONFIDENTIAL

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FITNESS REPORT		NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A GENERAL INFORMATION					
1. EMPLOYEE NUMBER 036130		2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH 08/04/35	4. SEX M
		5. GRADE GS-13	6. SO DQG		
7. OFFICIAL POSITION TITLE Ops Officer			8. OFF/DIV/BR OF ASSIGNMENT DDO/LA/COG	9. CURRENT STATION Hqs	
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21-MONTH	<input type="checkbox"/> 30-MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to) 1 Dec 76 - 30 Sep 77		13. DATE REPORT DUE IN O.P. 31 October 77
SECTION B PERFORMANCE EVALUATION					
<p>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 C.</p> <p>M-<u>Marginal</u> 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-<u>Proficient</u> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-<u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O-<u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
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 Supervise the LA/COG, <input type="checkbox"/> and <input type="checkbox"/> section which includes <input type="checkbox"/> operations officers, <input type="checkbox"/> intelligence analyst, and a secretary.					RATING LETTER S
SPECIFIC DUTY NO. 2 As section chief, provide operational guidance and support to the field stations' efforts to develop and recruit Cubans in that area.					RATING LETTER S
SPECIFIC DUTY NO. 3 Assume direct case officer responsibility for sensitive <input type="checkbox"/> reporting sources, including TDY travel for debriefing purposes when the assets are available; developing leads for potential recruitment efforts against new targets.					RATING LETTER S
SPECIFIC DUTY NO. 4 Coordinate with other area division desks and components to provide maximum support to Cuban operational activities in their respective field stations.					RATING LETTER S
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

S
11/17

CONFIDENTIAL

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

Mr. Flores came to the Cuba Operations Group from a brief assignment to the Office of Training. Prior to the OTR interim, Mr. Flores had been a COG case officer and was therefore familiar with its operational techniques. During this ten-month period under review, Mr. Flores served as a section chief with responsibilities for [] stations with a [] target [] and [] and []. Mr. Flores was the only GS-13 officer to hold section chief responsibility, yet his performance compared favorably with that of the GS-14 section chiefs. As a section chief, Mr. Flores was supervisor for [] operations officers, [] intelligence analyst and a secretary. He was responsible for ensuring the prompt handling of correspondence to and from the field stations, and providing operational guidance and direction on matters pertaining to Cuban operations. His section was managed in a competent manner with Mr. Flores demonstrating his ability to delegate functional responsibilities. The Cuba Operations Group also functions in a direct case officer capacity, and Mr. Flores frequently traveled TDY to handle cases. He was the operations officer for one particularly sensitive and productive [] reporting case. This required him to travel on short notice and to arrange for secure meeting and debriefing sessions of this reporting source. Mr. Flores also traveled to [] on various occasions to meet with [] contacts and participate in developmental operations. One particular recruitment attempt required Mr. Flores to [] the

--CONTINUED--

SECTION D CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Rating <u>0.1</u> / Facilities: <u> </u>	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYP
	DC/LA/COG	

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED <input type="checkbox"/>	<u>4 November 1977</u>	<u>Daniel Flores</u>

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject likes to operate. He is very practical, experienced, and realistic. He is, however, a little quiet and tends to accept things the way they are. While I have no doubt as to his skills, he may need a bit more management experience to learn how to make things move despite obstacles. He has done a fine job running the [] and [] section of Cuba Operations Group.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL
	C/LA/COG

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN SHOWN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	<u>4 November 1977</u>	<u>Daniel Flores</u>

CONFIDENTIAL

CONFIDENTIAL

FITNESS REPORT

Daniel Flores

NARRATIVE COMMENTS

cont.

[redacted] and to devise a secure and timely method of approach to the individual Cuban.

In comparing Mr. Flores' performance as an operations officer and as a supervisor, I believe his performance is somewhat stronger in the former capacity. Mr. Flores has all the attributes of an excellent case officer: he is aggressive, thinks operationally, and is fast on his feet in an operational situation. He is further aided by his fluency in Spanish and has on more than one occasion successfully

[redacted] During his TDY travels, he has repeatedly demonstrated dedication to the job at hand, willingness to work long hours, and a flexibility to handle all types of situations.

Mr. Flores is less enthusiastic when it comes to the paperwork and bureaucratic requirements of his position. While he is a good writer, he tends to handle his written tasks in a hurried manner and consequently, his work oftentimes requires review. He is also inclined to take the shorter and easier approach when handling the paper flow requirements. I mention these points not because they represent basic shortcomings, but simply to contrast them to his exceptionally high performance in his operations officer capacity.

In sum, Mr. Flores is an extremely experienced, competent and well motivated operations officer. His talent as a "street operator" with a keen sense for the human target has been amply demonstrated. He has now quite successfully been introduced to his first supervisory position and proven that he is competent for assignments of this nature. I believe Mr. Flores is capable of handling positions of increasing responsibility and should be given the opportunity to do so.

* * *

CONFIDENTIAL

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A						GENERAL INFORMATION					
1. EMPLOYEE NUMBER 036130		2. NAME (Last, first, middle) FLORES, Daniel			3. DATE OF BIRTH 4 Aug 35		4. SEX M	5. GRADE 12		6. GD	
7. OFFICIAL POSITION TITLE Instructor Ops				8. OFF/DIV/BR OF ASSIGNMENT DDA/OTR/LTD		9. CURRENT STATION Hqs.		10. CODE (S, SPS)	X	HQS	DP
11. TYPE OF APPOINTMENT						12. TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL				
13. REPORTING PERIOD (7001-50-) 22 June - 19 November 1976						14. DATE REPORT DUE IN O.P. N/A					

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—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 D.										
M—Marginal	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.										
P—Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.										
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	Conducts tutorial training in clandestine operational trade-craft skills for [redacted] as well as U.S. staff and contract personnel.										RATING LETTER S
SPECIFIC DUTY NO. 2	In collaboration with sponsoring Agency components prepares detailed training programs and schedules for the conduct of tailored tutorial and small-group training.										RATING LETTER S
SPECIFIC DUTY NO. 3	Evaluate trainee performance in each program and prepare final training reports, and as appropriate draft follow-up questionnaires for field evaluation of training effectiveness.										RATING LETTER S
SPECIFIC DUTY NO. 4	Participate in live problems and exercises as [redacted] and [redacted] as required and contribute to improvement in training materials and techniques.										RATING LETTER S
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 and his performance of specific duties. Productivity, conduct on job, cooperativeness, attendance, promptness, etc., are factors and previous assignments or ratings. Do not rate on the basis of employee's general performance during the rating period unless the latter is the rating base as applicable to the assignment which was done. Only reflect on type of performance.															
<table border="0"> <tr> <td>45</td> <td>SECRET</td> <td>13 AUG 1976</td> <td>DDA/OTR</td> </tr> </table>												45	SECRET	13 AUG 1976	DDA/OTR
45	SECRET	13 AUG 1976	DDA/OTR												

SECRET
CLASSIFICATION

SECTION D NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in present 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 items which provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section D, use a separate sheet of paper.

Mr. Flores joined the [redacted] Unit in mid-June 1976 and after a week's familiarization with training materials, aids and office routine of the Unit, he attended a two-week Instructor Training Workshop at the [redacted]. On completion of the Workshop, Subject returned to the Unit for further familiarization with the routine of the Unit, assisted in several [redacted] problems, and monitored a two-week training program which included active participation as a trainee himself in the SAI (or persuasion skills) portion of the program. Subsequently Mr. Flores assisted as a [redacted] in a brief but significant program involving the training of a [redacted] assisting the Agency in [redacted]. Mr. Flores then assisted another instructor in devising and conducting the first program this Unit has undertaken designed to teach [redacted] to Staff Employees who are deemed likely to be [redacted] of [redacted] and [redacted]. Mr. Flores then planned for, and from 12 October through 19 November conducted a tutorial training program in clandestine operations tech-

(continued)

SECTION E CERTIFICATION AND COMMENTS

1. BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
4 Months	
DATE	OFFICIAL TITLE OF SUPERVISOR
17 January 1977	Chief, ALT Unit
2. BY EMPLOYEE	
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE
[redacted]	26 Jan 77
3. BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL	
I concur in the ratings on specific duties and on the overall rating of STRONG for Mr. Flores. Although he was assigned to this Unit for a short period of time, he was proving to be a well qualified operations instructor. His home Division requested his return in order to give him a responsible position for which he was well qualified, and he should do well on that assignment.	
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL
19/1/77	[redacted]
4. BY EMPLOYEE	
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE
[redacted]	[redacted]

14-00000

S E C R E T

Continuation of Section D of Fitness Report on Daniel Flores,
GS-12, for period 22 June - 19 November 1976 -----

niques for a [redacted] who is scheduled to serve as an [redacted]
[redacted] in the [redacted].

The first independent training task given to Mr. Flores was of a [redacted] serving as an access agent, but this task was cancelled at the last minute when the concerned Base discovered grounds for field termination of the agent rather than providing tutorial training for the agent in the U.S. Mr. Flores was justifiably irritated at this turn of events which denied him what held promise for being a challenging initial training program.

It was with regret that we learned, early into what turned out to be Mr. Flores' only independent training program, that a priority requirement of his home-base Division would necessitate his return to Division duty soonest. The Division agreed to our request that Mr. Flores conclude the training program he had tailored, and begun, and Mr. Flores is to be commended for having done an exceptionally fine job in this assignment. The completion-of-training report was also well organized, and the questionnaire which asks for an evaluative follow-up from the trainee's field Station is to the point.

Early in his assignment Mr. Flores took over the maintenance and improvement of the Unit's operations training slides, consolidated them into an extremely functional package, and solicited ideas from other instructors to improve the package. Much to his credit and the Unit's benefit, Mr. Flores managed to persuade another Agency component to undertake--without charge--a major revamping of some of the slides using computer-designed art work to replace some of the less impressive early work in this field.

S E C R E T

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION

1. OFFICIAL POSITION TITLE 036130 Ops Officer	2. NAME (Last, First, Middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS13	6. NO. DOG
7. OFFICE OF ASSIGNMENT DDO/LA		8. CURRENT STATION		9. HOURS OF DAY	
11. TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CONTRACT <input type="checkbox"/> SPECIAL <input type="checkbox"/> OTHER			12. TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT <input type="checkbox"/> SPECIAL		
13. REPORTING PERIOD (From-To) 15 Feb - 30 Sept 78			14. DATE REPORT DUE IN O.P.		

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—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 D.
- M—Marginal** 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.
- P—Proficient** Performance is satisfactory. Desired results are being produced in the manner expected.
- 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 SEE ATTACHED [] 47396 (IN 1584998) dtd 18 Nov 78	RATING LETTER
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
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, cooperation, personal 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 closely reflects his level of performance.

RATING LETTER

Handwritten initials/signature

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 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 D, attach a separate sheet of paper.

24 10 50 AM '78

SEE ATTACHED.

NAV ROOM

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

Rating Officer Profile:

DATE

OFFICIAL TITLE OF SUPERVISOR

01 9 15 78

18 Nov 78

DCOS

Robert Berg /S/

2. BY EMPLOYEE

I HAVE OR HAVE NOT ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

COS

Lawrence Sternfield /S/

4. BY EMPLOYEE

I CERTIFY I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT. I HAVE HAVE NOT ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

CLASSIFICATION

NO EYES ONLY

CONFIDENTIAL

FRP:

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (503) INFO: WF, FILE, (7/A)

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TOW: 182031Z NOV 78

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CITE: [] 47396

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TO: WASHINGTON.

FOR: C/LA/PERS

DAN FLORES

SUBJECT: ADMIN/PYRAT/PERS/FITNESS REPORT FOR [REDACTED]

1. GIVEN BELOW IS THE FITNESS REPORT ON SUBJECT FOR THE PERIOD 15 FEB - 30 SEPT 78. RATING ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD O. CHAIDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY JOEL N. NEBECKER, COS. SUBJECT WAS NOT SHOWN A COPY OF THIS REPORT AS HE DEPARTED STATION ON EMERGENCY LEAVE BEFORE THE REPORT COULD BE TYPED. A COPY WILL BE MADE AVAILABLE TO HIM IMMEDIATELY UPON HIS RETURN AND ANY STATEMENT BY THE EMPLOYEE WILL BE TELEPOUCHED TO HQS. A SIGNED COPY OF FORM 45A WILL BE POUCHED AT THAT TIME.

2. THE FOLLOWING INFO IS KEYED TO FORM 45A, SECTION A:
1. 036130; 4. M; 5. GS-13; 6. DUG; 9. [REDACTED]
10. CAREER; 11. ANNUAL; 12. 15 FEB-30 SEP 78.

3. SECTION B. PERFORMANCE EVALUTATION - SPECIFIC DUTIES:

1. DIRECTS THE ACTIVITIES OF AN [REDACTED] MAN, CI [REDACTED] TEAM RESPONSIBLE TO THE STATION, AND WHICH INCLUDES COORDINATING ALL REACTION OPS INITIATED BY THE TEAM. RATING LETTER -- S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST [REDACTED] AND [REDACTED] IN [REDACTED] RATING LETTER -- S.

3. CASE OFFICER FOR [REDACTED] RATING LETTER -- S.

4. COORDINATES SENSITIVE CE OPERATIONS RUN BY OTHER NONBLAZON AGENCIES WITH [REDACTED] RATING

CONFIDENTIAL

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CONFIDENTIAL

DEFERRED TELEPOUCH

78 1584998

PAGE 002
TOP: 1820312 NOV 78

1584998
47396

LETTER -- S.

5. CONDUCTS OTHER LIAISON RELATED CI ACTIVITY AND PREPARES NECESSARY MEMORANDA AND REPORTS. RATING LETTER -- S.

OVERALL PERFORMANCE -- S.

4. SECTION C - NARRATIVE COMMENTS

THIS IS THE INITIAL REPORT WRITTEN ON SUBJECT AND COVERS A PERIOD OF SEVEN AND ONE-HALF MONTHS SINCE HIS ARRIVAL IN [REDACTED] IN FEB 78. SUBJECT HAS BEEN IN THE ORGANIZATION FOR OVER 16 YEARS AND SERVED TWO O/S ASSIGNMENTS PRIOR TO [REDACTED]

HIS PRIMARY DUTY IS TO SUPERVISE THE OPERATIONS OF A CI UNIT COMPOSED OF PERSONNEL [REDACTED] BUT WHICH IS UNDER THE OPERATIONAL DIRECTION OF THE STATION. THIS PARTICULAR UNIT REPRESENTS THE NUCLEUS OF THE STATION'S CI OPERATIONAL CAPABILITY. IT IS ALSO A STRONG CONTRIBUTOR TO STATION'S EFFORTS DIRECTED AGAINST THE HARD TARGETS IN THE FI FIELD. SUBJECT PARTICIPATES IN ALL LEVELS OF ACTIVITY WITH THIS UNIT FROM THAT OF A MANAGER TO SERVING AS AN OPERATIONS OFFICER. THE LEADERSHIP AND EXAMPLE WHICH HE SETS HAVE BEEN AN ESSENTIAL INGREDIENT IN THE SUCCESS ENJOYED BY THE UNIT IN RECENT MONTHS. IN APRIL 1978, THE STATION UNDERTOOK AN [REDACTED] DIRECTED AT THE [REDACTED]

[REDACTED] OF A [REDACTED] SUBJECT PARTICIPATED IN THE RECRUITMENT OF A [REDACTED] WHO PROVIDED ACCESS TO THE TARGET INSTALLATION AND WAS SUBSEQUENTLY INVOLVED IN ALL ASPECTS OF THE OPERATION EXCEPT THE ACTUAL [REDACTED] OF THE [REDACTED] THIS SUCCESSFUL OPERATION WAS FOLLOWED BY ANOTHER ONE THE FOLLOWING MONTH, THIS TIME DIRECTED AT THE [REDACTED] OF A [REDACTED] TWO VALUABLE REPORTS WERE PRODUCED FROM THIS OPERATION ON THE POLICIES AND PLANS OF [REDACTED]

A [REDACTED] IN JULY, SUBJECT SUPERVISED THE RECRUITMENT OF AN AGENT WHO HAS ESTABLISHED ACCESS TO A [REDACTED] A TECHNICAL OPERATION IS NOW UNDERWAY TO [REDACTED]

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78 1584998

PAGE 003
TOR: 182031Z NOV 78

1584998
47396

IN SEPTEMBER, ANOTHER OPERATION BEGAN AGAINST THE [REDACTED] OF THE SAME PRINCIPAL ADVERSARY MENTIONED ABOVE SINCE A [REDACTED] HAD BEEN ACQUIRED. AGAIN, SUBJECT PARTICIPATED IN THE RECRUITMENT OF THE [REDACTED] OF THE [REDACTED] AND IN OTHER PHASES OF THE OPERATION WHICH CONTINUE AT THIS TIME.

IN ADDITION TO THESE SPECIFIC OPERATIONS, THE CI UNIT ALSO CARRIES OUT A MOST OF [REDACTED] AND OTHER WORK AS REQUIRED IN THE CI FIELD. SINCE [REDACTED] SERVES AS PROBABLY THE PRINCIPAL BASE FOR OPERATIONS BY THE [REDACTED] AND THE [REDACTED] THE UNITED STATES, SELECTIVE TASKING MUST BE UNDERTAKEN TO OBTAIN MAXIMUM EFFICIENCY FROM THIS SMALL UNIT.

SUBJECT ALSO HANDLES [REDACTED] OF THE CI UNIT, AND IS ALSO RESPONSIBLE FOR PROVIDING SUPPORT THROUGH THIS UNIT TO OTHER CI ACTIVITIES DIRECTED AGAINST [REDACTED] AND [REDACTED] IN [REDACTED]

INDEED, THE FIRST PART OF HIS TOUR IN [REDACTED] HAS BEEN A BUSY ONE. THE STATION FINDS HIM TO BE AN ENERGETIC, VERSATILE, AND HIGHLY QUALIFIED OFFICER. HE HAS HANDLED THE PERSONNEL AND OPERATIONAL PROBLEMS WHICH HAVE SURFACED WITH HIS CI UNIT WITH TACT AND EFFICIENCY, AND HIS RAPPORT WITH HIS [REDACTED] IS VERY GOOD. DURING RECENT CONVERSATIONS, [REDACTED] HAVE EXPRESSED THEIR HIGH REGARD FOR SUBJECT'S ABILITIES.

HIS ABILITY TO [REDACTED] AS A [REDACTED] IS AN ADDED FACTOR IN HIS FAVOR AND PROVIDES HIM WITH A GREATER DIMENSION FOR OPERATIONS. THE STATION HAS USED SUBJECT ON OCCASION FOR [REDACTED] OPERATIONS, BUT THIS USE MUST BE SELECTIVE IN ORDER NOT TO ADVERSELY IMPINGE UPON HIS PRIMARY WORK WITH THE CI UNIT.

SUBJECT IS VERY COST CONSCIOUSNESS IN THE USE OF STATION FUNDS AND EXTRACTS A HEALTHY RETURN FOR PROJECT MONIES USED TO SUPPORT THE WORK OF THE CI UNIT.

SUBJECT WELL DESERVES A RATING OF STRONG FOR HIS

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OFFICE OF CONFIDENTIAL

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PAGE 004
TOR: 182031Z NOV 78

1584998
47396

VARIOUS DUTIES AND AN OVERALL STRONG FOR THIS REPORTING PERIOD. WE LOOK FORWARD TO A CONTINUED HIGH LEVEL OF PERFORMANCE DURING THE YEAR TO COME.

5. SECTION D.1. SUBJECT HAS BEEN UNDER MY SUPERVISION FOR SEVEN AND ONE-HALF MONTHS. D.3: COMMENTS BY REVIEWING OFFICIAL:

I FULLY CONCUR WITH THE NARRATIVE COMMENTS OF THE REVIEWER. SUBJECT HAS DISPLAYED A GREAT AMOUNT OF IMAGINATION AND ENERGY IN DIRECTING A DIFFICULT ACTIVITY NAMELY COUNTERINTELLIGENCE ACTIVITY THAT IS SEVERELY RESTRICTED BY ATTORNEY GENERAL GUIDELINES TO THE EXISTING EXECUTIVE ORDER. SUBJECT HAS DESPITE THIS BEEN ABLE TO KEEP A VERY POSITIVE THRUST TO HIS OPERATIONS AND HAS BEEN ABLE TO MOTIVATE THE AGENTS AND PERSONNEL UNDER HIS CONTROL. I AM TOTALLY SATISFIED WITH HIS ENERGY AND MOTIVATION. DESPITE THE FRUSTRATIONS INHERENT IN THE COUNTERINTELLIGENCE ACTIVITY HE CARRIES ON WITH A HIGH SPIRIT AND A TREMENDOUS AMOUNT OF GOOD WILL. NO MEAN ACHIEVEMENT AT THIS JUNCTURE OF AGENCY COUNTERINTELLIGENCE ACTIVITIES. E3, IMPDET.

END OF MESSAGE

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CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION									
1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D				
7. OFFICIAL POSITION TITLE Operations Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/LA/COG	9. CURRENT STATION Headquarters		10. COGE (if any) X HQB DP				
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL		
13. REPORTING PERIOD (from-to) 01 July 1975 - 30 June 1976					14. DATE REPORT DUE IN O.P. 31 July 1976				

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—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 D.

M—Marginal 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.

P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

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 Handle a sensitive and productive [redacted] in Cuban operations via TDY travel to meet, debrief, and prepare operational/intelligence reports.	RATING LETTER O
---	-------------------------------

SPECIFIC DUTY NO. 2 Review incoming operational correspondence from Latin America on Cuban matters and ensure that prompt response and helpful guidance is provided.	RATING LETTER S
--	-------------------------------

SPECIFIC DUTY NO. 3 Maintain a thorough familiarity with all Cuban activities in Latin America and our operations against them; carry out coordination with other components where appropriate.	RATING LETTER S
---	-------------------------------

SPECIFIC DUTY NO. 4 Develop leads against the Cuban target by [redacted] and ultimately [redacted] etc., of [redacted] to obtain assessment data on the targets as well as use the leads in approaches to [redacted]	RATING LETTER O
--	-------------------------------

SPECIFIC DUTY NO. 5 Work closely with the IA's of the section to ensure that they answer all required correspondence and to stimulate them to be creative and productive.	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, positive 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

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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 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 D, attach a separate sheet of paper.

This officer has worked under my supervision for approximately six months. This is the first fitness report I have prepared on him. After two field tours and his current assignment to Cuba Operations Group, he has developed into a solid and professional operations officer with the skills we hope our employees will develop. He is now highly motivated and creative in his work. He has demonstrated, particularly in recent months, a gratifying degree of drive and interest.

He has handled one of our most productive and sensitive [redacted] assets. With his guidance this agent has produced, within the past six months, some of the highest quality intelligence on [redacted] and [redacted] this Agency has obtained. Because this agent must be serviced via TDY travel, the responsible case officer must be able to work with very little guidance and have the tradecraft skills and reports writing ability to work largely on his own. With this case Mr. Flores has demonstrated himself to be a first-class agent handler, highly attuned to operational information and quality intelligence production.

As Section Chief I have relied upon him heavily to provide the institutional memory our work demands. He has full grasp of all operations directed against [redacted] not only in those countries under his direct responsibility, but throughout Latin America. Since all of the officers in this section [redacted] and [redacted] agents, Mr. Flores has frequently acted as Section Chief during the absence of the other [redacted] officers, a GS-14 position. He has been able to handle the job well both

SECTION E CERTIFICATION AND COMMENTS

1. 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
	C/LA/COG [redacted]

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED <input type="checkbox"/>	20 Dec 1976	[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL
I agree with the ratings given by the rating officer. Mr. Flores is indeed a fine operations officer and should have an exceptionally successful career in operations. The only weakness in him that I have ever noted is an occasional lack of drive and self-motivation and as noted by the rating officer, particularly in recent months, he seems to have cured this and has indeed been going at a fast pace.

Mr. Flores is leaving Cuba Operations Group for a rotational tour in the Office of Training. I believe that when he finishes this tour, he should return for an operational assignment in the Latin America area. He is an exceptionally fine case officer, has a native command of Spanish, and has a way of dealing with his agents that gets the most out of them. Future tours for him should involve supervision of younger case officers and he should begin to move into the managerial aspects of operations.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	Chief, L/COG	[Signature]

4. BY EMPLOYEE

COPIES OF THIS REPORT HAVE BEEN PREPARED IN ACCORDANCE WITH THE REQUIREMENTS OF THE REPORT	DATE	SIGNATURE OF EMPLOYEE
		[Signature]

CLASSIFICATION

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S E C R E T

FITNESS REPORT

Daniel Flores

cont.

SECTION D

in terms of paper flow and personnel administration. He demonstrates an ability to advance further along these lines. Also during the period under review he participated in an approach against the [redacted] of [redacted] in a Latin America country. Although the recruitment effort was not successful, it was conducted in a professional manner and Mr. Flores used an [redacted] in a very effective manner.

He has been perhaps the most aggressive officer in the Cuba Operations Group in pursuing leads for interviews of [redacted] and [redacted]. During the period under review he conducted at least [redacted] such interviews and developed good assessment data on various targets.

As a native Spanish speaker, Mr. Flores has the ability to [redacted] as a [redacted] and has successfully carried out roles as a [redacted]. This ability to [redacted] has been of great assistance in handling the key case he relinquished only on leaving LA/COG.

Mr. Flores has now overcome an earlier reluctance to be aggressive which former supervisors might have noted. I am confident he will maintain and build further on what I have found to be a highly improved sense of enthusiasm. I am sure he will be a strong contributor to his new component.

* * *

No. 3

He is an officer who merits further responsibility and one who should continue to rise in rank as he assumes these additional responsibilities. It has been a pleasure to work with him and I should like to do so with him in the future.

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CLASSIFICATION

FITNESS REPORT					
SECTION A GENERAL INFORMATION					
1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF. DIV BR OF ASSIGNMENT DDO/LA/COG		9. CURRENT STATION Washington, D.C. <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL
			<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL	
13. REPORTING PERIOD (from-to) 1 October 1974 - 30 June 1975			14. DATE REPORT DUE IN O.P. 31 July 1975		
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					
<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 D.</p> <p>M—Marginal 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.</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 Case Officer for COG's Latin America area responsible for operational support of LA field Stations Cuba programs.					RATING LETTER S
SPECIFIC DUTY NO. 2 Case officer for <input type="checkbox"/> sensitive <input type="checkbox"/> operations.					RATING LETTER S
SPECIFIC DUTY NO. 3 Develop leads to potential Cuban recruitment targets and personally interview prospective access agents.					RATING LETTER S
SPECIFIC DUTY NO. 4 Supervisor for <input type="checkbox"/> Intelligence Analyst					RATING LETTER S
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, foreign language competence, if required for current position. Amplify or explain ratings given in Section C 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 D, attach a separate sheet of paper.

LA/COG is both a Headquarters and an active opera-

As such, Mr. Flores assignment is

His performance is being rated in both capacities which means that much higher criteria is being applied than for most Headquarters officers.

Mr. Flores has proved to be a professional agent handler, and has been used very effectively in new, sensitive operations Headquarters. Although he did not participate in the recruitment of these sources, Mr. Flores was brought in to provide initial training, and detailed guidance necessary to develop the new assets into reporting sources. One was a complicated case of a who Mr. Flores helped debrief, then trained and The other was a successful of a source with excellent access to the Mr. Flores' job, after being introduced by the recruiting officer, is to make the source into a fully controlled asset and maximize the excellent potential for intelligence information.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

8 August 1975

OFFICIAL TITLE OF SUPERVISOR

ADC/LA/COG

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

9 Aug. 1975

SIGNATURE OF EMPLOYEE

[Signature]

HOPE ATTACHED

HAVE NOT ATTACHED

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

LA/COG has operations officers performing duties similar to those assigned to Mr. Flores--Case officer responsible for recruiting/handling agents directed against a hard target and also staff duties as a Desk Chief. These tasks are the Latin America Division as these officers serve as and also as Headquarters desk officers. All are handled by these employees. I would rank Mr. Flores in the middle of this group, but it must be taken into consideration that all the other officers are senior in grade.

DATE

8 August 1975

OFFICIAL TITLE OF REVIEWING OFFICIAL

AC/LA/COG

BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

9 Aug. 1975

SIGNATURE OF EMPLOYEE

[Signature]

CLASSIFICATION

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-2-

Continuation of Section D

His professional, no-nonsense handling has already contributed to highly significant information (a value quotient of 7.0 with one XX report) on some of the Agency's current Cuba priorities including Cuba's negotiating attitude vis-a-vis the U.S.

In his capacity as Desk officer for field stations in Latin America, Mr. Flores is charged with providing guidance and support aimed at recruitment operations [redacted]. He has conducted interviews of [redacted] in the U.S. and initiated a promising [redacted]. He supervises [redacted] intelligence analyst and, together, they effectively ensure timely response to field requests and help stations to identify operational opportunities, recruitment targets and--where necessary--keep them aware of the priority of the Cuban target.

By his performance, Mr. Flores has demonstrated he is a versatile case officer with good operational instincts; he is showing increasing aggressiveness and imaginative support of field stations in their efforts to [redacted]. While he is an excellent agent handler who gets maximum intelligence production from his assets, he is less thorough when handling the administrative details involved in his operations. He needs more supervisory experience, and still tends to rely excessively on his IAs to search for operational leads and conduct operational research.

Mr. Flores was sponsored by the Division, and attended the mid-career course in November 1974. He has excellent potential for further advancement in the Division and has been a significant factor in LA/COG's success over the last year in developing access to Cuba, a recognized hard target.

Continuation of Section E

Subject excels as an agent handler motivating his agents and disciplining them when required to obtain quality intelligence. He handles [redacted] of LA/COG's most sensitive [redacted] and during this period, he has met these [redacted] and in [redacted]. He has certainly targetted these [redacted] agents against priority objectives and the intelligence produced has been of vital interest to U.S. Government policymakers in this delicate period of Cuban negotiations. Latin America Division has received commendations from

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Continuation of Section E

the intelligence community for reports acquired through Mr. Flores. Subject's staff duties include desk chief responsibilities for support and guidance to field programs including the research and targetting required to conduct an effective recruitment program. Although such duties requiring supervision are new to him, he is also making progress in this capacity. With proper guidance and assistance, he will develop into a most effective supervisor.

Mr. Flores native fluency in Spanish and his Latin background have proven most valuable to Cuban operations. In fact he represents himself as [redacted] For an officer his grade, he is very mature, self assured, has good common sense and is certainly a professional. Subject has completed two tours in the field and is an experienced ops officer. He is intelligent, imaginative, uses good tradecraft at all times and has a clear headed approach to the business. He expresses himself well orally and in writing, and works very well with other case officers. Mr. Flores keeps up to date on political, economic and social affairs pertaining to Cuba and he willingly accepts difficult tasks requiring frequent separations from his family.

Subject definitely has potential. He is operationally aggressive and is gaining experience as a manager. Mr. Flores is already performing at a higher level than his grade. In approximately a year, he should be again dispatched to the field as a senior officer responsible for handling [redacted] or [redacted] targets. During the next reporting period, Mr. Flores should receive training in supervision. He is a solid performer in the Cuban Operations Group and has contributed much to our successes during the past year.

SECRET

CLASSIFICATION

FITNESS REPORT

SECTION A		GENERAL INFORMATION					
1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D		
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF. DIV BR OF ASSIGNMENT DDO/LA/COG		9. CURRENT STATION Washington, DC		10. CODE (if one) X HQS OF	
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
13. REPORTING PERIOD (from-to) 5 March 1974 - 30 September 1974				14. DATE REPORT DUE IN O.P.			

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-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>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.
<u>M-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>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 Primary case officer for a sensitive [redacted]	RATING LETTER S
SPECIFIC DUTY NO. 2 Provide operational support and guidance for Cuban operations conducted by LA Division Stations.	RATING LETTER P
SPECIFIC DUTY NO. 3 Direct and supervise Intelligence Assistants assigned to specific areas of responsibilities.	RATING LETTER S
SPECIFIC DUTY NO. 4 Desk case officer for access agents and support assets in LA Division Stations' Cuban operations.	RATING LETTER S
SPECIFIC DUTY NO. 5 Search for leads in the U.S. for LA Division Cuban operations and personally debrief and exploit further exploitation.	RATING LETTER S
SPECIFIC DUTY NO. 6	RATING LETTER C

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

FORM 45 9-73

CLASSIFICATION

12. IMPROVE CL BY [signature]

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 to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, 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 a very short time, Mr. Flores has become an important factor in LA/COG's efforts to directly handle Cuban [redacted] and to expand its recruitment program. His fluent Spanish, past operational experience, versatility and ability to [redacted] in most Latin American countries, make him highly qualified for his present assignment. He demonstrates sound operational judgment under often trying conditions, and good ability to communicate effectively both orally and in writing. His frequent TDYs demand long and unusual hours, which he gives ungrudgingly.

Almost immediately after his assignment to LA/COG in March 1974, Mr. Flores was called upon to handle a sensitive [redacted] case. The agent had already been recruited and many of the developmental aspects of the case had been resolved prior to Mr. Flores' introduction, but it still required a Headquarters based case officer to provide the necessary continuity wherever the agent [redacted]. The case is complicated and time-consuming, involving extended TDYs and utmost adherence to good tradecraft procedures. It has developed into one of our most productive sources of [redacted].

SECTION E

CERTIFICATION AND COMMENTS

(cont'd)

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

16 NOV 1974

OFFICIAL TITLE OF SUPERVISOR

LA/COG/OPS

TYPED OR PRINTED NAME AND SIGNATURE

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

DATE

6 Oct 1974

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the rating officer's comments and performance evaluation. Soon after his arrival at LA/COG, Mr. Flores took over the handling of a sensitive agent. While the agent's bona fides had already been established and his modus operandi determined, considerable ad hoc judgement and direction were required to continue the agent's motivation and ensure his viability. Mr. Flores did extremely well in his guidance of the agent in a series of complicated, extended meetings which took place in [redacted]. Good, professional tradecraft and sound judgement were exhibited by Mr. Flores.

As to his support of LA Station efforts against the Cuban target,

DATE

16 NOV 74

OFFICIAL TITLE OF REVIEWING OFFICIAL

DC/LA/COG

TYPED OR PRINTED NAME AND SIGNATURE

(cont'd)

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

DATE

6 Nov 1974

SIGNATURE OF EMPLOYEE

CLASSIFICATION

FITNESS REPORT - Daniel Flores

SECTION D (CONTINUED)

activities in Latin America, due largely to Mr. Flores' professionalism.

Mr. Flores' current assignment is a combination of operational and Headquarters desk responsibilities, the latter calling for the support of field stations in their efforts to develop individual Cuban recruitment programs. His extended TDYs have understandably prevented Mr. Flores from devoting much time to his desk responsibilities and it is somewhat difficult to judge his performance as a desk officer. He has a good grasp of what needs to be done, and his handling of specific tasks indicates good managerial potential. Nevertheless, he does need additional desk experience, especially in areas which will allow him to use his operational ability to support and guide field stations that are developing Cuban operational programs.

COMMENTS BY REVIEWING OFFICIAL (CONTINUED)

this aspect of his performance was less noteworthy, and it is believed more attention and research could have been given to this activity. Mr. Flores writes concisely and well, and his CI/CE instincts are sharp and true. He can be expected to turn in a solid desk performance in the future.

CONFIDENTIAL

FITNESS REPORT	NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.
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SECTION A. GENERAL INFORMATION

1. EMPLOYEE NUMBER 194737	2. NAME (last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/Br 3	9. CURRENT STATION		
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30-MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> REASSIGNMENT		<input type="checkbox"/> SPECIAL
12. REPORTING PERIOD (From to) 31 May 73-4 March 74				13. DATE REPORT DUE IN O.P.	

SECTION B. PERFORMANCE EVALUATION

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.

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 - Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

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 Station officer responsible for operations against the MPCHEEK target	RATING LETTER S
SPECIFIC DUTY NO. 2 Direction of and support for an [redacted] and the [redacted]	RATING LETTER S
SPECIFIC DUTY NO. 3 Case officer responsible for a [redacted] team	RATING LETTER S
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 as an individual in his current position and as performer of specific duties. Consider his job accomplishments, potential for growth or future, and particular limitations or talents. Based on your knowledge of employee as a whole and performance during the rating period, place the letter in the rating box corresponding to the statement which most closely reflects his level of performance.

RATING LETTER
S

43N

CONFIDENTIAL

4578

OFFICE OF PERSONNEL
CONFIDENTIAL

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position from proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. 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.

Subject's tour in [redacted] has been cut short by the serious illness of his daughter. As a result of this illness it was also necessary for him to spend the months of December and January on emergency leave in the United States, returning without his family in February in order to transfer his ops workload and pack out his personal effects for PCS transfer to Headquarters on 4 March.

Although the undersigned had the privilege of working with Subject only briefly, as rating officer he had the advantage of taking over handling of most of Subject's cases following the departure on emergency leave. Thus he was able to observe first hand and in detail the human material with which Subject had worked, the progress he had made in developing their access and capabilities, and the respect these agents had for him.

During the period covered by this report, Subject continued his pursuit of the MPCHEEK target as his primary operational responsibility. He developed and recruited a [redacted] of the [redacted] MPCHEEK [redacted] to the MPCHEEK [redacted] and handled [redacted]. He also handled a [redacted] and the Station's [redacted] via a [redacted] who in turn handled [redacted].

(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
4 Mar 74	/s/ Daniel Flores

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
4 Mar 74	DCOS	/s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

As the rater makes clear, Subject will be missed in [redacted] and we can only sympathize with the reasons why he must now leave. He was doing the Station a great deal of good and advancing his own career nicely as well. It is worth recalling that Subject provided here in [redacted] over what we understand is still a unique operational feat, a [redacted] to an MPCHEEK [redacted]. Also, Subject was often used on a variety of operational tasks having little to do with his assigned targets because, in the

(Continued)

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
4 Mar 74	COS	/s/ Richard S. Welch

CONFIDENTIAL

Continuation of Narrative Comments

In carrying this heavy workload, Subject demonstrated that he is a superior agent handler. He succeeded in conveying to these people a sense of mission and participation which has kept their morale and motivation, and hence their production, at a high level. He also insisted upon work and security discipline, with a result that the record of these agents in prompt and reliable appearance for meetings and in responding in writing to requirements is extraordinarily good. They all have a clear idea of what is expected of them, confidence that performance will be rewarded and conversely that non-performance will not be tolerated. Just prior to his departure, Subject successfully terminated an entire [redacted] of long standing, a measure which was decided upon simply because the [redacted] had been [redacted] [redacted] and from a security standpoint replacement seemed to be in order. Letting old agents go is always a delicate and usually a thankless task. It takes finesse and bargaining skill. Subject showed these and more in divesting us of the team without a hitch.

During his last month in [redacted] despite the fact that he was burdened with the problems of closing out his household and the normal operational and administrative cleanup prior to PCS departure, Subject made two very significant contributions to Station objectives. First, he coordinated with the [redacted] the official but necessarily [redacted] visit of a senior BKHERALD officer. Since the Station is [redacted] Subject had to maintain his [redacted] throughout, further complicating this delicate assignment. During the visit, he coordinated frequently with the head of the [redacted] and with the chief administrative aide of the [redacted]. He also participated directly in one meeting with the [redacted]. This was of course not the type of assignment which would normally be entrusted to a "junior officer", but Subject is junior only in relative grade, certainly not in maturity, self-assurance or judgment. Then with only three days left in [redacted] Subject led an [redacted] which entered a building recently purchased by the MPCHEEKs, remained for [redacted] and made two apparently excellent [redacted].

The Station will miss Subject a great deal. As the above incidents demonstrate, when the tough or sensitive assignments came up, he was the officer we turned to most frequently. He never balks, argues inconvenience, or seeks the way out. He is cooperative, helpful, and in a low-key way is always effective. We hope he will not object to the term "old reliable" -- he has been that in [redacted] and more.

SECRET

S E C R E T

Continuation of Comments of Reviewing Officer

first instance he was bilingual and could fade into the [] background. But he would not have been so regarded if he had not shown ample good sense, zeal, and balanced judgment in unfamiliar situations. We hope Subject can get overseas again within a reasonable time and consider that the Station that gets him will be fortunate.

SECRET

SECRET

CONFIDENTIAL

FITNESS REPORT		NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A GENERAL INFORMATION					
1. EMPLOYEE NUMBER 036130		2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH 4 Aug 35	4. SEX M
		5. GRADE GS11	6. SD D		
7. OFFICIAL POSITION TITLE Operations Officer			8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/3	9. CURRENT STATION []	
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30 MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL*	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to) 1 July 1972-31 May 73		13. DATE REPORT DUE IN O.P. []
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 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 Station officer responsible for operations against the MPCHEEK target.					RATING LETTER S
SPECIFIC DUTY NO. 2 Handler for sensitive []					RATING LETTER O
SPECIFIC DUTY NO. 3 Supervise principal agent					RATING LETTER S
SPECIFIC DUTY NO. 4 Miscellaneous operational support activity, including direction of a [] team.					RATING LETTER S
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, give the letter in the rating box corresponding to the statement which most accurately reflects the level of performance.					RATING LETTER S

7103
11-9

CONFIDENTIAL

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B by providing background 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.

Following realignment of Station officer assignments last year, Subject was given the responsibility for operations against the MPCHEEK "hard target". He also assumed additional tasks in more traditional areas, such as coverage of the [redacted] of the [redacted] and [redacted]. The breadth of these operational commitments attests Subject's professional ability and versatility. (This would be a senior case officer's load by any description and Subject's performance at it was the reason behind our recommendation for accelerated promotion last year.)

Particularly against the difficult MPCHEEK target, this officer has displayed admirable determination despite the inherent frustrations and disappointments of working against this remote and suspicious group. During the period under review, his job has been the more difficult since the MPCHEEKs, in all probability [redacted] Station [redacted] (in which Subject played a major role), have withdrawn into a defensive shell which makes access operations verge on the impossible. Nevertheless, he has continued to probe their defenses, and has managed to develop [redacted] leads which, with the exercise of patience and application of his proven operational resources, could eventually [redacted] to the [redacted] MPCHEEK Mission here. This officer refuses to become discouraged, a quality officers working on hard targets must have.

Special mention is made of Subject's successful bid to make recontact and establish regular meetings with a [redacted]. The agent had broken contact with his former handler in the belief that such action was dictated by his security situation. Our choice of Subject to attempt to recontact this asset was dictated by his experience in dealing with skittish [redacted] and our belief that Subject could bring it off with tact, reading the situation. /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
28 June 1973	/s/ Daniel Flores

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
20	

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
28 June 1973	Deputy Chief of Station	/s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

As described, this officer is a steady and solid performer who carries a major case load securely, productively, and without complaint. He has even volunteered to take on additional work when he has seen opportunities to help the Station's overall mission. Because he [redacted] he is often drafted for a1 kinds of ad hoc operational work. This is invariably well done. He is operationally aggressive but also shows lively awareness of the tricky operational climate here and does not push beyond what the traffic will bear. His agents respect his seriousness, which permits him to get more utility out of them. He is a pillar of this Station.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
2 July 1973	Chief of Station	/s/ Richard S. Welch

CONFIDENTIAL

Section C continued.....

as it developed, and make appropriate on-the-spot adjustments to control the asset's reactions. All this had to be accomplished with great regard to security because of the [redacted] Subject's performance has been effective and, given the operation's importance, can really be called outstanding. The agent is again a prime source on the [redacted] which is crucial to developments locally.

Further, this officer continues to manage an [redacted] agent who in turn [redacted] and [redacted] so directing these efforts that they contribute effectively to overall Station objectives. More recently, Subject has taken over the [redacted] of a new [redacted] targetted against a [redacted] and is carrying it through successfully. This officer also handles much of the support requirements for his various operations, including management of [redacted] overseeing a small [redacted] and acquisition of rental cars and property [redacted] There is little doubt that some of Subject's success can be attributed to his Latin background and fluent Spanish. But both of these advantages might be wasted by a less capable all-round officer. In his case, they provide him with complementary skills that enhance his superior performance. In the view of the reporting officer, Subject carries more than his own share here in [redacted] in a manner normally calling for an officer of considerably more senior grade and experience.

CONFIDENTIAL

SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						036130	
SECTION A - GENERAL							
1. NAME (Last) Flores (First) Daniel (Middle)			2. DATE OF BIRTH 4 Aug 1935	3. SEX M	4. GRADE GS-11	5. SD D	
6. OFFICIAL POSITION TITLE Ops Officer				7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/3		8. CURRENT STATION	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER		<input type="checkbox"/> RESERVE		<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 August 1972				12. REPORTING PERIOD (From - to) 24 September 1971 - 30 June 1972			
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							
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 Direction of and administrative support for [redacted] principal agents whose efforts he directs [redacted] and [redacted]						RATING LETTER S	
SPECIFIC DUTY NO. 2 Coordinator of all Station operations against the [redacted] including management of the project covering this activity.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Case officer in charge of the Station's [redacted]						RATING LETTER P	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> EXEMPT FROM RECENT DECLASSIFICATION OF E.O. 11652, EXECUTIVE ORDER 11652 (1) AUG 1972 IMPDET (Various Departments, Insert Code or SFA) </div>							
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	

GROUP 1
Excluded from automatic
downgrading and
declassification

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 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.</p>			
<p>In the period of this report, Subject established himself and his family at this post and undertook the direction of the Station's operations against the [redacted] which had formerly been handled by an officer two grades senior to Subject. He has proved equal to the task. He learned his new assignment rapidly and adapted well to the handling of his cases through [redacted] agents, a security requirement of the [redacted] which can be frustrating for an aggressive officer with fluent Spanish such as Subject. However, he has shown maturity and superior handling ability in directing his assets against the [redacted] and particularly the [redacted]. His intimate knowledge of the [redacted] enabled him to plan secure contact with a [redacted] who at first appeared genuine. After thoroughly debriefing this individual, drawing upon his knowledge of the [redacted] Subject was able to recommend no continuing contact with him due to specific fabrications on the part of the [redacted].</p> <p>He is careful in management of funds entrusted to him for his operations and provides required administrative and operational reports in a timely manner. There have been past comments on Subject's weakness in writing. He has worked hard on this, and the rating officer feels that he is now competently producing the reports required. Subject understands that this is an area that requires continuing attention for a growing professional.</p> <p style="text-align: center;">/CONTINUED/</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
15 August 1972	/s/ Daniel Flores		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
10			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
15 August 1972	Deputy Chief of Station	/s/ [redacted]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Subject has come up the hard way, both in pushing on to finish his education and in BKTRUST. As a result he is way under-graded for his maturity and for his operational contributions. That we have given Subject a major responsibility here (STPAGODA) attests to how much confidence we have in him and his ability. He is, of course, bi-lingual and mixes well with [redacted] an advantage he uses well. A good "street" operator, he still has a way to go in organizing his paper work and in relating to HQ needs.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
15 August 1972	Chief of Station	/s/ Richard S. Welch	

SECRET

SECTION C continued.....

A comment must be made on Subject's great ability to adjust rapidly to one-time and target of opportunity assignments. His performance in meeting with [] high level agents of [] who had to be met during stays in [] and his on-site assistance in an [] against a priority target have been of the highest order. No doubt his fluent Spanish greatly assisted him in these tasks, but his experience and good judgment were major factors in his excellent performance in the role of utility operations officer.

To exploit Subject's talents to the fullest, and provide him with the professional challenge equal to his ability, he has now been assigned the management and handling of the difficult [] a top priority for the Station. This is a true measure of our confidence in him.

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036139	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
Flores, Daniel			08/04/35	M	GS-10 D
6. OFFICIAL POSITION TITLE			7. OFFICER OF ASSIGNMENT		8. CURRENT STATION
Ops Officer			DDP/WH/3		Hqs
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
31 October 1971			1 May 1971 - 30 September 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 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					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
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

SECRET

SECTION C

NARRATIVE COMMENTS

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

AUG 17 2 17 PM '71
Mr. Daniel Flores completed his first tour in [redacted] and departed the field on 28 May 1971. Following home leave, Mr. Flores returned to Headquarters in August for approximately two months training prior to his next assignment to [redacted]. This training included Weapons Familiarization and Defensive Driving, CA, [redacted] Communist Party, TSD briefings, and on-the-desk Reports Writing Familiarization.

Since Mr. Flores has been on leave or training status for most of this reporting period, no meaningful rating can be given.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	employee in training	
DATE	OFFICIAL TITLE OF SUPERVISOR	TURE
16 August 1971	WH/Personnel Officer	
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. SSN	
Flores, Daniel		4 Aug 1935		M	GS-10	D	
6. OFFICIAL POSITION TITLE				7. OFF. OR. BR. OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/WH/3			
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 October 1970/30 April 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 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							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Case Officer responsible for a Base project targetted against the						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Case Officer responsible for a sensitive technical operation including the selection of intelligence resulting from the operation.						O	
SPECIFIC DUTY NO. 3						RATING LETTER	
Development of new agent assets.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Preparation of dispatches, intelligence reports and other correspondence pertinent to his area of responsibility.						P	
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	

SECRET

SECTION C

NARRATIVE COMMENTS

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

There has been little ~~change~~ ^{change} Subject's performance since the submission of his last report covering the period through 30 September 1970.

The highpoint of his activities during this period, as it has been throughout his tour, has been his management of a sensitive technical operation which has been a consistent producer of unique and high level intelligence. This has been a good performance on Subject's part indicative of his professional capability to conduct clandestine operations.

Subject's writing ability has improved during this period, and there is little doubt that his efforts in this regard are paying off. Further experience should see continued improvement of his writing skills.

As Subject's first tour comes to a close he can look back on a generally strong performance in all phases of his operational activity on behalf of the Base's objectives.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE: 3 May 1971
SIGNATURE OF EMPLOYEE: /s/ Daniel Flores

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 20
IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE: 3 May 1971
OFFICIAL TITLE OF SUPERVISOR: COB, []
TYPED OR PRINTED NAME AND SIGNATURE: /s/ []

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL
I concur in the ratings and remarks of the supervisor. During his first tour abroad, Subject has done very well in his main fields of activity. His outstanding attribute at the moment is his persistence not only in going after operational targets but also in improving himself. He has encountered some difficulty in presenting his ideas in written form but he has faced up to this problem and, as the rating officer notes, has made significant improvement.

(Continued)

DATE: 17 May 71
OFFICIAL TITLE OF REVIEWING OFFICIAL: COS, Quito
TYPED OR PRINTED NAME AND SIGNATURE: /s/ []

SECRET

SECRET

Continuation of Comments by Reviewing Official

Subject has a clear-headed approach to the collection of intelligence and is realistic in evaluating potential sources. His fluency in the Spanish language has facilitated his movement in the local community and he has developed several potentially useful sources and identified others.

In considering this officer for promotion, two facts should be kept in mind:

- a. He is probably older and certainly more mature than the average officer at his grade level. He is anxious to get ahead and this explains much of his initiative and drive.
- b. The rating officer has rated him very realistically which, in my view, adds to the importance of the outstanding rating given him on Specific Duty No. 2.

SECRET

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

TRAINING REPORT

Weapons Training/Defensive Driving Course No. 1/72

2-6 August 1971

Date

TRAINEE: FLORES, Daniel

OFFICE: WH

PURPOSE AND SCOPE OF COURSE:

The course provides basic proficiency training in the use of weapons for self-defense and in the techniques of defensive driving to counter vehicular kidnaping for Agency officers being assigned to hostile or unstable political and operational environments abroad.

ACHIEVEMENT RECORD:

This is to certify that Mr. Flores has satisfactorily completed the prescribed course of instruction.

FOR THE DIRECTOR OF TRAINING:



Chief, Special Activities Branch

9 August 1971

Date

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

SECRET

Continuation of Narrative Comments

the target is good. The project is, however, in need of good human reporting assets and it is expected that as Subject overcomes a weakness mentioned in the next paragraph he will be able to devote more of his time to this important task.

The Subject has encountered some difficulty in the preparation of written material -- dispatches, intelligence reports -- and finds it necessary to spend an extended portion of his time on its preparation. The rater has discussed this with Subject on several occasions, and it is believed that his difficulty is due to a lack of experience, and that in time and with a continuing effort on his part he will develop his writing skills.

The Subject's overall attitude and response towards his professional responsibilities during the first tour have been positive. He is interested in the kind of work he is doing, likes it and is willing to put in the kind of long hours it sometimes demands without complaint.

Continuation of Comments of Reviewing Official

of the Base. He responds positively to guidance and direction; he is eager for new opportunities to enlarge his experience and knowledge. He appears to be completely motivated toward the work of this organization; it is a pleasure to have him in

SECRET

Approved by (S) (M) (RM)

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.

The period covered by this report encompasses the middle portion of the Subject's first tour as a Case Officer. His performance during this period has been balanced in that he has shown the kind of intelligence and maturity necessary to successfully carry out clandestine operational activity. He has also shown a weakness which he will need to overcome in order to achieve his full operating potential.

The Subject has turned in fine performance in the overall management of a very important and sensitive [redacted] operation which has been under his care since the pre-installation phase. His sure and careful handling of all succeeding phases of this operation led to a secure, uncomplicated installation, the recruitment and training of support agents, and the dissemination of valuable intelligence information. Subject's natural fluency in the Spanish language has been especially useful in this operation. His handling of this installation has been of a high professional caliber throughout.

The Subject is also responsible for the management of a project targeted against the [redacted]. His handling of this project has been good: he is a good agent handler; knows how to target his assets against objectives of most importance; and, his knowledge of (Continued)

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: 30 Oct. 1970 SIGNATURE OF EMPLOYEE: /s/ Daniel Flores

2. BY SUPERVISOR

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

DATE: 30 Oct. 1970 OFFICIAL TITLE OF SUPERVISOR: TYPED OR PRINTED NAME AND SIGNATURE: /s/

3. BY REVIEWING OFFICIAL

Comments of Reviewing Official: I agree with the ratings. This has been a good year for Subject, one which has given him a rather unusual opportunity to learn many facets of the work of this organization and one in which he has shown a very satisfactory level of accomplishment. Shortly after his arrival in [redacted] he became, for a short time, the Acting Chief of Base, and through that period and the ensuing change in Base Chiefs, he showed a professional maturity we felt to be exceptional for a young officer on his first tour. He has worked hard and intensely for improvement in the quantity and quality of his operational production, and he has collaborated very effectively with the other officers (Continued)

DATE: 30 Oct. 1970 SIGNATURE OF REVIEWING OFFICIAL: [redacted]

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER
						036130
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SS	
Flores, Daniel		4 Aug 1935	M	GS-10	D	
6. OFFICIAL POSITION TITLE			7. OFFICE/DIR OF ASSIGNMENT	8. CURRENT STATION		
Ops Officer			DDP/WH/Branch 3	[Redacted]		
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
<input type="checkbox"/>	CAREER-PROVISIONAL (See instructions - Section C)			<input checked="" type="checkbox"/>	ANNUAL	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify)			<input type="checkbox"/>	SPECIAL (Specify)	
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)		
				1 October 1969 - 30 September 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						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1						RATING LETTER
Case Officer responsible for Base project targeted against the [Redacted]						S
SPECIFIC DUTY NO. 2						RATING LETTER
Case Officer responsible for a sensitive [Redacted] operation including the selection of the intelligence resulting from the operation						S
SPECIFIC DUTY NO. 3						RATING LETTER
The development of new agent assets and operations						P
SPECIFIC DUTY NO. 4						RATING LETTER
Preparation of dispatches, intelligence reports and other correspondence pertinent to the operation in his area of responsibility						P
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, cooperation, personal habits, and physical limitations or talents. Based on your knowledge of employee's overall performance during the rating period place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						S

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SECRET

Section C

Narrative Comments, Cont'd

disciplined, effective manner enabling him to maintain a continuity and productivity within the Base operational requirements with security and dispatch.

Socially Subject and his wife are proving to be good mixers and both are gaining in popularity within the local [redacted] communities. They both have gained the respect and appreciation of the [redacted] complex not only as compatible personalities, but in her willingness to participate actively in [redacted] endeavors and his professional cooperative attitude. Their optimistic and positive conduct at official and non-official functions is a credit to the Base.

Subject's native fluency in Spanish and his Latin background is proving to be a definite asset in the performance of his assigned operational tasks and ability to handle agent assets amicably and productively.

He maintains accurate accounting records and is demonstrating responsible acute cost consciousness in the use of funds and properties.

This rater's principal criticism of this employee is his tendency toward impulsiveness and too-quick judgement before weighing all the facts and implications in the pursuit of his operational requirements; however, this weakness is more a function of his inexperience in the field and will be resolved as he gains more field experience.

Subject, although exhibiting resourcefulness and imagination in performing his assigned operational tasks also has a tendency to accept the judgement of other senior grade officers too readily rather than express his own convictions and trust in his own assessment of a situation.

This rater has counseled this Officer regarding these tendencies and he is taking measures to rectify them.

In judging his over all performance, this Rater is of the opinion if he continues to apply himself in handling tasks worthy of a senior grade officer, he should be considered for a promotion to the GS-10 level at the earliest opportunity.

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SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
				036130		
SECTION A GENERAL						
1. NAME (Last) (First) (Middle) Florch, Daniel			2. DATE OF BIRTH 8-11-35	3. SEX M	4. GRADE (77-15)	5. SD D
6. OFFICIAL POSITION TITLE Opf Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/WII/Br 3		8. CURRENT STATION	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> %	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 13 May 1969 - 30 September 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						
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 Case Officer responsible for handling Base operations and assets targetted against hard- and soft-line communist activities in the [] of [] DE 42					RATING LETTER S	
SPECIFIC DUTY NO. 2 Case Officer responsible for the handling of [] sensitive DE 61 [] operations. He is also responsible for the translations, processing, and dissemination of the relevant intelligence info.					RATING LETTER S	
SPECIFIC DUTY NO. 3 Case Officer of [] assets targetted against the [] [] within [] groups. DE 63					RATING LETTER P	
SPECIFIC DUTY NO. 4 Development of new contacts and operations, including following up operational leads and recruitment pitches. DE 15					RATING LETTER P	
SPECIFIC DUTY NO. 5 Case Officer responsible for writing his own intelligence disseminations prepared from information obtained from his agent assets. DE 16					RATING LETTER P	
SPECIFIC DUTY NO. 6 Drafts operational correspondence, Project Renewals, and Progress Reports. DE 17					RATING LETTER S	
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 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.

OCT 28 10 40 AM '69

This employee, a GS-09, arrived PCS at the [redacted] Base on 13 May 1969 and has been under this Rater's supervision during this four and one-half month period. [redacted] is his first overseas assignment with this Agency.

During this short reviewing period, this Officer has demonstrated a marked insight and knowledgeableness of the operations he has been assigned, and has provided a number of good ideas and suggestions for the betterment of these operations. Subject is proving to be a hard worker and has not complained of the many extra hours he has devoted to his operations. He has accepted responsibilities without hesitation and is not afraid to take on difficult tasks using initiative and ingenuity in their completion. This latter quality has been amply demonstrated when the Rater was unexpectedly confined to a hospital in the [redacted] for the full month of August 1969, leaving this employee solely responsible for the Base as the only inside Case Officer at the Base during this time. Rater's absence corresponded with a change in Case Officer PCS assignments at the Base, which left the Base temporarily depleted of Officers. During this period, Subject exhibited an ability and maturity expected of an officer of higher grade and greater field experience. He organized his increased workload in a

...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

2 October 1969

/s/ Daniel Flores

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

2 October 1969

Chief of Base

/s/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

This Officer has made a most impressive beginning in [redacted] He has in a few short months adapted to new tasks and a new environment with mature, if modest, assurance and a professional approach which speaks highly for the training and experience he has had. He has taken on, in the absence of the Chief of Base and other senior officers, responsibilities uncommon to an officer of his junior position, and he has handled them in a superior fashion. He and his wife have entered into their representational responsibilities with great enthusiasm and effectiveness, and I predict a most highly successful tour for him in [redacted] Because he has shown a personal and professional competence beyond his grade level, it is strongly recommended that he be considered for promotion to GS-10 at the earliest opportunity.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

16 October 1969

Chief of Station

/s/ [redacted]

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130 ✓	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Flores Daniel		4 Aug 1935	M	GS-08	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/RR OF ASSIGNMENT	8. CURRENT STATION	
OPH Officer			DDP/WH/4	HQS	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To)		
			19 September 1968 - 30 April 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					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Operations officer handling the Headquarters direction and support of FI projects and activities.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Preparation of operational correspondence, dispatches, cables and special memoranda.					P
SPECIFIC DUTY NO. 3					RATING LETTER
Coordination of operational matters with other components and desks.					P
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<p>13 MAY 1969 <i>[Signature]</i></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
					P

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. <u>Managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>Mr. Flores did a fine job while he was assigned to the Chile desk. He had responsibility for a variety of FI projects, including several complex and sensitive ones, which he ably handled. He had a full workload and in addition to his assigned responsibilities he was given FI assignments of every type as they arose. On one occasion he was sent on an operational trip to [redacted] where he was to contact, assess and support a target personality. Owing to circumstances beyond his control nothing went as expected but Mr. Flores, acting alone, improvised and adapted to the situation. This is indicative of the initiative and eagerness he displayed in his desk work. He was willing to learn and he accepted guidance and instruction to the letter. In addition Mr. Flores writes well and this is always an asset.</p> <p>Mr. Flores is fluent in Spanish. It is my impression that if there is one thing that Mr. Flores wants to be that is a field case officer. He is now getting that chance. He will soon leave on an assignment to [redacted]. I have no doubt that he will do very well.</p> <p>Mr. Flores did not have any managerial duties.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE April 28, 1969	SIGNATURE OF EMPLOYEE <i>Samuel Flores</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 5 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE 28 April 69	OFFICIAL TITLE OF SUPERVISOR C/WH/4/Chile	T	RE
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL I concur in the above assessment.			
DATE 29 April 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH/4	TYPED OR PRINTED NAME AND SIGNATURE <i>Raymond A. Warren</i> Raymond A. Warren	

SECRET

SECRET

1. NAME (LAST, FIRST, MIDDLE)	GRADE	OFFICE	REPORTING PERIOD	Employee Serial No.
FLORES, Daniel	07		30 November 1968	036130
DATE REPORT DUE		REPORTING PERIOD		
30 November 1968		17 December 1967 - 31 October 1968		

2. This course training has been assigned in course of the Integrated Program with operation training in **Clandestine Operations**.

Detailed evaluations of his performance in each phase are contained in his Official Personnel Folder. Definition of the rating letter corresponds to that in Section B, Fitness Report Form 40 (4-6-67).

OVERALL PERFORMANCE IN INTEGRATED PROGRAM **Proficient**

3. COMMENTS AND PERTINENT OBSERVATIONS.

Mr. Flores entered the CT Program on 11 December 1967, sponsored by DDP/WH Division. His work during formal training was characterized by determination, hard work, and a strong ambition to become a successful Clandestine Services operations officer. He responded well to supervision and guidance and experienced no difficulties in assimilating the principles and techniques covered by the instruction. In Operations Course Phase I, the key course for DDP case officers, he achieved an overall performance rating of HIGH PROFICIENT.

At the previous request of his Division Chief, Mr. Flores was, effective 10 October 1968, reassigned to DDP/WH Division.

27 NOV 1968
[Signature]

25 November 1968

[Signature]
 John Gerry

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				030130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
FLORES, Daniel		4 Aug 35	M	GS-05	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		
Intel Clerk			DDP/WH/COG		
			WASH., D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER		<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 February 1967-15 June 1967		
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				RATING LETTER	
Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assembles lead files, DEAS collates data on hand and additions information received in preparation for target analysis.				S	
SPECIFIC DUTY NO. 2				RATING LETTER	
Screens Cuban [redacted] for information of value in the branch counter espionage-counter intelligence records and for operational data.				S	
SPECIFIC DUTY NO. 3				RATING LETTER	
Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.				P	
SPECIFIC DUTY NO. 4				RATING LETTER	
Prepares translations from Spanish to English and English to Spanish of operational correspondence.				P	
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

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 important 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.

Mr. Flores is a part-time staff employee who works a maximum of 19 1/2 hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.

The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cases which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.

Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: June 14, 1967 SIGNATURE OF EMPLOYEE: [Signature]

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: DC/WH/COG/CICS TYPED OR PRINTED NAME AND SIGNATURE: Carl Trettin

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL:

I would rate Mr. Flores essentially the same as Mr. Trettin. I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.

DATE: OFFICIAL TITLE OF REVIEWING OFFICIAL:

CA/WH/COG/CICS

SECRET

SECRET
(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER	
			036130	
SECTION A			GENERAL	
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD	
Flores Daniel	4 Aug 35	M	GS-05 D	
6. OFFICIAL POSITION TITLE	7. OFF/DIV/RR OF ASSIGNMENT	8. CURRENT STATION		
Intel Clerk	DDP/WH/COG	WASH., D.C.		
9. CHECK (X) TYPE OF APPOINTMENT	10. CHECK (X) TYPE OF REPORT	REASSIGNMENT SUPERVISOR		
CAREER RESERVE TEMPORARY	X INITIAL ANNUAL	REASSIGNMENT EMPLOYEE		
CAREER-PROVISIONAL (See Instructions - Section C)	SPECIAL (Specify):	SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From - to)			
	1 April 66 - 31 Jan 67			
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			RATING LETTER	
Conducts liaison between two contract agents and WH/COG/CICS			P	
SPECIFIC DUTY NO. 2			RATING LETTER	
Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.			P	
SPECIFIC DUTY NO. 3			RATING LETTER	
Prepares translations from Spanish to English and from English to Spanish			S	
SPECIFIC DUTY NO. 4			RATING LETTER	
Prepares material for input for the [] Program			P	
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
				P

1 FEB 1967

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. Ability of employee to use training 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.

JAN 30 10 48 AM '67

Mr. Flores has continued to perform at the same proficient level cited in his previous fitness report. The ratings and remarks appended to this report, accordingly, still remain applicable.

MAN ROOM

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR

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

5 months

DATE OFFICIAL TITLE OF SUPERVISOR TYP

26 January 67

Chief, WH/COG/CICS

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Flores turns in a good piece of finished work and has demonstrated increasing ability as a Caso Officer. As soon as he graduates I plan to recommend him for CT training. I have discussed the matter with him and he plans to make a career with the Agency which will be mutually advantageous to him and the Agency.

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYP

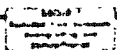
30 Jan 67

Deputy Chief, WH/COG

SECRET

(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER		
			036130		
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
FLORES, Daniel		4 Aug 35	M	GS-05	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Intelligence Asst.		DDP/WH/C		Washington D.C.	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
30 April 1966			1 April 65 - 31 March 66		
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
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			RATING LETTER		
Conducts liaison between two contract agents and WH/COG/CICS			P		
SPECIFIC DUTY NO. 2			RATING LETTER		
Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.			P		
SPECIFIC DUTY NO. 3			RATING LETTER		
Prepares translations from Spanish to English and from English to Spanish			S		
SPECIFIC DUTY NO. 4			RATING LETTER		
Prepares material for input for the [] Program			P		
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		
			P		



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of major or supervisory duties; and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If 90 PH 66

Mr. Flores is a part-time staff employee who works a minimum of nineteen hours per week; he is also a full time college student in his senior year, majoring in political science and specializing in Latin American studies. Subsequent comments should be prefaced by the statement that Mr. Flores' overall performance of his assigned duties would be considerably more efficient if he were able to devote full time to his assignment. On the other hand, Mr. Flores is preparing himself academically for a useful career with the Agency and in the rater's opinion shows promise of becoming a very capable and competent officer.

Mr. Flores is bilingual and has served very efficiently as a translator for the Branch. He has gained very valuable experience as a case officer in the handling of two contract agents of WH/COG/CICS and in doing so has demonstrated tact, sound judgment and a fine ability to handle people. Mr. Flores is very personable, intelligent and makes an excellent appearance. With the completion of his studies he should be able to make the transition from Intelligence Assistant to Junior Case Officer, which the rater heartily recommends.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE 30 November 1966 SIGNATURE OF EMPLOYEE [Signature]

2. BY SUPERVISOR

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

DATE 30 November 66 OFFICIAL TITLE OF SUPERVISOR DC/WH/COG/CICS TYPE OR PRINTED NAME AND SIGNATURE John A. Castoro

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Flores has worked closely under my direct supervision in the handling of the two contract employees listed under Specific Duty No. 1 and 2. I concur with the rating of Mr. Castoro and can only emphasize that I believe Mr. Flores will make a good Case Officer and I plan to recommend him for CT status as soon as he is able to be with us full time.

DATE 30 Nov 1966 OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH/COG/CICS

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER
SECTION A			GENERAL		
1. NAME (Last) FLORES, (First) Daniel (Middle)		2. DATE OF BIRTH 4 Aug 35	3. SEA N	4. GRADE GS-05	5. SD D
6. OFFICIAL POSITION TITLE Intel Clerk		7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/COG	8. CURRENT STATION WASH., D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section E)			<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 February 1967-15 June 1967		
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 Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assembles lead files, collates data on hand and additions information received in preparation for target analysis.					RATING LETTER S
SPECIFIC DUTY NO. 2 Screens [redacted] for information of value in the branch counter-espionage-counter intelligence records and for operational data.					RATING LETTER S
SPECIFIC DUTY NO. 3 Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.					RATING LETTER P
SPECIFIC DUTY NO. 4 Prepares translations from Spanish to English and English to Spanish of operational correspondence.					RATING LETTER P
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

SECRET

SECTION C NARRATIVE COMMENTS

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

Mr. Flores is a part-time staff employee who works a maximum of 19 1/2 hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.

The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cards which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.

Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: June 14, 1967 SIGNATURE OF EMPLOYEE: Daniel Flores

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: DC/WH/COG/CICS TYPE OR PRINTED NAME AND SIGNATURE: Carl Trettin

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

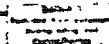
I would rate Mr. Flores essentially the same as Mr. Trettin, I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.

DATE: OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/COG/CICS

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 4 Aug 35	3. SEX M	4. GRADE GS-05	5. SD D	
6. OFFICIAL POSITION TITLE Intelligence Asst.			7. OFF/DIV/BR OF ASSIGNMENT DDP/SAS		8. CURRENT STATION Washington D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P. 30 April 1965			12. REPORTING PERIOD (From- to-) 1 January 1964 - 31 March 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		Served as interpreter for WH/SA counterintelligence operations officers and Office of Communications officers in training and briefing agents					RATING LETTER
		[redacted] DE62					S
SPECIFIC DUTY NO. 2		Assisted in the debriefing of a Cuban intelligence service defector.					RATING LETTER
		[redacted] DE32					P
SPECIFIC DUTY NO. 3		Translated and participated in the preparation of agent [redacted] and [redacted]					RATING LETTER
		[redacted] DB63					P
SPECIFIC DUTY NO. 4		Performed traces and research relating to counterintelligence operations and activities.					RATING LETTER
		[redacted] DC30					S
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							S
13 APR 1965							



SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

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

Mr. Flores was a particularly useful and versatile employee in the WH/SA counterintelligence operations unit. Although he had no operational training or previous operational experience, he learned rapidly and performed well the operational support type duties assigned to him. His fluent knowledge of the Spanish language, his willingness to learn and perform tedious tasks, and his conscientious approach to his work were important factors in his performance. His previous assignments in the RI Division and in WH/SA as a translator and in conducting name traces gave him a good background.

With respect to specific duty #3, on two separate operations in [redacted] Mr. Flores participated in the training and preparation of agents for [redacted]. In the first operation he interpreted for training in [redacted] and related subjects. The second operation involved [redacted] only. This experience enable Mr. Flores to perform duties (specific duty #3.) relating to communications with agents [redacted]

Mr. Flores plans to continue his university education and attain a degree. Arrangements have been completed so that he may work in the Agency on a part time basis beginning in January 1965. He will attend classes at a local university as a full time student.

Mr. Flores was promoted from GS-04 to GS-05 on 16 March 1964. He has been performing duties at the GS-06 level, and he should be promoted.

(see page two)

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: 6 April 1965 SIGNATURE OF EMPLOYEE: [Signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 15 months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE: 6 April 1965 OFFICIAL TITLE OF SUPERVISOR: C/WH/SA/CI Ops (WH/C/RR/OS)

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur.

DATE: 4.2.65 OFFICIAL TITLE OF REVIEWING OFFICIAL: C. WH SA CI (WH C SP)

SECRET

SECRET

- 2 -

Mr. Flores is cost conscious and effective in the use of space, equipment and funds.

Mr. Flores does not hold a supervisory position.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130																
SECTION A GENERAL																				
1. NAME (Last) (First) (Middle) FLORES Daniel			2. DATE OF BIRTH 4 Aug. 1935	3. SEX Male	4. GRADE 5. SO GS-4 D															
6. OFFICIAL POSITION TITLE Translator			7. OFF. DIV./RR OF ASSIGNMENT DDP/S.A.S.	8. CURRENT STATION Washington, D.C.																
9. CHECK (X) TYPE OF APPOINTMENT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> CAREER</td> <td><input type="checkbox"/> RESERVE</td> <td><input type="checkbox"/> TEMPORARY</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)</td> </tr> <tr> <td colspan="3"><input checked="" type="checkbox"/> SPECIAL (Specify):</td> </tr> </table>			<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> SPECIAL (Specify):			10. CHECK (X) TYPE OF REPORT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> INITIAL</td> <td><input type="checkbox"/> REASSIGNMENT SUPERVISOR</td> </tr> <tr> <td><input type="checkbox"/> ANNUAL</td> <td><input type="checkbox"/> REASSIGNMENT EMPLOYEE</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> SPECIAL (Specify): Promotion Recommendation</td> </tr> </table>			<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	<input checked="" type="checkbox"/> SPECIAL (Specify): Promotion Recommendation	
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY																		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)																				
<input checked="" type="checkbox"/> SPECIAL (Specify):																				
<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR																			
<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE																			
<input checked="" type="checkbox"/> SPECIAL (Specify): Promotion Recommendation																				
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 10 June 1963 to 6 December 1963																	
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 Translates material from Spanish to English and vice-versa. Translates agent messages.					RATING LETTER S															
SPECIFIC DUTY NO. 2 Performs name traces, analyses, extracts and summarizes obtained information.					RATING LETTER P															
SPECIFIC DUTY NO. 3 Prepares and initiates requests for operational clearances.					RATING LETTER P															
SPECIFIC DUTY NO. 4 Writes and prepares dispatches, cables and memoranda.					RATING LETTER A															
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 pertinent limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P															
30 DEC 1963																				

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

Mr. Flores entered on duty with Special Affairs Staff in June 1963. Due to his proficiency in Spanish he was assigned to translating duties and immediately proved to be an invaluable asset to this office as well as to the Staff as a whole. He worked many late hours and weekends helping to facilitate the flow of translations from this office to the different components within SAS. His performance of these duties can best be characterized as "exceptional" in all degrees.

Mr. Flores expressed a desire to move into a position of greater responsibility and this request was readily granted approximately one month ago. He is currently being trained as an intelligence assistant in Ops Support functions and his performance to date has been excellent. In his new duties Mr. Flores requires very little supervision. This can be attributed in part to his degree of intelligence as well as the background he obtained for his present duties while assigned to his previous job in RID/INDEX. Mr. Flores spent approximately one year in his former job and the knowledge he brought with him resulting to name tracing procedures has enabled him to grasp the duties of his new position quite rapidly.

As a means of furthering his education Mr. Flores is attending American University at night. He has expressed a desire to obtain some agency training and would like very much to be enrolled in the Intelligence Orientation Course as soon as possible.

Mr. Flores entered the agency as a GS-4 in March 1962. It is strongly recommended that he be promoted at the earliest possible date to a GS-5.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE 17 Dec 1963 SIGNATURE OF EMPLOYEE Daniel Flores

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 8 Months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE 17 Dec 1963 OFFICIAL TITLE OF SUPERVISOR CHIEF, SAS/ICS TYPED OR PRINTED NAME AND SIGNATURE

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the assessment of the supervisor, concur in his decision to move Mr. Flores into a position of greater responsibility, and I support the recommendation that Mr. Flores be promoted.

Attached is a formal recommendation.

DATE 17 Dec 63 OFFICIAL TITLE OF REVIEWING OFFICIAL CHIEF, SAS/INTL

SECRET

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective 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.

APR 23 4 13 PM '63

During this reporting period, Mr. Flores continued to conduct himself in the exceptionally proficient manner which was noted in his Fitness Report. He is one of [] name tracers who specialize in a particular area, a fact which tends to increase the difficulty as well as the responsibility of name tracing. In spite of this burden, Mr. Flores has consistently maintained an above average level of production and an exceptionally high quality in his finished products.

Mr. Flores is a conscientious and highly motivated employee who evidences a sound sense of responsibility. He has frequently voiced a desire to take advantage of any career opportunities the Agency may offer to him. He is currently enrolled as a full-time student at the American University.

SECTION D

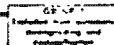
CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 10 April 1963	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 10 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 10 April, 1963	OFFICIAL TITLE OF SUPERVISOR Deputy Chief, RID/EL (U/S)	TY
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE 14 May 1963	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, RID/EL	TYPE OR PRINTED NAME AND SIGNATURE

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					036130	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 14 Aug 1935	3. SEX M	4. GRADE GS-4	5. SD D
6. OFFICIAL POSITION TITLE File Clerk			7. OFF/DIV/BR OF ASSIGNMENT OPGER/RII/RB		8. CURRENT STATION Idgra.	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> INITIAL			REASSIGNMENT SUPERVISOR
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL			REASSIGNMENT EMPLOYER
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 12 January 1963			12. REPORTING PERIOD (From - to) 12 March 1962 - 12 December 1962			
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 Performs name traces of personal and impersonal subjects in the RI/Index.						RATING LETTER S
SPECIFIC DUTY NO. 2 Fulfills daily and weekly requirements of maintenance duties; e.g., filing, purging, auditing, and screening of index cards.						RATING LETTER P
SPECIFIC DUTY NO. 3						RATING LETTER
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 P



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

From the outset Mr. Flores has shown many characteristics of an above-average employee. His initial training in the intricacies of his duty assignment was marked by a high degree of application, interest, and achievement. Since that time Mr. Flores has proven himself a conscientious and responsible employee, one whose work record is distinguished by a high calibre of quality and quantity.

Because of his fine record, Mr. Flores was chosen one of the three area specialists for this section. He specializes in the area and his work is characterized by exceptional proficiency.

At present Mr. Flores is registered at American University as a sophomore. Inasmuch as he has exhibited both potentiality and strong working habits, I recommend that Mr. Flores be given the Professional Battery Test at the earliest opportunity.

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 January 1963	<i>Samuel Flores</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
7 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYP	E
3 January 1963	Deputy Chief, RID/IN (R/S)		
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
I fully concur in the above evaluation.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED	C
3 January 1963	Chief, RID/Index		

SECRET

SECRET

(When Filled In)

TRAINING EVALUATION--CLERICAL INDUCTION					
SECTION I IDENTIFYING INFORMATION					
NAME OF STUDENT FLORES, Daniel		SEX M	DATES OF ATTENDANCE 19-23 March 1962		
DATE OF BIRTH 4 August 1935		FOB DATE 12 March 1962	TITLE AND GRADE File Clerk GS-4		
SECTION II CHARACTERISTICS OF THE COURSE					
Each course subject is taught daily for a 5-day period. Students who do not meet Agency standards in shorthand and/or typewriting within this 3-day period receive further instruction in an attempt to meet the established qualifications. The second week of geography instruction is given to students who have not been assigned to their positions. It is possible that not all students will be assigned to every course subject.					
SECTION III OBJECTIVES					
To meet the typewriting criterion based on the scale on the reverse of this page. (For qualification, students must meet this requirement once.) To take dictation at 80 words a minute for 3 minutes and to transcribe with 5 or fewer errors in not more than 20 minutes. (For qualification, students must meet this requirement once.) To recognize errors in grammar and in punctuation and capitalization. To study the politics and the geography of countries of Europe and Asia. (These continents are covered in alternate weeks.) To receive instruction in typing of reproduction masters, making erasures, caring for the typewriter, and utilizing typing shortcuts. To become familiar with the system of filing as outlined in the Agency's "Handbook for Subject Filing."					
SECTION IV QUALIFICATION IN SKILLS					
COURSE PERFORMANCE				QUALIFICATION	
				QUALIFIED	
				IN COURSE	AT 100
				NOT QUALIFIED	
TYPEWRITING	WPM	ERRORS	RET		
	44	15	29		X
SHORTHAND	WPM	ERRORS	RET		
SECTION V RATINGS					
Agency samplings of students' ratings indicate the percentage distribution as noted below. This trainee's rating is marked by the asterisk.					
SUBJECT	POOR	FAIR	SATISFACTORY	EXCELLENT	
GRAMMAR	4%	16% *	51%	27%	
PUNCTUATION AND CAPITALIZATION	20% *	2%	41%	12%	
EXCELLENT - - - thorough knowledge of material presented and above-average performance in meeting course goals. SATISFACTORY - - average knowledge of material presented and adequate performance in meeting course goals. FAIR - - - - - borderline knowledge of material presented and limited performance in meeting course goals. POOR - - - - - inadequate knowledge of material presented and unsatisfactory performance in meeting course goals.					
SECTION VI FAMILIARIZATION LECTURES					
<input checked="" type="checkbox"/> GEOGRAPHY OF EUROPE	<input type="checkbox"/> GEOGRAPHY OF ASIA	<input checked="" type="checkbox"/> AGENCY FILING SYSTEM	<input checked="" type="checkbox"/> OFFICE PRACTICE		
SECTION VII COMMENTS					
<p>This student was assigned to the class in typewriting at his own request. Because it is not necessary for an individual whose job title is File Clerk to meet Agency standards in typewriting, he was released from training when his final processing was completed.</p>					
SIGNATURE OF CHIEF, CLERICAL INDUCTION TRAINING				CAUTION: COMMENTS ON REVERSE SIDE <input type="checkbox"/> YES	
FOR THE DIRECTOR OF TRAINING:					

SECRET

(When Filled In)

<u>GROSS WORDS</u>	<u>ERRORS</u>	<u>NET WORDS</u>	<u>GROSS WORDS</u>	<u>ERRORS</u>	<u>NET WORDS</u>
45	5	40	63	14	49
46	6	40	64	14	50
47	6	41	65	15	50
48	7	41	66	15	51
49	7	42	67	16	51
50	7	43	68	16	52
51	8	43	69	16	53
52	9	43	70	16	54
53	9	44	71	17	54
54	9	45	72	18	54
55	10	45	73	18	55
56	10	46	74	19	55
57	10	47	75	19	56
58	10	48	76	20	56
59	11	48	77	20	57
60	12	48	78	20	58
61	12	49	79	21	58
62	13	49	80	21	59

This scale conforms to that used by the Civil Service Commission. The number of errors indicated after the gross is the maximum permissible for that specific number of gross words typed; i.e., an individual who types 60 words per minute would be allowed no more than 12 errors in a 10-minute typewriting test.

CONFIDENTIAL
(When Filled In)

THIS INFORMATION IS FOR AUTHORIZED PERSONS ONLY TEST SCORES ARE NOT TO BE REVEALED TO EXAMINEE.

OFFICE OF TRAINING, ASSESSMENT AND EVALUATION STAFF EVALUATION OF TEST RESULTS (CLERICAL)	DATE 14 March 1962
--	-----------------------

NAME FLORES, Daniel (MEX)	GRADE AND POSITION GS-11 File Clerk	PERSONNEL OFFICER TAS
------------------------------	--	--------------------------

TEST RESULTS ARE AN INTEGRAL PART OF THE FACT FINDING PHASE OF MOST PERSONNEL OPERATIONS. EVALUATION OF THESE MEASUREMENTS IN RELATION TO OTHER FACTUAL MATERIAL IN THE PERSONNEL RECORD PROVIDES ONE OF THE BASIS FOR THE SELECTION AND PLACEMENT OF APPLICANTS AND FOR COUNSELING WITH NEW EMPLOYEES. HOWEVER, THE DECISION AS TO WHETHER AN INDIVIDUAL CAN AND WILL PERFORM THE DUTIES OF A SPECIFIC JOB MUST REST ON THE JUDGMENT OF THE RECRUITER OR PLACEMENT OFFICER, WHO CONSIDERS ALL ASPECTS OF THE INDIVIDUAL'S ABILITY, BACKGROUND, AND PERSONALITY IN RELATION TO THE REQUIREMENTS OF THE AGENCY.

THIS REPORT EVALUATES THE SUBJECT'S PERFORMANCE BY COMPARING HIS SCORES WITH THOSE OF A NATIONWIDE GROUP OF TWELFTH GRADE STUDENTS OF THE SAME SEX. SPECIFIC APTITUDES ARE IDENTIFIED BY USING A VARIETY OF TESTS RANGING FROM WORK SAMPLES OF FILING AND CHECKING TO MEASURES OF REASONING ABILITY. IN EVALUATING THESE TEST SCORES FOUR GENERAL CONCEPTS SHOULD BE KEPT IN MIND: (1) TESTS ARE MORE EFFECTIVE IN SCREENING OUT POTENTIAL FAILURES THAN IN IDENTIFYING THOSE WHO WILL PERFORM SUCCESSFULLY. (2) PERSONS WHOSE SCORES ARE PREDOMINANTLY IN THE LOWEST 16% ORDINARILY ARE NOT SUITED FOR OFFICE WORK. (3) MOST JOBS DO NOT REQUIRE HIGH SCORES ON ALL TESTS, BUT HAVE A RANGE WITHIN WHICH PEOPLE CAN DO THE WORK EFFECTIVELY AND TEND TO REMAIN ON THE JOB. (4) EFFICIENCY IN PLACEMENT NECESSITATES MATCHING THE JOB AND THE INDIVIDUAL; BOTH THOSE WHO ARE OVERQUALIFIED AND THOSE WHO ARE UNDERQUALIFIED ARE LIKELY TO QUIT.

A DESCRIPTION OF THE SIX TESTS IN THE BATTERY IS GIVEN ON THE BACK OF THIS FORM. IN CASES WHERE THE PATTERN OF THE TEST SCORES APPEARS TO INDICATE APTITUDE IN PARTICULAR AREAS THIS WILL BE NOTED IN THE REMARKS SECTION. WHERE RESEARCH STUDIES HAVE BEEN CONDUCTED ON THE RELATIONSHIP OF THE TESTS TO JOB PERFORMANCE THESE COMMENTS WILL RELATE TO SPECIFIC JOBS. THIS SECTION MAY ALSO INCLUDE A BRIEF ANALYSIS OF THE INDIVIDUAL'S POTENTIAL IN RELATION TO HIS INTERESTS AND BACKGROUND.

CONSULTATION OR FURTHER INFORMATION REGARDING INTERPRETATION OF TEST SCORES IS AVAILABLE BY CALLING EXTENSION 8017.

NAME OF TEST	VERY LOW		LOW		AVERAGE		HIGH		VERY HIGH	
	25	50	75	100	125	150	175	200	225	250
CLERICAL SPEED AND ACCURACY								✓		
SPELLING								✓		
SENTENCES					✓					
NUMERICAL ABILITY							✓			
ABSTRACT REASONING							✓			
VERBAL REASONING					✓					

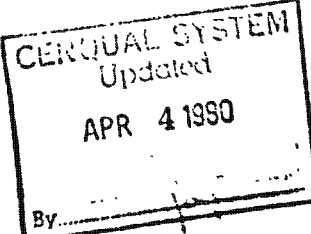

REMARKS:

Mr. Flores should be referred for P&TB, preferably while he is still in the I&S.

REPRODUCTION OF ADDED TESTS ARE CLEAR ON SEPARATE SIDE OF THIS SHEET

CONFIDENTIAL (When Filled In)

A-11A

CERTIFICATION OF LANGUAGE PROFICIENCY IN <u>Spanish A</u>						DATE PREPARED <u>4-1-80</u>	
SSN <u>41610 4262310</u>		NAME (Last, First, MI) <u>Flores, Daniel</u>			DATE OF BIRTH YEAR MONTH DAY <u>3 15 18 14 13</u>		DIVISION <u>LA</u>
TYPE CHANGE <u>C</u>	LANG CODE <u>PL18</u>	READING* <u>+</u>	SPEAKING* <u>5</u>	UNDERSTANDING* <u>5</u>	DATE TESTED YR MO DA <u>80 3 30</u>		TYPE TEST <u>N</u>
*SEE BACK FOR PROFICIENCY LEVEL DEFINITIONS							
REMARKS <u>Outside Test.</u>							
							
				CHIEF OF TESTING'S TEST NUMBER <u>42001</u>			

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE Daniel Flores		DATE RECEIVED AT HEADQUARTERS 22 May 79	NAME OF SUPERVISOR Lawrence Sternfield	DATE (FORM 100-57) 22 May 79
DATE RECEIVED AT HEADQUARTERS 5 June 1979		STATION NUMBER JMMT-14447	DATE RECEIVED BY EARLIER SERVICE	HOME BASE COMPONENT LA
DATE OF BIRTH 4 Aug 55	SERVICE DESIGNATION DQG	CURRENT POSITION AND GRADE Ops Officer, GS-13	STATION OR RATE	CURRENT COVER

TO BE COMPLETED BY EMPLOYEE

1. DATE OF PCS ARRIVAL IN FIELD February 1978	10. RESUBMITTED DATE OF SEPARATION Operations Officer GS-13	11. EMPLOYER DATE OF FIRST CHECK-IN AT HQ SEE 6A	12. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE SEE 6A
--	--	---	--

13. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:
Spouse - 43
Daughter - 5

14. PERSONAL INTEREST FACTORS THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:
Child's schooling

15. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (use special note on transmittal form).
Liaison Officer in charge of an man unit.

16. TRAINING DESIRED
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS
Training in a third language.
Additional management training offered either by the Agency or by a private institution. Consideration for an appointment to a War College.

SECRET

As noted in 1B below, my first choice for my next assignment is that of Chief of Base in [redacted] or Chief of Base in Latin America. I have served three tour overseas and a four-year tour at Headquarters in Cuban Operations. In the past ten years I have gained experience in technical operation, operations related to the priority and hard targets and, prior to my assignment to [redacted] as supervisor of one of the [redacted] branches in Cuban Operations. In [redacted] my responsibilities consist of the supervision and administration of an [redacted] man unit composed of [redacted] nationals which I manage and direct operationally in coordination with the Government of [redacted] I have been in [redacted] fifteen months.

Should the Chief of Base position in [redacted] become available in the summer of 1980 or 1981 and this job is offered to me, I would be

4. INDICATE IF YOU SPECIFY TO EXTEND YOUR CURRENT TOUR BY REQUESTING AN APPROPRIATE NUMBER OF MONTHS AT THE END OF THIS TOUR. PLEASE SEE 6A. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES, EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR. *Please see 6A

- EXTEND TOUR 4-16 MONTHS AT CURRENT STATION TO depending on next assignment
- BE ASSIGNED TO POSTS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE War College 2ND CHOICE Management 3RD CHOICE Headquarters Tour
- BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE REGION, GEOGRAPHIC AREA OR SPECIALIZATION.
1ST CHOICE [redacted] 2ND CHOICE COB, Latin Am 3RD CHOICE Washington, D.C.
- RETURN TO MY CURRENT STATION.

PREPARE UPDATING OF PERSONAL SECURITY INFORMATION IN ACCORDANCE WITH DDI-F 240-B AND FORWARD UNDER SEPARATE COVER. INDICATE DATE FORWARDED OR TO BE FORWARDED.

TO BE COMPLETED BY FIELD STATION

7. 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.

Based upon Subject's experience both prior to and during his current tour, his requests for assignment as stated by him are very reasonable. I fully endorse his requests.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

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

DATE _____ SIGNATURE _____

FOR USE BY CAREER SERVICE

9. APPROVED ASSIGNMENT

10. EMPLOYEE NOTIFIED BY _____ DATE _____
CABLE NO. _____ DATE _____

CAREER SERVICE REPRESENTATIVE _____ DATE _____

SECRET

SECRET

CA Continued. . .

amenable to an extension in [] for a period of 12 to 16 months depending on the timing of the assignment. If I were to be assigned to a country where an additional language is needed, time for language training should be taken into consideration.

In the event that a position as Chief of Base does not become available within the next year or two, my second choice is to be considered for a War College either for calendar year 1980 or 1981. This would enable me to more fully participate in the Agency's rotational program and would provide me with a higher level of training needed for career mobility in the Agency.

My third choice is to be considered as a candidate for the Agency's management program at one of the participating Universities in the United States with the intention of accepting a field assignment immediately after the termination of this training. I am prepared to make all the necessary arrangements toward this end (i.e., applying for admission, etc.) provided a list of Universities is furnished to me.

As noted above, I am willing to remain in [] through the summer of 1981 if my first choice is approved. In the event that my first choice cannot be granted I would be available to return to the United States in the summer of 1980 to prepare for my second or third choice. Should my second or third choice not be granted, I would prefer to return to the United States for an assignment in Washington.

SECRET

C 10

**ADMINISTRATIVE
Internal Use Only**

REPORT OF SERVICE ABROAD

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

SERIAL NO.	NAME		
1-6	LAST	FIRST	MIDDLE
036130	(Print) Flores	7-24 Daniel	

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 (O/P only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				40-42
0	2	1	5	7	8		1			4 5 0

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION				40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. IN 0326885	DOCUMENT DATE PERIOD 2/15/78
---	---------------------------------

REMARKS

PREPARED BY DCO	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C & L DIVISION, CFRD	DATE 2/23/78	SIGNATURE

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

*to turn to [unclear]
by 16 Jan*

CONFIDENTIAL
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

DANIEL FLORES
NAME
(Please Print)

Daniel Flores
SIGNATURE

Jan 30, 1978
DATE

FORM 5-74 3661

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

CONFIDENTIAL
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

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MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

Daniel Flores
NAME
(Please Print)

Daniel Flores
SIGNATURE

14 Nov. 1977

FORM 5-74 3661

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

SECRET
(When Filled In)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETAIN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTEMPLATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE Daniel Flores	SO D
--	----------------

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT	
2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW	
A. STANDARD TOUR OF DUTY OF 24 MONTHS XX	C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT. (See HR 20-18)
	REQUESTED (When Applicable) OPERATING OFFICIAL
B. NONSTANDARD TOUR OF DUTY OF _____ MONTHS PREVIOUSLY APPROVED PER HR 20-18.	CONCUR
OPERATING OFFICIAL <i>J. J. Halpin</i> J. Halpin CJA/PERS	CARER SERVICE APPROVED DIRECTOR OF PERSONNEL

III. PERMANENT PLACE OF RESIDENCE

3. YOUR PERMANENT PLACE OF RESIDENCE IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. THE LEGISLATION WILL BE SET IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE SERVICE AGREEMENT, YOU WILL BE PROMPTED BY HR 22 (3) NORMALLY INDICATE THE PLACE WHERE YOU PREVIOUSLY RESIDED IN THE UNITED STATES, THE TERRITORIES OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PREVIOUS ASSIGNMENT TO A POST ABROAD. YOU MAY ALSO INDICATE THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU HAVE BEEN CONTACTED BY THE YOUR PREVIOUS ASSIGNING OFFICE AND HAVE BEEN ADVISED THAT SUCH A PLACE IS AVAILABLE TO YOU. A PERMANENT PLACE OF RESIDENCE MUST BE A PLACE TO WHICH YOU WILL BE PERMANENTLY ASSIGNED AS OFFICIALS INCLUDE BUT IS NOT LIMITED TO: (1) YOUR HOME OF ORIGIN, (2) YOUR HOME OF ORIGIN, (3) YOUR HOME OF ORIGIN OR PERSONAL PROPERTY HAVE BEEN SOLD.

SECRET
(When Filled In)

3. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS <div style="border: 1px solid black; width: 200px; height: 20px; margin: 5px 0;"></div> VIENNA, VIRGINIA 22180		4. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3) FULL ADDRESS 	
APPROVED		CONCUR	
[Signature]		DEPUTY DIRECTOR	DATE
DATE 11/9/78		APPROVED	
[Signature]		DIRECTOR OF PERSONNEL	DATE

IV. HOME LEAVE POINT

7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.
8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-308(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.

9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS PORTLAND, OREGON		10. DESIGNATION PER ITEM 8 ABOVE. FULL ADDRESS 	
APPROVED		CONCUR	
RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT IN-LAWS		DEPUTY DIRECTOR	DATE
[Signature]		APPROVED	
DATE 11/9/78		DIRECTOR OF PERSONNEL	DATE

EMPLOYEE CERTIFICATION

I have read and understand my service obligations and travel entitlements as specified in this agreement.

[Signature] [Signature]

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-26	MIDDLE
036130	FLORES	DANIEL	

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. '98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
28-28	27-28	29-30	31-31	32-34	33-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
03	08	77	03	11	77	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. AA 10-77	DOCUMENT DATE/PERIOD 3/8-3/11/77
REMARKS	

PREPARED BY [Signature]	REPORT SUBMITTED ON 170000Z [Date]	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 3/11/77	SIGNATURE	

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

**ADMINISTRATIVE
Internal Use Only**

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 1-24	MIDDLE
036130	FLORES	DANIEL	

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. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
26-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
02-24	27-28	29-30	02-06	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	WESTERN HEMISPHERE	40-42
							2			811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 2/3-2/6/77

REMARKS

PREPARED BY	REPORT SUBMITTED TO CONTROL DIVISION	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> D. B. DIVISION, 4700	DATE <u>2/10/77</u>	

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

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-8	NAME		
	LAST (Print)	FIRST I-24	MIDDLE
036130	FLORES	DANIEL	

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 OPI NO. 59, 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			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39	40-42

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			
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39	40-42
04	12	77	04	15	77		2	120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS, OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 4/12-4/15/77

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ASSOCIATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 7/14/77	SIGNATURE	

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

CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION GIVEN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLANKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRP 20-7 PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) (First) (Middle)
Flores Daniel

1. MARITAL STATUS (Check one)
 SINGLE MARRIED SEPARATED DIVORCED WIDOWED ANNULLED
 IF MARRIED, PLACE OF MARRIAGE: **Lima, Peru** DATE OF MARRIAGE: **18 Nov 1960**
 IF DIVORCED, PLACE OF DIVORCE DECREE: **N/A** DATE OF DECREE:

2. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.
	Vienna, Va. 22180	573-0797
NAME OF CHILDREN	ADDRESS	SEX DATE OF BIRTH
	Vienna, Va. 22180	F

NAME OF PARENT (or sole guardian) ADDRESS TELEPHONE NO.
Gonzales, Texas 78629 512-672-6061

NAME OF MOTHER, INCLUDING MARIEN NAME (if female guardian) ADDRESS TELEPHONE NO.
N/A

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY?
None

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 27-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP
N/A		

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Last-First-Middle)	RELATIONSHIP
Mr. Seguin, Texas 78155	Brother-in-law
HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE	HOME TELEPHONE NUMBER
Seguin School District	512-379-1087
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE	BUSINESS TELEPHONE NUMBER

IS THE INDIVIDUAL NAMED ABOVE SITTING OR YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)

YES	NO
	<input checked="" type="checkbox"/>

IS THE 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	NO
	<input checked="" type="checkbox"/>

IS THIS INDIVIDUAL WHO THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSER? (If answer is "No" explain on reverse.)

YES	NO
	<input checked="" type="checkbox"/>

The persons named in item 2 or 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.

CONFIDENTIAL
(When Filled In)

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.

Riggs National Bank Joint account: Daniel and/or Flores

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?)
At home. New is being prepared.

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) Mr. and Mrs. [redacted]

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

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY
(No Approval Required)

RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)
--	---

8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3)
(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)

FULL ADDRESS	DEPUTY DIRECTOR OR ASSISTANT	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE

SIGNED AT: Daniel Flores DATE: Dec 30 1977 SIGNATURE

CONFIDENTIAL

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST	MIDDLE
026130	FRIZZ	DONIC	

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. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (<i>Basic</i>) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (<i>Basic</i>) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
12	14	77	12	15	77		2		120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

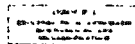
<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (<i>Specify</i>)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
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REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & L DIVISION, CTRD.	DATE 2/1/78	SIGNATURE
<input checked="" type="checkbox"/> C & T DIVISION		

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



ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-8	NAME		
	LAST (Print)	FIRST I-24	MIDDLE
026130	FLORIS	DANIEL	

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
01	16	78	01	19	78	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		WESTERN H.	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
-----------------------------	----------------------

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 2/6/78	SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION, CTDB.		
<input type="checkbox"/> C & T DIVISION		

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

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ASSAID

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
026130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. 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. 58, 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			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38	39
									40-42

TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
10	28	77	11	03	77	2 - TOY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39
									40-42
									WESTERN HEMISPHERE 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE PERIOD
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REMARKS

PREPARED BY DCO	REPORT ANNOTATED IN CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & L DIVISION CYDD	DATE 1/23/78	SIGNATURE
<input type="checkbox"/> C & T DIVISION		

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

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
026130	Florie	Daniel	

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
10	17	77	10	20	77	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
							2		120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

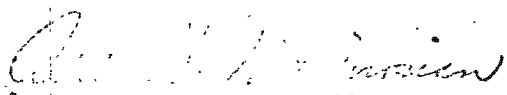
DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	16 Dec 77
REMARKS	

PREPARED BY	APPROVED AND FORWARDED BY	DATE	SIGNATURE

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

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IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

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SE TRAINING REPORT		SOVIET/EAST EUROPEAN OPERATIONS COURSE	
STUDENT Flores, Daniel		YEAR OF BIRTH 1935	GRADE GS-12
ECO DATE March 1962	OFFICE LA	SERVICE DESIGNATION D	COURSE DATES 7 - 15 November 1977
COURSE OBJECTIVES To orient the student on the special nature of the Directorate of Operation's Soviet/East European target and to examine the application of clandestine methods for collecting information on assessing and preparing recruitment operations against Soviet/East European personalities.			
ACHIEVEMENT RECORD This is a certificate of attendance. No evaluation is made of individual performance in the course.			
 SE Training Officer			

FORM 3687 OBSOLETE PREVIOUS EDITIONS

CONFIDENTIAL

E-2. IMPDET CI. BY. 059524 (04-45)

CONFIDENTIAL

OFFICE OF TECHNICAL SERVICES

BEHAVIORAL ACTIVITIES BRANCH

[Redacted]

1. This certifies that Daniel Flores - LA has completed five days of training in the course, [Redacted]

2. Primary goals of the course are to familiarize Agency case officers with [Redacted]

3. This is a certificate of attendance only. Student achievement was not evaluated.

[Redacted]

OIS/Training Branch

E2 IMPDET CL BY 019432

CONFIDENTIAL

S-E-C-R-E-T

TRAINING REPORT/CERTIFICATION OF HANDGUN QUALIFICATION

TITLE: Countering Terrorist Tactics Course No. 16-77 DATES: 19-23 September 1977

STUDENT: FLORES, Daniel OFFICE: IA SD: D

PURPOSE AND SCOPE OF COURSE:

(S) This course stressed countermeasures to thwart terrorist acts against U.S. personnel abroad.

PERFORMANCE RECORD:

(U/ALUO) This is to certify that the student has satisfactorily completed the prescribed course of instruction.

HANDGUN QUALIFICATION:

(C) Student completed 24 hours of instruction on handguns at the on 23 September 1977; subsequently fired the handgun Qualification test achieving a score of:

Revolver (Cal. - .38)	<u>289</u>
Automatic (Cal. - 9mm)	<u>255</u>
_____	_____

out of a possible 300.

(U/ALUO) The student demonstrated satisfactory application of safety procedures; mechanical aptitude; marksmanship techniques; and maintenance during range firing/classroom sessions; and is qualified to use the handguns (or similar guns) listed above.

FOR THE DIRECTOR OF TRAINING:

Chief, Special Activities Branch/OTD

9/26/77
Date

S-E-C-R-E-T

E2 IMPDET
CL by 056382

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-5	NAME		
	LAST (Print)	FIRST	MIDDLE
5-16-134	Lucas	Ronald	

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 DATED BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-29	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39		40-42
2	0	16	1	0	16		2		1 2 0

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. BPC 24-2-77	DOCUMENT DATE/PERIOD 1. 26, 26 25-30 Sept, 77
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REMARKS

PREPARED BY [Signature]	REPORT ASSISTANT OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 10/10	SIGNATURE [Signature]	

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

**ADMINISTRATIVE
Internal Use Only**

REPORT OF SERVICE ABROAD

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

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 256150	(Print) Hess	7-24 Dunst	

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
20-20	27-28	29-20	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	W 11	40-42 1 11

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA-10-77 DOCUMENT DATE/PERIOD 1 Dec 76 to 30 Sept 77

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCB	DATE: <u>21.2.77</u>	SIGNATURE: <u>[Signature]</u>
<input checked="" type="checkbox"/> C & L DIVISION, CTSD.		
<input type="checkbox"/> C & S DIVISION		

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

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Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-9 036130	NAME		
	LAST <i>(Print)</i> FLORES	FIRST 7-24 DANIEL	MIDDLE

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE			
02	09	77	02	18	77	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
							2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

per. Jaque 5467

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77	DOCUMENT DATE/PERIOD 2/9 - 2/18/77
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REMARKS

PREPARED BY BCO <input checked="" type="checkbox"/> C & L DIVISION, CFRD. <input type="checkbox"/> C & T DIVISION	REPORT ANNOTATED ON CONTROL DOCUMENT DATE 3/25/77	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGN [Signature]
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
036130	FLORES	DANIEL	

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. 58, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
02	22	77	02	25	77	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77	DOCUMENT DATE/PERIOD 2/22-2/25/77
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REMARKS

PREPARED BY DCO	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & I DIVISION, CTDR.	DATE 3/25/77	SIGNATURE
<input checked="" type="checkbox"/> C & P DIVISION		

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

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. I-#	NAME		
	LAST	FIRST	MIDDLE
036130	FLORES	DANIEL	

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 (O/P ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 33, REVISED.

PCS DATES OF SERVICE						TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
ARRIVAL O/S		DEPARTURE O/S		YEAR						
MONTH	DAY	MONTH	DAY	YEAR	YEAR	1 - PCS (Basic)	37	38-39		40-42
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION				
						5 - CANCELLATION				

TDY DATES OF SERVICE						TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
ARRIVAL O/S		DEPARTURE O/S		YEAR						
MONTH	DAY	MONTH	DAY	YEAR	YEAR	2 - TDY (Basic)	37	38-39		40-42
03	03	77	03	05	77	4 - CORRECTION			WESTERN HEMISPHERE	811
						5 - CANCELLATION	2			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 3/3-3/5/77

REMARKS

PREPARED BY	REPORT IDENTIFIED BY	ADDS DATA CERTIFIED CORRECTLY BASED UPON SOURCE DOCUMENTS
DATE		
3/25/77		

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CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRP 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) **Flores** (First) **Daniel** (Middle)

1. MARITAL STATUS (Check one)

SINGLE	<input checked="" type="checkbox"/>	MARRIED	<input type="checkbox"/>	SEPARATED	<input type="checkbox"/>	DIVORCED	<input type="checkbox"/>	WIDOWED	<input type="checkbox"/>	ANNULLED	<input type="checkbox"/>
--------	-------------------------------------	---------	--------------------------	-----------	--------------------------	----------	--------------------------	---------	--------------------------	----------	--------------------------

IF MARRIED, PLACE OF MARRIAGE: **Lima, Peru** DATE OF MARRIAGE: **18 Nov 1960**

IF DIVORCED, PLACE OF DIVORCE DECREE: _____ DATE OF DECREE: _____

2. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No. Street, City, State, Zip Code)	TELEPHONE NO.	
_____	Vienna, Va. 22180	573-0797	
NAME OF CHILDREN	ADDRESS	SEX	DATE OF BIRTH
_____	(Same as above)	F	_____
NAME OF FATHER (or male guardian)	ADDRESS	TELEPHONE NO.	
_____	_____	_____	
NAME OF MOTHER, INCLUDING MACHIN NAME (or female guardian)	ADDRESS	TELEPHONE NO.	
_____	_____	_____	

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

Mr. _____ - Brother-in-law

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 5% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HRP 22-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP
_____	_____	_____

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Do Not Blank) **Mr. _____** RELATIONSHIP **Brother-in-law**

HOME ADDRESS (No. Street, City, State, Zip Code) and HOME TELEPHONE NO. (If Applicable) **Seguin, Tex. 78155 512-379-1087**

5. BUSINESS ADDRESS (No. Street, City, State, Zip Code) and HOME TELEPHONE NO. (If Applicable) **Seguin School District System**

IF YOU HAVE A BUSINESS ADDRESS DIFFERENT FROM YOUR RESIDENTIAL ADDRESS, CHECK THIS BOX AND ADDRESS OF BUSINESS (If Applicable) _____

IF YOU HAVE A BUSINESS ADDRESS AND WANT NOTIFIED IN CASE OF EMERGENCY, CHECK THIS BOX AND ADDRESS OF BUSINESS (If Applicable) _____

IF YOU HAVE A BUSINESS ADDRESS AND WANT NOTIFIED IN CASE OF EMERGENCY, CHECK THIS BOX AND ADDRESS OF BUSINESS (If Applicable) _____

IF YOU HAVE A BUSINESS ADDRESS AND WANT NOTIFIED IN CASE OF EMERGENCY, CHECK THIS BOX AND ADDRESS OF BUSINESS (If Applicable) _____

CONFIDENTIAL

CONFIDENTIAL
(When Filled In)

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.

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?)

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 possesses the power of attorney?)

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY
(No Approval Required)

RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-2 (Full Address)
--	---

8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-2)
(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)

FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNATE	DATE
	DIRECTOR OF PERSONNEL (When Applicable) (Refer to HR 22-2)	DATE

SIGNED BY: *[Signature]* DATE: *NOV 10 1950* SIGNATURE: *[Signature]* 151

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY *[Signature]*

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

SERIAL NO. *036130* NAME
LAST *FLORES* FIRST *DANIEL* MIDDLE

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 (Only one) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO GFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	G/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	G/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
04	26	76	05	08	76	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	WESTERN Hem	40-42 8 1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OF TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *870-7-76* DOCUMENT DATE (PERIOD) *April 26 - May 8 76*

PREPARED BY: *[Signature]* REPORT SUBMITTED BY: *[Signature]* SOURCE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT FILED

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

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD										FILE PUNCHED BY <i>BY</i>		
TO: Office of Personnel, Control Division, Statistical Reporting Branch												
SERIAL NO		NAME										
1-6		LAST		FIRST		MIDDLE						
036130		FLORES		DANIEL								
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 (<i>One only</i>). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 56, 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	ONLY		
28-28	27-28	29-30	31-32	33-34	35-36				37	38	39	CODE 40-42
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		ANALYSIS	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic)	2 - CORRECTION	3 - CANCELLATION	CODE	ONLY		
28-28	27-28	29-30	31-32	33-34	35-36				37	38	39	CODE 40-42
06	15	76	06	20	76				2			WESTERN Hemispage 811
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH						
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD						
LA 07-76						6-14-76						
REMARKS												
PREPARED BY			REPORT SUBMITTED TO CONTROL DIVISION			ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITED						
DATE			DATE			SIGNATURE						
9-20-76												
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

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

TRAINING REPORT

Instructor Training Workshop

Student: Flores, Daniel Office: OTR
Year of Birth: 1935 SD: D
Grade: GS-12 EOD Date: 1962
Number of Students Enrolled: 6 Date of Course: 7/26 - 8/8/76

COURSE OBJECTIVES--CONTENT AND METHODS

The Workshop objectives provide participants with a knowledge of the major principles, methods, and practices of effective instruction, and an opportunity to develop skills as an instructor by applying this knowledge in an instructional setting. Participants are able to analyze their audience and teaching objectives, prepare lesson plans, effectively present the material to be learned, and then evaluate the results of their training efforts.

The instruction required maximum student involvement with major emphasis on the application of instructional methods in the students presentation of units of instruction. Students were not graded during the Workshop, but they were constructively evaluated by the instructor and fellow participants both verbally and through the use of video tape.

Students were required to give a fifteen-minute lecture, a twenty-minute demonstration, and a fifty-minute lesson in his basic subject.

ACHIEVEMENT RECORD

This is a certificate of attendance only, since examinations are not used in the course.

FOR THE DIRECTOR OF TRAINING

11/10/76
LATE

[Redacted Signature Box]

Chief Instructor

E 2 IMPDET CL BY OIC628

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

311

ADMINISTRATIVE
Internal Use Only

0.361.30
31/E 135/4534

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Control Division, Statistical Reporting												
SERIAL NO.			LAST			FIRST			NAME			
1-6 0.361.30			(Point) Flores			3-78 Amice						
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. 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 OPI NO. 98, 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)	CODE	37	38	39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION					40-42	
						3 - CANCELLATION						
TOY 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 - TOY (Basic)	CODE	37	38	39	CODE	
07	16	75	07	19	75	4 - CORRECTION					40-42	
						5 - CANCELLATION					811	
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH						
CARLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD						
REMARKS												
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED						
B & C DIVISION, CTDR.			DATE			SIGNATURE						
B & C DIVISION			11/21/75									
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

FILE
PUNCHED
BY

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

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

**FILE
PUNCHED
BY:**

SERIAL NO. 1-5	NAME	
	LAST (Print)	FIRST 7-28
036130	FLORES	DANIEL

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 (Use only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS FOR YEAR. REFER TO OPI NO. 88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	25	75	07	29	75	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	2		LATIN AMERICAN	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCB	DATE	SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION, CTRD.	12/16/75	[Signature]
<input type="checkbox"/> C & T DIVISION		

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IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel Control Division, Statistical Reporting Branch

FILE PUNCHED BY
FLORES

SERIAL NO.

NAME

036130

LAST

FIRST

MIDDLE

FLORES

2-24

DANIEL

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. 50, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
1	20	87	5	12	13	75	2		WH AREA	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

LA-07-76

DOCUMENT DATE/PERIOD

DEC 3-13-75

REMARKS

PREPARED BY

DCO

A & L DIVISION, CTRD.

C & T DIVISION

REPORT ANNOTATED ON CONTROL DOCUMENT

DATE

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

SIGNATURE

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

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting

**FILE
PUNCHED
BY**

SERIAL NO.

NAME

036130

LAST

FIRST

FLORES

DANIEL

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
10	15	75	10	22	75		2	WESTERN HEM.	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify):	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

LA-145-76

10/15-22/75

REMARKS

PREPARED BY

REPORT ANNOTATED FOR CONTROL DOCUMENT

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

DCO
S & L DIVISION, CTRD.
C & T DIVISION

DATE

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

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

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

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 036130	(Print) FLORES	7-24 DANIEL	

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37			40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
10	30	75	11	04	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		WM BRET	40-42 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 166-76	DOCUMENT DATE/PERIOD OCT 30 - NOV 4-75
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PREPARED BY	REPORT SUBMITTED TO	ADJUDICATOR'S CERTIFICATION
		ADJUDICATOR'S CERTIFICATION

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

ADMINISTRATIVE
Internal Use Only

SIE

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Report

FILE
PUNCHED
BY
MICHAEL

SERIAL NO.	NAME	
1-6	LAST	FIRST
036130	(Print) FLORES	JOSE

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. 59, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
08	16	75	09	02	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	LATIN AMERICAN S.O.S	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS

PREPARED BY	REPORT SUBMITTED ON	ABOVE DATA CERTIFIED CORRECT. INITIAL UPON SOURCE DOCUMENT ENTER
DATE	DATE	SIGNATURE
	11/2/75	

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

SECRET
(When Filled In)

S/E

REPORT OF SERVICE ABROAD

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

FILE
PUNCHED
NAME BY MIDDLE

SERIAL NO.

036130

LAST

(Print)

Flores

FIRST

7-24

Daniel

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION				40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
06	05	75	06	11	75	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	2			Europe 801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY

CCB
CCB 1 DIVISION, CDR.
CCB 2 DIVISION

REPORT SUBMITTED BY GLOBAL DELIVERY

DATE

S/S/MS
11/11/75

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

SIGNATURE

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

FORM 14510 1-65

SECRET

18-101

SECRET

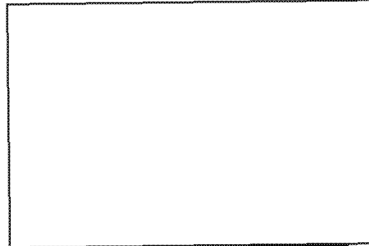
OFF

18 NOV 1975

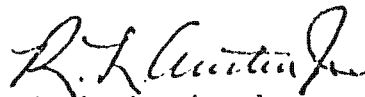
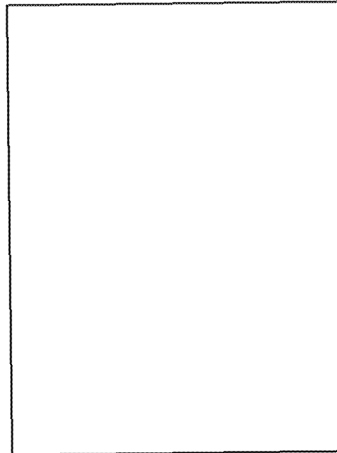
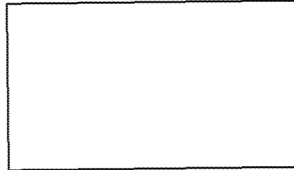
MEMORANDUM FOR THE RECORD

SUBJECT: Meritorious Unit Citation -- Cuban Operations Group,
Latin America Division

On 13 November 1975 the Director of Central Intelligence approved award of the Meritorious Unit Citation to the Cuban Operations Group in recognition of the outstanding performance of the following employees from 1 October 1974 to 30 September 1975:



Daniel Flores

A handwritten signature in cursive script, appearing to read "R. L. Austin, Jr.".

R. L. Austin, Jr.
Recorder

Honor and Merit Awards Board

Distribution:

- 1 - Each OFF
- 1 - C/LA
- 1 - Recorder/IMAB
- 1 - Exec Sec/IMAB

SECRET

E2 Impdet C1 By 014029

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY *W/S*

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO.	NAME		
1-9	LAST	FIRST	MIDDLE
<i>36130</i>	<i>FLORES</i>	<i>DANIEL</i>	

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 OPI NO. 58 DATED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	09	75	07	14	75	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	37	38 39	<i>WH</i>	<i>811</i>

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE PERIOD
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REMARKS

PREPARED BY	REPORT APPROVED BY CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITE
<i>W/S</i>	DATE <i>7/15/75</i>	SIGNATURE

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

SECRET
(When Filled In)

FILE
FORWARDED
BY/W

REPORT OF SERVICE ABROAD

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

SERIAL NO. - 036130	NAME		
	LAST Flares	FIRST Daniel	MIDDLE

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. 58, REVISED.

ARRIVAL O/S						DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	CODE		37	38	39	CODE			
25-26	27-28	29-30	31-32	33-34	35-36						40-42			
			03	05	74			1			570			

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY		ARFAC(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	CODE		37	38	39	CODE
25-26	27-28	29-30	31-32	33-34	35-36						40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. **135131** DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCR	DATE 3/28/74	SIGNATURE
C & L DIVISION, CTDO.		
C & S DIVISION		

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ADMINISTRATIVE
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY [initials]

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO. 1-6	NAME	
	LAST (Print)	FIRST I-24
026130	FLORES	DANIEL

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
10	05	74	10	07	74	2		Europe	801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. WHT 119-75	DOCUMENT DATE/PERIOD 10/4-10/2/74
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REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT APPROVED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE
<input checked="" type="checkbox"/> S.S. DIVISION, CIVIL	DATE 12/23/74	SIGNATURE

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

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
FORWARDED
BY [Signature]

TO: Office of Personnel, Transactions and Records Branch, State Department

SERIAL NO. 1-6	NAME	
	LAST (Print)	FIRST 7-26
020 20	FLORES	JOHN W.

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. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREAS	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	07	74	07	11	74	2 - TDY (Basic) 3 - CORRECTION 4 - CANCELLATION	2		60 61	81 1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS

PREPARED BY	REPORT ANNOTATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 6/10/74	SIGNATURE [Signature]
C & A DIVISION, CTRD.		
C & V DIVISION		

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

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY *fil*

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO. 1-6	NAME		
	LAST	FIRST	MIDDLE
036130	(Print) FLORES	7-24 DANIEL	

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. 58 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			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39	40-42

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			
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	40-42
06	13	74	06	21	74	2		WA P/1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *WA 542-74* DOCUMENT DATE/PERIOD *6/13-6/4/74*

REMARKS

PREPARED BY: *[Signature]* DATE: *9 May 74*

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

ADMINISTRATIVE
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

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

SERIAL NO.

NAME

1-6
036130

LAST

FIRST

(Print)

FLUCES

DANIEL

FILE
PUNCHED
BY *lcr*

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. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
08	12	74	08	16	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	LA AREA	40-42 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> Other (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE PERIOD

12-17 June 74

WITNESSES

PREPARED BY: *[Signature]*
 CHECKED BY: *[Signature]*
 APPROVED BY: *[Signature]*

THIS REPORT SHALL BE FILED IN THE OFFICE OF PERSONNEL
 IN THE INSTITUTION'S OFFICIAL PERSONNEL FILES

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY				
1. NAME OF EMPLOYEE (use pseudo only if SA) Daniel Flores		2. DATE (from item 3-1) 27 Feb 73	3. NAME OF SUPERVISOR (true) Richard Welch	4. DATE (from item 3-2) 27 Feb 73
5. DATE RECEIVED AT HEADQUARTERS: 2 March 1973		6. DISPATCH NUMBER: HPLT-6502	7. DATE RECEIVED BY CARRIER SERVICE:	
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH 4 Aug 1935	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE GS-11 FI Case Officer	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER LNFALL
6A. DATE OF PCS ARRIVAL IN FIELD 24 Sept 1971	6B. REQUESTED DATE OF DEPARTURE 30 Nov 1974	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ 1 Feb 1975	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE 15 Feb 1975 (depending on training.)	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU: Wife: 37, daughter: 3				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT: None				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 240-B)				
September 1971 - July 1972 - Activities of the [redacted] and [redacted] Preparation of project outlines and progress reports.				
August 1972 - Present - [redacted] Operations. [redacted] capability. Preparation of project outlines and progress reports.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS In the near future I would like to take an advanced operations course. In connection with this, I would like to concentrate on the [redacted] and [redacted] targets in Latin America. Special courses in these two areas would be extremely helpful. Some time in the future I would like to attend the mid-career course.				

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.

At this point in my career the [] and [] targets are of major interest to me. Although I would prefer to work on [] operations in my next assignment, as an alternative I would consider working on [] operations.

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 14 MONTHS AT CURRENT STATION TO 31 November 1974
(Date)

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

BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE [] 2ND CHOICE [] 3RD CHOICE []

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.

Concur. This officer is doing a good job on his assigned targets and his overall abilities give the Station a flexibility it often needs to call on.

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's tour has been extended fourteen months to 31 November 1974.

DATE 4/23/73 TITLE C/MII/Pers SIGNATURE H. L. Beythold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. HPIS-3284 DATE (typed) 23-Apr 73

CABLE NO. _____ DATE: _____

CAREER SERVICE REPRESENTATIVE: _____ DATE: _____

SECRET

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY

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

SERIAL NO. 1-6 036130	NAME		
	LAST (Print) FLORES	FIRST 7-24 DANIEL	MIDDLE

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 OPI NO. 88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		1988	88 88		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION	37	38 39		40-42 195
			05	28	71		1			

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		1988	88 88		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 16318	DOCUMENT DATE/PERIOD 28 May 1971
--------------------------------------	-------------------------------------

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 6/9/71	SIGNATURE <i>[Signature]</i>	

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

SECRET

(When filled in)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTINGENT UPON AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE

Daniel Flores

SO

D

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

Currently

and Next Assignment:

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS

X

C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYER SIGNING THIS AGREEMENT. (See HR 20-18)

REQUESTED (None attached)

OPERATING OFFICIAL

B. NONSTANDARD TOUR OF DUTY OF _____ MONTHS PREVIOUSLY APPROVED PER HR 20-18.

CONCUR

CAREER SERVICE

DEPUTY DIRECTOR

OPERATING OFFICIAL

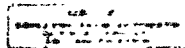
APPROVED

DIRECTOR OF PERSONNEL

III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. ITS DESIGNATION WILL BE KEPT IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE REVERSE SIDE, YOU WILL (SEE BYPROCEEDING IN HR 22-3) NORMALLY INDICATE THE PLACE WHERE YOU PHYSICALLY COULD BE IN THE UNITED STATES, ITS POSSESSIONS OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PMS TRANSFER TO A POST ABROAD. YOU MAY REQUEST IN ITEM 6 THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU CAN ESTABLISH THAT YOUR PHYSICAL DRELLING PLACE IS (OR WAS) TRANSIENT AND THAT SUCH OTHER PLACE IS YOUR DOMICILE OR HAS PREVIOUSLY BEEN USED BY YOU AS A PHYSICAL DRELLING PLACE. INFORMATION THAT CAN BE PRESENTED IN AN ATTACHED STATEMENT AS EVIDENCE INCLUDES BUT IS NOT LIMITED TO, STATE VOTING REGISTRATION, PROPERTY OWNERSHIP AND PLACE WHERE INCOME OR PERSONAL PROPERTY TAXES HAVE BEEN PAID.



SECRET
(When Filled In)

<p>3. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof)</p> <p>FULL ADDRESS:</p> <p>Washington, D. C.</p>		<p>6 OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3)</p> <p>FULL ADDRESS:</p>	
		CONCUR	
<p>APPROVED</p> <p>DEPUTY DIRECTOR</p> <p>[Signature]</p>		<p>DATE</p> <p>5-20-71</p>	
		CONCUR	
<p>APPROVED</p> <p>DEPUTY DIRECTOR</p> <p>[Signature]</p>		<p>DATE</p> <p>5-20-71</p>	
		CONCUR	
<p>APPROVED</p> <p>DEPUTY DIRECTOR</p> <p>[Signature]</p>		<p>DATE</p> <p>5-20-71</p>	
IV. HOME LEAVE POINT			
<p>7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.</p>			
<p>8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-30B(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.</p>			
<p>9. DESIGNATION PER ITEM 7 ABOVE</p> <p>FULL ADDRESS:</p> <p>[Redacted]</p> <p>Milwaukie, Oregon</p>		<p>10. DESIGNATION PER ITEM 8 ABOVE.</p> <p>FULL ADDRESS:</p>	
		CONCUR	
<p>RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT</p> <p>Parents-in-law</p>		<p>DEPUTY DIRECTOR</p> <p>[Signature]</p>	
<p>APPROVED</p> <p>DEPUTY DIRECTOR</p> <p>[Signature]</p>		<p>DATE</p> <p>5-20-71</p>	
		CONCUR	
<p>APPROVED</p> <p>DEPUTY DIRECTOR</p> <p>[Signature]</p>		<p>DATE</p> <p>5-20-71</p>	
EMPLOYEE CERTIFICATION			
<p>I have read and understand my service obligations and travel entitlements as described in this agreement.</p>			
<p>SIGNATURE OF EMPLOYEE</p> <p>See Dispatch Attached [Signature]</p>		<p>DATE</p> <p>5/20/71</p>	

CONFIDENTIAL
(When Filled In)

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.		
The Riggs National Bank, Federal Office, 1750 Pennsylvania Avenue, N.W., Washington D.C.		
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)		
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes" give name(s) and address)		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY (No Approval Required)		
RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE
SIGNED AT <i>Headquarters</i>	DATE <i>7 June 1951</i>	SIGNATURE <i>Clair D. ...</i>

CONFIDENTIAL

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 would like a position of increased responsibility, preferably as a Case Officer for Soviet Operations in Latin America. If this is possible I would like to take the Soviet Operations Course at Headquarters prior to my next assignment.

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.

- EXTEND TOUR _____ MONTHS AT CURRENT STATION TO _____ (DATE)
- BE ASSIGNED TO HQQTRS FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____
- BE ASSIGNED _____ DIVISION; INDICATE YOUR CHOICE OF GEOGRAPHIC AREA
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____
- 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:

It is believed that this officer's performance at his present post of assignment has provided sufficient indication of his competence as a field case officer, and that he should have no problem filling a Soviet Operations Officer slot at a medium sized field installation. He should attend the Soviet Operations Course prior to such assignment.

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 has selected Mr. Flores for assignment to _____ in September 1971.

DATE 1 Mar 71 TITLE C/WII/PCRB SIGNATURE H. T. Burthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. 113900 DATE: _____
CABLE NO. _____ DATE: _____

16. SUPERVISOR'S REPRESENTATIVE: _____ DATE: _____

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY RT

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

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	Flores	Daniel	

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. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	3/	36 39		40-42
05	13	69					1			175

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *2457300* DOCUMENT DATE/PERIOD *12 May 1967*

REMARKS

PREPARED BY	REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	SIGNATURE	

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

SECRET

Not Approved by
CS Career Service

81 JAR pm

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

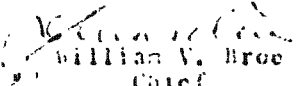
SUBJECT : Recommendation for Promotion to Grade
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-09 to GS-10.

2. Mr. Flores joined the Agency in 1962; initially he was employed on a part-time basis in the MI Division while attending the American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the MI Division, he was selected for assignment as an operations officer at the [] Base where he arrived in May 1969. Mr. Flores is bi-lingual in Spanish.

3. Both as a Headquarters and field operations officer Mr. Flores has carried out his assignments with intelligence, enthusiasm and initiative. As the [] Base officer in charge of [] operations, his performance has been of high caliber. In August 1969, during the forced absence of the Chief of Base and other senior officers, Mr. Flores assumed the full responsibilities for running the base for a period of several weeks. He performed the duties of Acting Chief of Base in a superior manner. In addition to his operational competence, the [] Chief of Base has observed that Mr. Flores' ability to develop social relations with ease has been a distinct asset for the Base.

4. Mr. Flores has already proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level far higher than his current grade and a promotion at this time is strongly recommended.


William V. Broe
Chief
Western Hemisphere Division

SECRET

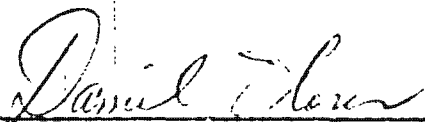
CONFIDENTIAL
(When filled in)

IMPORTANT

Central Processing Branch has been charged with responsibility for ensuring that all employees processing TCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

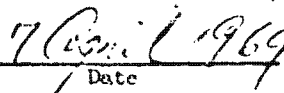
MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.



Signature

DANIEL FLORES



Date

CONFIDENTIAL

Group 1 - Excluded from
automatic downgrading
and declassification.

CONFIDENTIAL

(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
 Elbert Daniel

1. RESIDENCE DATA

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY: Washington, D.C.
 LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad):
 PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE: Washington, D.C.
 HOME LEAVE RESIDENCE: Washington, D.C.

2. MARITAL STATUS (Check one)

SINGLE MARRIED SEPARATED DIVORCED WIDOWED ANNULLED

IF MARRIED, PLACE OF MARRIAGE: Lima, Peru DATE OF MARRIAGE: 11/20/1960

IF DIVORCED, PLACE OF DIVORCE DECREE: DATE OF DECREE:

IF WIDOWED, PLACE SPOUSE DIED: DATE SPOUSE DIED:

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

3. MEMBERS OF FAMILY

ADDRESSES (No., Street, City, State, Zip Code)	TELEPHONE NO.
<u>Accompanying</u>	
<u>Guardian</u>	

NAME OF YOUR MOTHER (or female guardian): Rebecca ADDRESS: Genzoko, Texas (Box 39) TELEPHONE NO.: 512/672-6061

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., M): Mr. RELATIONSHIP: Brother-in-law

HOME ADDRESS (No., Street, City, State, Zip Code): Loguin, Texas HOME TELEPHONE NUMBER: (512) 679-7070

BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE: (same as above) BUSINESS TELEPHONE & EXTENSION:

IS THE INDIVIDUAL NAMED ABOVE FITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.) YES NO

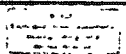
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" explain why in item 6.) YES NO

DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSER? (If answer to "No" explain why in item 6.) YES 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



CONFIDENTIAL

(When Filled In)

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.

Riggs National Bank : Daniel and [redacted] Flores
17th and Penn. Avenues, Washington, D.C.
(1750 Penn Avenue

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CIRCUIT 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?)

At home. Will leave with responsible person for safe keeping

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)

N/A

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

But may before I leave.

ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

My father should not be notified in case of an emergency because of his health and age.

SIGNED AT

DATE

7 April 1969

SIGNATURE

Daniel Flores

CONFIDENTIAL

SECRET

TPR

Supplement to Staff Employee Personnel

Daniel Flores

Effective 10 April 1969



SECRET



2

SECRET

SECRET



UNITED STATES GOVERNMENT



Personnel Office

ACCEPTED:

David L. ...

3

FORM 1535c

SECRET

10 01

SECRET

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

IMPORTANT AGENCY INSTRUCTIONS ON BACK OF ORIGINAL

TO COMPLETE THIS FORM—

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

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

NAME (last) 036730 (middle) DATE OF BIRTH (month, day, year) SOCIAL SECURITY NUMBER

Flores Daniel 4 August 1935 []

EMPLOYING DEPARTMENT OR AGENCY LOCATION (City, State, ZIP Code)

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

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

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

Mark here if you **WANT NEITHER regular nor optional insurance** (C) **WAIVER OF LIFE INSURANCE COVERAGE**
I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

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

Signature: [Handwritten Signature]
Date: [Handwritten Date]

FOR EMPLOYING OFFICE USE ONLY

(Official receiving date stamp)

Stamp: []

S-E-C-R-E-T

- TRAINING REPORT -

Operational Interrogation Course No. 2-69
(Full time - three weeks) 4 - 22 November 1968

Student: Flores, Daniel Office: WH
Grade : 08 EOD : Mar 62
Number of Students Enrolled: 9 Service Designation: D

COURSE OBJECTIVE

RATING

Class Performance : Satisfactory
Interrogation Aptitude: Average

GENERAL CLASS PERFORMANCE

Excellent: 3 Satisfactory: 6 Unsatisfactory: 0

GENERAL CLASS APTITUDE FOR INTERROGATION

High: 2 Average: 6 Low: 1

FOR THE DIRECTOR OF TRAINING:

27 DEC 1968
Date

Chief Instructor

S-E-C-R-E-T

C-E-C-R-E-T

TRAINING REPORT OPERATIONS COURSE (FULL TIME)	Course No.	No. of Students		Dates of Course	
	OC-1-3/4-68	Began	Finished	27 May -	16 August 1968
STUDENT IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	ECG DATE	OFFICE	CS	SD
FLORES, Daniel	1934	March 1967	CTP	CS	SD
PERFORMANCE EVALUATION					

- W - Weak: Ranges from inadequate to less than satisfactory (in terms of a new and inexperienced case officer).
- A - Adequate: Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.
- P - Proficient: More than satisfactory. Has acquired a solid beginner's proficiency. This rating may be interpreted as representing "average" on our rating scale.
- S - Strong: Exceptional proficiency, characterized by thoroughness, initiative, originality, and an exceptional student understanding of the case officer role in clandestine operations.
- O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of other students doing similar work as to warrant special recognition.

COURSE OBJECTIVE

This course is designed to prepare selected staff officers from the Career Trainee Program for field operations officer work with the Clandestine Services. The student's understanding of the Clandestine Services doctrines, policies and operational concepts and his ability to apply these related items is measured by a series of practical exercises. Successful completion of the Operations Familiarization Course (OFC) is a prerequisite for admission to the Operations Course.

RATING LETTER

TRADECRAFT	P
INTELLIGENCE AND OPERATIONAL INFORMATION REPORTING	P
CLANDESTINE SERVICES OPERATIONAL PROGRAMS	P

The trainee also received basic instruction and practical work in photography, including the use of a 35mm camera and in darkroom procedures; in [redacted] and in the use of [redacted]. In addition, he was given general familiarization on such subjects as [redacted] and authentication, observation and sketching.

This rating corresponds to the statement which most accurately reflects the student's level of performance and takes into account everything about him which influenced his effectiveness. This rating is a reflection of the degree to which the instructors feel that the student is both suitable and competent for overseas service in the Clandestine Services.

OVERALL PERFORMANCE
P

Overall performance ratings of all students in this class:

WEAK 0 ADEQUATE 0 PROFICIENT 40 STRONG 40 OUTSTANDING 20

S-E-C-R-E-T

NARRATIVE COMMENTS

Significant strengths and weaknesses and their relationship to overall performance in the Operations Course. This section amplifies and explains, as necessary, the rating letters given above.

Mr. Flores' overall performance in this course was at the high proficient level. He is a very friendly and personable individual who put forth a good deal of effort to do well in the course. Mr. Flores takes a very practical approach to solving problems and his attitude throughout the course was excellent.

Mr. Flores acquired a good understanding of the principles and techniques of Clandestine Services operations, and in problems requiring [redacted] in the live exercises he came through as a very friendly and personable individual. He was particularly effective in debriefing situations and demonstrated flexibility in meeting the problems that arose during the [redacted]

Mr. Flores demonstrated a good understanding of Clandestine Services programs in Foreign Intelligence, Counterintelligence and Covert Action. His performance was graded strong in handling of a [redacted] and in a Counterintelligence case study and a Covert Action case study his understanding and analyses were judged highly proficient. He received a rating of adequate in photography.

Mr. Flores has good writing skills and acquired a thorough understanding of intelligence and operational reporting procedures and formats of the Clandestine Services. His intelligence reports were consistently complete, accurate and clear. His operational reports suffered occasionally from weak organization, and on one occasion he had difficulty distinguishing operational from intelligence information; but his reports were generally complete and accurate and showed a sound understanding of operational reporting requirements.

Mr. Flores is a personable and intelligent individual who got along very well with his colleagues and with the instructors. With his excellent attitude and strong desire for a career in the Clandestine Services together with his willingness to work hard, Mr. Flores should have little difficulty in developing into an effective case officer as he gets greater experience.

FOR THE DIRECTOR OF TRAINING:

[redacted]

Chief Instructor

23 August 1968
Date

S-E-C-R-E-T

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68
(416 hours, full-time)

4 March - 3 May 1968
(Date)

Student : FLORES, Daniel Office : CTP/OTR
Year of Birth: 1935 Service Designation: BJ
Grade : GS-07 No. of Students: Began; Finished
EOD : March 1962

COURSE OBJECTIVES:

The course is designed to prepare junior clandestine services officers for related to the of Upon completion of training, the officer will be capable of developing and implementing actions which will contribute to the elimination of in the of the world in furtherance of U.S. policy. He shall also be capable of developing plans for the of in support of United States in and will be able to plan for the use of and operations in direct support of other intelligence activities.

ACHIEVEMENT RECORD:

The performance rating and narrative comments below are derived from a synthesis of all observations and evaluations submitted on each trainee by the instructor staff. Student rating is indicated by the asterisk.

INCOMPLETE 0 ADEQUATE 0 PROFICIENT * 48 STRONG 12

NARRATIVE COMMENTS:

Mr. Flores is a self-sufficient, steady worker, who demonstrated an excellent ability to adapt himself to the various training situations. His proficient performance during Operations Course, Phase II-3-68 did not fluctuate appreciably from beginning to end.

Mr. Flores was always mentally alert, receptive to instruction and responsive to instructional exercises. He cheerfully accepted all responsibilities, consistently produced satisfactory results, and appeared to demonstrate a sense of pride in his accomplishments. His conscientious effort, sincerity, and cooperative attitude enabled him to develop a sound working relationship with his colleagues.

Continued on Page 2

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68
(416 hours, full-time)

4 March - 3 May 1968

Student : FLORES, Daniel

Office : CTP/OTR

Service Designation: SJ

NARRATIVE COMMENTS (Continued)

Of noteworthy mention was Mr. Flores' pleasant, industrious performance throughout the [redacted] He established a cheerful environment for his colleagues and completed assigned responsibilities with enthusiasm, determination and cooperation. His sustained high-level performance and ability to adapt to the [redacted] earned him the respect and appreciation of his classmates.

The degree of performance attained in the course indicates Mr. Flores has gained a sound familiarization of the [redacted] activities, responsibilities, skills, and concepts.

FOR THE DIRECTOR OF TRAINING:

[redacted]
Chief Instructor, Operations Course, Phase II

2

S-E-C-R-E-T

S E C R E T

NARRATIVE RATING OF ACHIEVEMENT:

Mr. Flores showed considerable ability and experience in his handling of the practical problem. He should have no trouble in doing work of this kind with a minimum of supervision.

Overall adjectival rating of achievement:

Satisfactory ✓

Overall adjectival ratings of achievement of all employees in the course:

EXCELLENT: 2 SATISFACTORY: 14 UNSATISFACTORY:

Attendance at this course does not provide the student with operational knowledge and background sufficient to qualify him as an independent researcher, capable of making operational judgments.

NOTE: CS Records I (Introduction to Records) is a prerequisite for this course.

FOR THE DIRECTOR OF TRAINING:

24 MAY 1968

Date

Chief Instructor

- 2 -

S E C R E T

SECRET

(When Filled In)

TRAINING REPORT INTELLIGENCE TECHNIQUES COURSE (120 Hours)		COURSE NO. 3-68	NO. STUDENTS 46	DATE OF COURSE 29 Jan - 13 Feb 1968	
IDENTIFYING INFORMATION					
NAME OF STUDENT FLORES, Daniel	YOB 35	FOB DATE Mar 1962	OFFICE CTP	GS 07 SD SJ	
KEY TO RATINGS					
W - Weak	<i>Ranges from inadequate to less than satisfactory.</i>				
A - Adequate	<i>Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.</i>				
P - Proficient	<i>More than satisfactory. Has acquired a solid beginner's proficiency.</i>				
S - Strong	<i>Exceptional proficiency. Characterized by thoroughness, initiative, originality, and an exceptional student understanding of the work involved in intelligence production.</i>				
O - Outstanding	<i>Performance is so exceptional in relation to requirements and in comparison to the performance of others doing similar work as to warrant special recognition.</i>				
EVALUATION OF PERFORMANCE IN SKILLS					
BRIEFING	RATING P	WRITING	RATING A+	ANALYSIS	RATING P
OVER-ALL PERFORMANCE EVALUATION					
<p>The RATING LETTER reflects the over-all performance of the student in the course and is thus a measure of the extent to which the student possesses the skills and techniques required in the production of finished intelligence. The rating is not necessarily arrived at by mathematically averaging in the skills ratings, but takes into consideration any outstanding strengths or weaknesses that should be reflected in an evaluation of the performance of the student as a whole. The RATING LETTER is a consensus of the view of the faculty.</p>				RATING P-	
REPORT OF OBSERVATIONS, JUDGMENTS AND IMPRESSIONS					
<p>This is a general, unspecific, narrative report of observations, judgments, and impressions. It includes intangible factors such as the student's attitude, cooperativeness, attentiveness, maturity, and judgment. It also includes the general impression the student has made on the faculty. This report will not be included unless the instructors believe that it would add something to the previous evaluation of performance in skills as well as to the evaluation of the OVER-ALL PERFORMANCE of the student.</p>					
FOR THE DIRECTOR OF TRAINING:		<input type="checkbox"/>	DATE		
		CHIEF, INTELLIGENCE PRODUCTION FACULTY INTELLIGENCE SCHOOL			

S-E-C-R-E-T

PERFORMANCE RECORD

The

CT Class SEC - 1111111

Course Description

A. Statement of Objectives

- 1.
- 2.

B. Course Method

1. Approximately one-half of the course is devoted to lectures, one-fourth to seminars, exercises and demonstrations, and one-fourth to individual study.
2. Student achievement is judged on the basis of performance in one written examination and participation in seminars and exercises.

NAME Flower, David

Written Work

Examination By Student

Oral Work

Seminars, Exercises By Student

Comment:

GROUP I
Excluded from automatic
downgrading and
declassification

S-E-C-R-E-T

TRAINING REPORT

OPERATIONS FAMILIARIZATION COURSE NO. 2-68
(152 hours, full-time)

2 Jan. - 26 Jan. 1968
(Date)

STUDENT : FLORES, Daniel

OFFICE : CIP

YEAR OF BIRTH: 1935

SERVICE DESIGNATION: GJ

GRADE : GS-07

PROGRESS OF STUDENTS : Began

END DATE : March 1962

Finished

COURSE OBJECTIVE AND CONTENT

The Operations Familiarization Course is a four-week course designed to provide the student with an understanding of the Clandestine Services programs, operational methods and reporting techniques. Special emphasis is given the basic elements of

METHODS

The instructional methods used included class discussions, lectures, films demonstrations, practical exercises and case studies. Practical exercises were

The Operational programs of various Clandestine Services Divisions were discussed by representatives of the respective Headquarters components.

EVALUATION OF PERFORMANCE

The student's rating is based on understanding of the material presented as demonstrated by his participation in class discussions, the preparation of intelligence and operational reports, the application of operational principles in the practical exercises and the grade received on a comprehensive written examination given in the final week of the course which covered all areas of course content. Other factors considered in determining the final rating were the student's interest, attitude and preparation for assignments. The number of students receiving each adjectival rating on overall course performance is shown below. This student's rating is indicated by an asterisk. Explanatory narrative comments are included with a rating of ADEQUATE or STRONG. When considered pertinent by the training staff, comments may also be included with a PROFICIENT (average) rating.

UNSATISFACTORY

ADEQUATE

* PROFICIENT

STRONG

✓ Mr. Flores' overall performance in the course was at the solid proficient level. It should be noted that he demonstrated a particularly good attitude throughout the course. He took full advantage of the training offered to increase his knowledge of the Clandestine Services.

FOR THE DIRECTOR OF TRAINING

9 Feb. 1968
[Signature]

J-S-C-S-8-1

S-E-C-R-E-T

ORIENTATION TO INTELLIGENCE FOR CT'S
(Class of December 1967)

STUDENT	: Daniel FLORES	Duration:	11-22 December 1967 (30 hours, full time)
YEAR OF BIRTH:	1935	OFFICE	: CT
GRADE	: GS-07	SERVICE DESIGNATION:	SJ
EOD	: March 1962	NUMBER OF STUDENTS :	<input type="checkbox"/>

COURSE OBJECTIVES - CONTENT AND METHODS

In the Orientation to Intelligence Course the objectives are: (1) to instruct the student in the basic concepts and terminology of intelligence; (2) to describe the history of U.S. intelligence and the current role of intelligence in the national security structure; (3) to outline the composition and mission of the intelligence community, noting the Agency's significant role therein; (4) to define the mission of CIA in supporting the DCI and to identify the functions of the Agency's major components, particularly in the collection, production, and dissemination of intelligence; and (5) to identify and discuss major problems facing the Agency. The area surveys and "Articulating the United States" elements of the course are designed to introduce the students briefly to some of the intelligence problems presented by major regions of the free world and to stimulate thought about the American way of life and its relationship to these areas.

Instructional techniques include lectures given by members of the Orientation and Briefing Faculty, guest speakers from Agency components, seminars, directed reading, review exercises, training films, and intelligence exhibits.

ACHIEVEMENT RECORD

The individual student evaluation is based on his score achieved on a written examination given at the conclusion of the course. This test, consisting of 100 items, covered all major aspects of the course content. The rating assigned to this student is:

PROFICIENT

The evaluation system used was as follows:

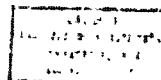
O = Outstanding	-	0-3 wrong
S = Strong	-	4-8 wrong
P = Proficient	-	9-15 wrong
A = Adequate	-	16-25 wrong
W = Weak	-	26- wrong

FOR THE DIRECTOR OF TRAINING

Chief, Orientation & Briefing Faculty

8 January 1968
Date

S-E-C-R-E-T



CONFIDENTIAL


26 October 1967

MEMORANDUM FOR: Daniel Flores

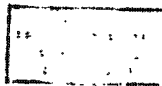
THROUGH : Executive Secretary
CSCT Selection Board

SUBJECT : Application for Career Training Program

1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.
2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.
3. Should you have any further questions, do not hesitate to call on the Program Officers.


Chief, CTP

CONFIDENTIAL



SECRET

(When Filled In)

MILITARY STATUS QUESTIONNAIRE (READ INSTRUCTIONS ON REVERSE SIDE)		DO NOT WRITE IN SPACES BELOW	
1. THIS DATE (Month-day-year) MARCH 12, 1962		1-6. SERIAL NUMBER 606130	
2. NAME (Last-First-middle) FACKES, DANIEL (VI)		7-24. NAME	
3. DATE OF BIRTH (Month-year) August 1935		25-29. SSN 1835	
4. SEX <input checked="" type="checkbox"/> (1) MALE <input type="checkbox"/> (2) FEMALE		29. SEX 1	
5. OFFICE TO WHICH ASSIGNED DDP/OPSER/RT		30-31. OFFICE CODE 39	
6. SCHEDULE AND GRADE GS-04		32-34. SCHD. 35-39. GR. C-5 C-4	
7. SUBJECT TO CURRENT DRAFT YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		37. DRAFT STATUS 2	
8. INDICATE DRAFT CLASSIFICATION, IF ANY		38-39. CLASS.	
VETERANS COMPLETE THE FOLLOWING			
9. BRANCH OF SERVICE ON SEPARATION (Check one)		10. MIL. GRADE ON SEPARATION	
<input type="checkbox"/> (1) ARMY <input checked="" type="checkbox"/> (2) MARINE <input type="checkbox"/> (3) COAST GUARD <input type="checkbox"/> (4) NAVY <input type="checkbox"/> (5) AIR FORCE		60. BRANCH SERVICE 3 61-62. MIL. GRADE E 4	
11. STATUS AT TIME OF SEPARATION (Check one)		43. STATUS AT SEPARATION	
<input checked="" type="checkbox"/> (1) REGULAR <input type="checkbox"/> (2) RESERVE <input type="checkbox"/> (3) DRAFTER <input type="checkbox"/> (4) OTHER (Specify in Comments)		1	
12. TYPE OF SEPARATION (Check one)		44. TYPE OF SEPARATION (A-less than 8 yrs; B-8 yrs or more)	
PLEASE NOTE ALTHOUGH YOU MAY HAVE A SERVICE CONNECTED DISABILITY, DO NOT CHECK THE BOX "RETIRED-SERVICE CONNECTED DISABILITY" UNLESS YOU WERE ACTUALLY RETIRED FOR THIS REASON. IF OTHERWISE, CHECK "HONORABLE DISCHARGE" OR "RELEASED TO INACTIVE DUTY" AS APPROPRIATE, EVEN THOUGH YOU MAY BE DRAWING A DISABILITY ALLOWANCE OR COMPENSATION.		1A 2A 3A 7A 1B 3B 5B 7B <input checked="" type="checkbox"/> 2A 4A 6A 8A 2B 4B 6B 8B	
<input type="checkbox"/> (1) RELEASED TO INACTIVE DUTY <input type="checkbox"/> (6) RETIRED-AGE <input checked="" type="checkbox"/> (2) HONORABLE DISCHARGE <input type="checkbox"/> (7) RETIRED-SERVICE CONNECTED DISABILITY <input type="checkbox"/> (3) RETIRED-20 (or more) YRS. SERVICE <input type="checkbox"/> (8) RETIRED-COMBAT DISABILITY <input type="checkbox"/> (4) RETIRED-LESS THAN 20 YRS. SERVICE <input type="checkbox"/> (9) OTHER-SPECIFY UNDER COMMENTS			
MEMBERS OF RESERVE FORCES COMPLETE THE FOLLOWING			
13. RESERVE BRANCH OR SERVICE		14. ORIGINAL ENTRY DATE IN ARMED SERVICES	
15. SERVICE SERIAL NO.		16. MOS, AFSC, DESIGNATOR, OR RATING	
17. MIL. GRADE		18. RESERVE CATEGORY (Check one)	
		<input type="checkbox"/> (1) READY <input type="checkbox"/> (2) STANDBY <input type="checkbox"/> (3) RETIRED	
19. EXPIRATION DATE OF APPOINTMENT OR ENLISTMENT (Month and year)		55-59. SERV. SER. NO.	
		60-64. MOS, AFSC, ETC.	
20. MIL. MOBILIZATION ASSIGNMENT		59-66. MIL. GRADE	
		67. CATEGORY	
21. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED		68-71. EXPIRATION DATE	
		72. MOBILIZATION ASSIGNMENT	
		73. ASSIGNMENT UNIT	
		74. MOBILIZATION CATEGORY	
22. COMMENTS			

OUTSIDE ACTIVITY APPROVAL REQUEST

SEE HR 10-7 BEFORE SUBMITTING TO FOR AN ORIGINAL AND 2 COPIES OF THIS FORM

TO : DIRECTOR OF SECURITY; ATTN: EMPLOYEE ACTIVITY BRANCH DATE: 16 April 1962

THROUGH: (Operating official, administrative and/or security officer)

[Redacted]
Security Officer, RID

FROM :	NAME AND GRADE OF EMPLOYEE (Print or type)	COMPONENT	ROOM NO. AND BLDG.	PHONE
	FLORES, Daniel GS-04	DDP/OPSER/RID/RB/IN	A B 4003	6187

1. DESCRIPTION OF OUTSIDE ACTIVITY FOR WHICH APPROVAL IS REQUESTED:

Bartender

2. FULL NAMES OF ORGANIZATION AND/OR PERSONS INVOLVED

Bartenders Union Local OIA 75 Mr. [Redacted]

3. DATE(S) OF PARTICIPATION AND LOCALE OF ACTIVITY
**On call different days of the week.
914 F Street, N. W.
Washington, D. C.**

4. REMARKS
In engaging in the requested activity I will make no reference to, or discuss my CIA assignments or duties nor will I make reference to or discuss my CIA employment except as authorized by Headquarters Regulation 10-7.

[Signature]
SIGNATURE OF REQUESTING EMPLOYEE

5. CONCURRENCES AND/OR APPROVAL WITHIN OPERATING OFFICE

(signed) John M. Wicks-worth
[Redacted]
Chief, RID/ADMIN

FOR COMPLETION BY EMPLOYEE ACTIVITY BRANCH AND RETURN OF ORIGINAL TO EMPLOYEE

[Redacted area containing handwritten notes and signatures]

20 Apr 62
W.A. [Signature]

Standard Form No. 1002
CHAPTER I, SUBCHAPTER 1
5, GAO 1955

HEALTH BENEFITS REGISTRATION FORM*

FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959
(Part I in use on or after 12/31/59; Use only previous version for earlier years)

4536490

PART A
ALL WHO DESIRE MUST FILL IN THIS PART

1. NAME (LAST, FIRST, MIDDLE INITIAL) FLORES, LUIS

2. DATE OF BIRTH (Month, Day, Year) 11/15/22

3. Are you now married? YES NO

4. YOUR MAILING ADDRESS (NUMBER AND STREET, CITY AND ZONE NUMBER, STATE) 1177 1/2 ...

5. Are you covered by, or is any family member covered by, or enrolling in a plan under the Federal Employees Health Benefits Act of 1959 (through the agency or another United States or District of Columbia Government agency or consultant)? YES NO

6. Place an "X" in proper box to show your annual basic salary range:
 UNDER \$1,000 \$1,000 TO \$1,999 \$2,000 TO \$2,999 \$3,000 TO \$3,999 \$4,000 TO \$4,999 \$5,000 TO \$5,999 \$6,000 TO \$6,999 \$7,000 TO \$7,999 \$8,000 TO \$8,999 \$9,000 TO \$9,999 \$10,000 TO \$10,999 \$11,000 TO \$11,999 \$12,000 TO \$12,999 \$13,000 TO \$13,999 \$14,000 TO \$14,999 \$15,000 TO \$15,999 \$16,000 TO \$16,999 \$17,000 TO \$17,999 \$18,000 TO \$18,999 \$19,000 TO \$19,999 \$20,000 TO \$20,999 \$21,000 TO \$21,999 \$22,000 TO \$22,999 \$23,000 TO \$23,999 \$24,000 TO \$24,999 \$25,000 TO \$25,999 \$26,000 TO \$26,999 \$27,000 TO \$27,999 \$28,000 TO \$28,999 \$29,000 TO \$29,999 \$30,000 TO \$30,999 \$31,000 TO \$31,999 \$32,000 TO \$32,999 \$33,000 TO \$33,999 \$34,000 TO \$34,999 \$35,000 TO \$35,999 \$36,000 TO \$36,999 \$37,000 TO \$37,999 \$38,000 TO \$38,999 \$39,000 TO \$39,999 \$40,000 TO \$40,999 \$41,000 TO \$41,999 \$42,000 TO \$42,999 \$43,000 TO \$43,999 \$44,000 TO \$44,999 \$45,000 TO \$45,999 \$46,000 TO \$46,999 \$47,000 TO \$47,999 \$48,000 TO 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CONFIDENTIAL
(when filled in)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents
of Handbook 20-4, Employee Conduct, dated 29 August 1961.

David Lopez
Signature

18 March 1962
Date

CONFIDENTIAL

DECLARATION OF APPOINTEE

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

PRESENT ADDRESS (Street and number, city and State) _____ **WASHINGTON 8, D.C.**

(A) DATE OF BIRTH **August 11, 1905** (B) PLACE OF BIRTH (City and State or city and foreign country) **SAN MARCOS, TEXAS**

(C) IN CASE OF EMERGENCY, PLEASE NOTIFY **MRS. DORRIS TOLLES** (D) RELATIONSHIP **WIFE** (E) STREET AND NUMBER, CITY AND STATE _____ (F) TELEPHONE NO. **25-7-5414**

1205 CR 5512

(G) STREET AND NUMBER, CITY AND STATE **1205 CR 5512**

DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? YES NO

If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 13

NAME	PAST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
8 (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA OR (B) AS A NATIVE OF AMERICA, SAHARA (C) DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?	X		10 (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT?		X
9 ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in Item 13	X		(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?		X
10 DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PERIOD OF OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give details in Item 13	X		11 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
11 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED OR FILED BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AGENCIES FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCE? DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$25 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED. If your answer is "Yes," give in Item 13 for each case, (1) approximate date, (2) charge, (3) place, (4) action taken.	X		B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
12 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EMPLOYMENT OR ACCEPTING THIS SERVICE APPOINTMENT? If your answer is "Yes," give dates of and reasons for such bar in Item 13	X		C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS? If your answer to A, B or C is "Yes," give details in Item 13 as to date, as you can remember, including the name and address of employer, approximate date, and reasons in each case.		X

13 OTHER FOR (G) (A) (B) (C) (D) (E) (F) (G) (H) (I) (J) (K) (L) (M) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z) (AA) (AB) (AC) (AD) (AE) (AF) (AG) (AH) (AI) (AJ) (AK) (AL) (AM) (AN) (AO) (AP) (AQ) (AR) (AS) (AT) (AU) (AV) (AW) (AX) (AY) (AZ) (BA) (BB) (BC) (BD) (BE) (BF) (BG) (BH) (BI) (BJ) (BK) (BL) (BM) (BN) (BO) (BP) (BQ) (BR) (BS) (BT) (BU) (BV) (BW) (BX) (BY) (BZ) (CA) (CB) (CC) (CD) (CE) (CF) (CG) (CH) (CI) (CJ) (CK) (CL) (CM) (CN) (CO) (CP) (CQ) (CR) (CS) (CT) (CU) (CV) (CW) (CX) (CY) (CZ) (DA) (DB) (DC) (DD) (DE) (DF) (DG) (DH) (DI) (DJ) (DK) (DL) (DM) (DN) (DO) (DP) (DQ) (DR) (DS) (DT) (DU) (DV) (DW) (DX) (DY) (DZ) (EA) (EB) (EC) (ED) (EE) (EF) (EG) (EH) (EI) (EJ) (EK) (EL) (EM) (EN) (EO) (EP) (EQ) (ER) (ES) (ET) (EU) (EV) (EW) (EX) (EY) (EZ) (FA) (FB) (FC) (FD) (FE) (FF) (FG) (FH) (FI) (FJ) (FK) (FL) (FM) (FN) (FO) (FP) (FQ) (FR) (FS) (FT) (FU) (FV) (FW) (FX) (FY) (FZ) (GA) (GB) (GC) (GD) (GE) (GF) (GG) (GH) (GI) (GJ) (GK) (GL) (GM) (GN) (GO) (GP) (GQ) (GR) (GS) (GT) (GU) (GV) (GW) (GX) (GY) (GZ) (HA) (HB) (HC) (HD) (HE) (HF) (HG) (HH) (HI) (HJ) (HK) (HL) (HM) (HN) (HO) (HP) (HQ) (HR) (HS) (HT) (HU) (HV) (HW) (HX) (HY) (HZ) (IA) (IB) (IC) (ID) (IE) (IF) (IG) (IH) (II) (IJ) (IK) (IL) (IM) (IN) (IO) (IP) (IQ) (IR) (IS) (IT) (IU) (IV) (IW) (IX) (IY) (IZ) (JA) (JB) (JC) (JD) (JE) (JF) (JG) (JH) (JI) (JJ) (JK) (JL) (JM) (JN) (JO) (JP) (JQ) (JR) (JS) (JT) (JU) (JV) (JW) (JX) (JY) (JZ) (KA) (KB) (KC) (KD) (KE) (KF) (KG) (KH) (KI) (KJ) (KK) (KL) (KM) (KN) (KO) (KP) (KQ) (KR) (KS) (KT) (KU) (KV) (KW) (KX) (KY) (KZ) (LA) (LB) (LC) (LD) (LE) (LF) (LG) (LH) (LI) (LJ) (LK) (LL) (LM) (LN) (LO) (LP) (LQ) (LR) (LS) (LT) (LU) (LV) (LW) (LX) (LY) (LZ) (MA) (MB) (MC) (MD) (ME) (MF) (MG) (MH) (MI) (MJ) (MK) (ML) (MN) (MO) (MP) (MQ) (MR) (MS) (MT) (MU) (MV) (MW) (MX) (MY) (MZ) (NA) (NB) (NC) (ND) (NE) (NF) (NG) (NH) (NI) (NJ) (NK) (NL) (NM) (NN) (NO) (NP) (NQ) (NR) (NS) (NT) (NU) (NV) (NW) (NX) (NY) (NZ) (OA) (OB) (OC) (OD) (OE) (OF) (OG) (OH) (OI) (OJ) (OK) (OL) (OM) (ON) (OO) (OP) (OQ) (OR) (OS) (OT) (OU) (OV) (OW) (OX) (OY) (OZ) (PA) (PB) (PC) (PD) (PE) (PF) (PG) (PH) (PI) (PJ) (PK) (PL) (PM) (PN) (PO) (PP) (PQ) (PR) (PS) (PT) (PU) (PV) (PW) (PX) (PY) (PZ) (QA) (QB) (QC) (QD) (QE) (QF) (QG) (QH) (QI) (QJ) (QK) (QL) (QM) (QN) (QO) (QP) (QQ) (QR) (QS) (QT) (QU) (QV) (QW) (QX) (QY) (QZ) (RA) (RB) (RC) (RD) (RE) (RF) (RG) (RH) (RI) (RJ) (RK) (RL) (RM) (RN) (RO) (RP) (RQ) (RR) (RS) (RT) (RU) (RV) (RW) (RX) (RY) (RZ) (SA) (SB) (SC) (SD) (SE) (SF) (SG) (SH) (SI) (SJ) (SK) (SL) (SM) (SN) (SO) (SP) (SQ) (SR) (SS) (ST) (SU) (SV) (SW) (SX) (SY) (SZ) (TA) (TB) (TC) (TD) (TE) (TF) (TG) (TH) (TI) (TJ) (TK) (TL) (TM) (TN) (TO) (TP) (TQ) (TR) (TS) (TT) (TU) (TV) (TW) (TX) (TY) (TZ) (UA) (UB) (UC) (UD) (UE) (UF) (UG) (UH) (UI) (UJ) (UK) (UL) (UM) (UN) (UO) (UP) (UQ) (UR) (US) (UT) (UU) (UV) (UW) (UX) (UY) (UZ) (VA) (VB) (VC) (VD) (VE) (VF) (VG) (VH) (VI) (VJ) (VK) (VL) (VM) (VN) (VO) (VP) (VQ) (VR) (VS) (VT) (VU) (VV) (VW) (VX) (VY) (VZ) (WA) (WB) (WC) (WD) (WE) (WF) (WG) (WH) (WI) (WJ) (WK) (WL) (WM) (WN) (WO) (WP) (WQ) (WR) (WS) (WT) (WU) (WV) (WW) (WX) (WY) (WZ) (XA) (XB) (XC) (XD) (XE) (XF) (XG) (XH) (XI) (XJ) (XK) (XL) (XM) (XN) (XO) (XP) (XQ) (XR) (XS) (XT) (XU) (XV) (XW) (XX) (XY) (XZ) (YA) (YB) (YC) (YD) (YE) (YF) (YG) (YH) (YI) (YJ) (YK) (YL) (YM) (YN) (YO) (YP) (YQ) (YR) (YS) (YT) (YU) (YV) (YW) (YX) (YZ) (ZA) (ZB) (ZC) (ZD) (ZE) (ZF) (ZG) (ZH) (ZI) (ZJ) (ZK) (ZL) (ZM) (ZN) (ZO) (ZP) (ZQ) (ZR) (ZS) (ZT) (ZU) (ZV) (ZW) (ZX) (ZY) (ZZ)

INSTRUCTIONS TO APPLICANTS (SEE ITEM 13) You must determine that the appointment award is in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment. The form should be checked for the building of office, presence, any record of record of charges or arrest, age, citizenship, and name. Also, to establish the identity of the appointee, you should determine that (1) his signature and handwriting agree with the application and all other pertinent papers and (2) the appointee agrees to the medical certificate.

STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE
 AND DETERMINATION OF COMPETITIVE STATUS

IMPORTANT: The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I.—EMPLOYEE'S STATEMENT

PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial) **FLORES, DANIEL** 2. DATE OF BIRTH **August 4, 1935**

9. RETENTION GROUP
 10. A. CIVIL STATUS YES NO
 B. TYPE OF PRESENT APPOINTMENT

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.)

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF RETURN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	

11. SERVICE

YEAR	MONTH	DAY

4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE"

BRANCH	FROM—			TO—			DISCHARGE (Hon or dishon?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
UNITED STATES MARINE CORPS.	1957	JULY	25	1961	JULY	25	HONORABLE

12. TOTAL SERVICE

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? YES NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.

TYPE IF KNOWN (LWOP, Full, Susp, AWOL, Mes Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

13. NONCREDITABLE SERVICE (Leave purposes only)

14. NONCREDITABLE SERVICE (RIF purposes only)

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? YES NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)

15. REEMPLOYMENT RIGHTS YES NO

16. RETENTION RIGHTS YES NO

7. ARE YOU
 A. THE WIFE OF A DISABLED VETERAN? YES NO
 B. THE SISTER OF A DECEASED OR DISABLED VETERAN? YES NO
 C. THE UNREMARKED SPOUSE OF A VETERAN? YES NO

17. EXPIRATION DATE OF RETENTION RIGHTS

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

12 March 1962
(DATE)

Daniel Flores
(SIGNATURE)

Subscribed and sworn to before me on this 12th day of Mar 1962 at Washington, D. C.
(LOCATION) (DATE) (CITY)

SEAL

Shirley L. Smith
(SIGNATURE)

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

INSTRUCTIONS: To do this form on the personnel side of the employee's official personnel folder immediately before or after the personnel office interview.

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(When Filled In)

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave of government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. The original of this form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) FLORES	(First) DANIEL	(Middle) CR	SOCIAL SECURITY NUMBER
--	--------------------------	-----------------------	------------------------

1. RESIDENCE DATA	
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED WASH DC	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE WASH DC	HOME LEAVE RESIDENCE

2. MARITAL STATUS (Check one)					
<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED	<input type="checkbox"/> ANNULLED
IF MARRIED, PLACE OF MARRIAGE LIMA, PERU, SOUTH AMERICA				DATE OF MARRIAGE DEC 14, 1961	
IF DIVORCED, PLACE OF DIVORCE DECREE				DATE OF DECREE	
IF WIDOWED, PLACE SPOUSE DIED				DATE SPOUSE DIED	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)					

3. MEMBERS OF FAMILY		
NAME(S) OF CHILDREN	ADDRESS (No., Street, City, Zone, State) N.W.	TELEPHONE NO. 265-8322
NAME OF FATHER (Or male guardian)	ADDRESS SAN JUAN DE LOS RIOS	TELEPHONE NO.
NAME OF MOTHER (Or female guardian)	ADDRESS SAN JUAN DE LOS RIOS	TELEPHONE NO.

IF YOU HAVE BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY	
NAME (Mr., Mrs., Miss) FLORES	RELATIONSHIP WIFE
HOME ADDRESS (No., Street, City, Zone, State) WASH DC	HOME TELEPHONE NUMBER 265-5322
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE WASHINGTON DC	BUSINESS TELEPHONE & EXTENSION RE 7-5444

IS THE INDIVIDUAL NAMED ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 5.)	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.

CURRENT RESIDENCE AND DEPENDENCY REPORT

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(When Filled In)

4. VOLUNTARY ENTRIES

Experience in the handling of ~~emergency~~ emergencies has shown that the absence of certain personal data often delays and compli-
cates 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 AC-
COUNTS ARE CARRIED.

UNION TRUST Co., WASH., D.C. - DANIEL CA [] FLORES
BANK OF CALIFORNIA, PORTLAND ORE, DANIEL CA [] FLORES

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

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 possess the power of attorney?)

5. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

[Empty space for additional data]

SIGNED AT: Washington DC DATE: March 12 1962 SIGNATURE: Daniel Flores

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INTERNAL USE ONLY

UNCLASSIFIED

REQUEST FOR MEDICAL EVALUATION

12 Sept 77

APPLICANT HAS APPLICANT PREVIOUSLY BEEN SEEN BY OMS YES NO

1 Flores, Daniel

4 Aug 35

13 All

BDO/LA

5270

Ops Officer

13 DEPENDENT NAME (Last, FI)	14 SOC SEC NO	15 DOB (MM/YY)	16 SEX	17 RELATIONSHIP	18 DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)
				wife	yes
				dau	yes

20 REQUESTED ACTION (see also Form 104-100-100)

APPLICANT	PRE EMPLOYMENT	STATION	EOD	STD STATUS (M/F)	NO OF DEPENDENTS TO ACCOMPANY (M/F)
	<input checked="" type="checkbox"/> US PCS			14 Oct 77	2
ASSIGNMENTS	<input type="checkbox"/> US TDY			Ops Officer	
	<input type="checkbox"/> US RETURNEE				
	<input type="checkbox"/> US TOY STANDBY				
	<input type="checkbox"/> US PLANNING				
SEPARATION	<input type="checkbox"/> RETIREMENT				
ROUTINE	<input type="checkbox"/> REGULAR ANNUAL				
	<input type="checkbox"/> EXECUTIVE ANNUAL				

21 COMMENTS
Assignment to [redacted] has been cancelled, Subject is now being considered for [redacted]

22 REQUESTING OFFICER'S OFFICE DIV: DIX/LA/PERS
23 ROOM/BLOG: 31313 JAG
24 EXTENSION: 5270
25 SIGNATURE OF REQUESTING OFFICER: [redacted]

FOR APPLICANTS				FOR OMS USE ONLY	
APPROVE PROCESSING FOR EOD				COMMENTS	
HOLD PENDING RECEIPT OF ADDITIONAL MEDICAL INFORMATION (see also Form 104-100-100)					
REQUEST PRE EMP MEDICAL EVALUATION					
OTHER (see instructions)					
DATE: 12 Sept 77				OMS SIGNATURE: [redacted]	
FOR OTHER ACTIONS				DATE: 26 OCT 1977	
REQUESTED ACTION	QUAL	COND QUAL	DEFER	DISQUAL	

QUALIFIED FOR OMS. OMS MUST BE EVALUATED PRIOR TO FUTURE OMS.

UNCLASSIFIED INTERNAL USE ONLY CONFIDENTIAL SECRET

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST							
2. NAME (Last, First, Middle) Flores, Daniel DOB: 4 August 1935		3. POSITION TITLE Instructor	4. GRADE GS-12						
5. OFFICE DIVISION BRANCH OTR/FTD/OTB		6. EMPLOYEE'S EXT. 5101							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HDQS/TDY							
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT							
<input checked="" type="checkbox"/> TDY STANDBY		<table border="1"><tr><td>ETD</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCB</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr></table>		ETD	STATION	TDY OR PCB	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED
ETD									
STATION									
TDY OR PCB									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED									
<input type="checkbox"/> SPECIAL TRAINING									
<input type="checkbox"/> ANNUAL									
<input type="checkbox"/> RETURN TO DUTY									
<input type="checkbox"/> FITNESS FOR DUTY									
<input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> RETURN FROM OVERSEAS							
<input type="checkbox"/> YES		9. REQUESTING OFFICER							
		SIGNATURE <table border="1"><tr><td> </td></tr></table>							
<input type="checkbox"/> NO		ROOM NO. & BUILDING 6057 Hqs	EXT. 5101						
10. COMMENTS Destination: World-Wide									
11. REPORT OF EVALUATION Qualified for TDY Standby until 1 August 1978.									
DATE 31 August 1976		SIGNATURE FOR CHIEF OF MEDICAL STAFF <table border="1"><tr><td> </td></tr></table> ONS/PEO							

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST							
		18 June 1976							
2. NAME (Last, First, Middle)	DOB	3. POSITION TITLE	4. GRADE						
Flores, Daniel	1935	Instructor	GS-13						
5. OFFICE DIVISION BRANCH		6. EMPLOYEE'S EXT.							
OTR/FTD/OTB		5191							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/TDY	<input type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1"><tr><td>ETA</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCS</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr></table>		ETA	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED
ETA									
STATION									
TDY OR PCS									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED									
<input type="checkbox"/> ENTRANCE ON DUTY	<input type="checkbox"/> RETURN FROM OVERSEAS								
<input checked="" type="checkbox"/> TDY STANDBY	<table border="1"><tr><td>ETA</td></tr><tr><td>STATION</td></tr><tr><td>NO. OF DEP.'S</td></tr></table>	ETA	STATION	NO. OF DEP.'S					
ETA									
STATION									
NO. OF DEP.'S									
<input type="checkbox"/> SPECIAL TRAINING									
<input type="checkbox"/> ANNUAL									
<input type="checkbox"/> RETURN TO DUTY									
<input type="checkbox"/> FITNESS FOR DUTY									
<input type="checkbox"/> MEDICAL RETIREMENT									
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER							
<input type="checkbox"/> YES	<input type="checkbox"/> NO	[Signature]							
		ROOM NO. & BUILDING	EXT.						
		6057 Hqs.	5191						
10. COMMENTS									
11. REPORT OF EVALUATION									
Qualified for TDY Standby until 1 August 1978.									
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF							
31 August 1976		[Signature] OMS/PEO							

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) Flores, Daniel (NMN) 4-35		3. POSITION TITLE Ops Officer	4. GRADE GS-12
5. OFFICE DIVISION BRANCH DDO/LA/COG		6. EMPLOYEE'S EXT. 7265	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQS/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input checked="" type="checkbox"/> TDY STANDBY		ETD	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		TDY OR PCS	
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER	
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
<input type="checkbox"/> RETURN FROM OVERSEAS		ETA	
		STATION	
		NO. OF DEP.'S	
8. OVERSEAS PLANNING EVALUATIONS (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES		SIGNATURE	
<input type="checkbox"/> NO		[Signature] LA/Trng	
		ROOM NO. & BUILDING	
		3D5317 Hqs	
		EXT.	
		7431	

10. COMMENTS

11. REPORT OF EVALUATION
Disposition deferred until subject fulfills medical requirements.

DATE: **1 April 1975** SIGNATURE FOR CHIEF OF MEDICAL STAFF: **[Signature] OMS/Registrar**

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 Aug 1935	3. GRADE GS-10
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WIL		5. PRESENT POSITION 0376	6. EMPLOYEE EXTENSION 7431
7. PROPOSED STATION [Redacted]		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/0636/GS-13	
9. TYPE OF COVER AT NEW STATION [Redacted]	10. ESTIMATED DATE OF DEPARTURE Sept 71	11. NO. OF DEPENDENTS TO ACCOMPANY two	
12. COMMENTS Vice: [Redacted] Please schedule appointments week of 31 May 1971/ Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station. [Redacted]			
13. DATE OF REQUEST 11 Mar 71	OFFICIAL [Redacted]	15. ROOM NUMBER AND BUILDING 3D 5309 Hqs	16. EXTENSION 7431
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION 15 JUN 1971 QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS [Redacted] (Chairman, Overseas Candidate Review Panel)			
REQUEST FOR PCS OVERSEAS EVALUATION			

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST: 11 Mar 71
2. NAME (Last, First, Middle) Flores, Daniel (Dependents of)	3. POSITION TITLE Ops Officer	4. GRADE GS-10
5. OFFICE DIVISION BRANCH DDP/WH	6. EMPLOYEE'S EXT. 7431	

7. PURPOSE OF EVALUATION										
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HQDS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1"><tr><td>ETD September 1971</td></tr><tr><td>STATION []</td></tr><tr><td>TDY OR PCS PCS</td></tr><tr><td>TYPE OF COVER []</td></tr><tr><td>NO OF DEPENDENTS TO ACCOMPANY Two</td></tr><tr><td>NO OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr></table> <input type="checkbox"/> RETURN FROM OVERSEAS <table border="1"><tr><td>ETA</td></tr><tr><td>STATION</td></tr><tr><td>NO OF DEP.'S</td></tr></table>	ETD September 1971	STATION []	TDY OR PCS PCS	TYPE OF COVER []	NO OF DEPENDENTS TO ACCOMPANY Two	NO OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	ETA	STATION	NO OF DEP.'S
ETD September 1971										
STATION []										
TDY OR PCS PCS										
TYPE OF COVER []										
NO OF DEPENDENTS TO ACCOMPANY Two										
NO OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED										
ETA										
STATION										
NO OF DEP.'S										

8. OVERSEAS PLANNING EVALUATION (One Mark must be checked) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	9. REQUESTING OFFICER SIGNATURE [] ROOM NO & BUILDING 3D 5300 Hqs EXT. 7431
--	--

10. COMMENTS [] wife [] dau [] Please schedule appointments week of 31 May 1971.	
11. REPORT OF EVALUATION [] Quarrelled with GS PCS []	16 8 7R SIGNATURE FOR CHIEF OF MEDICAL STAFF

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) Flores, Daniel (Dependents of)		11 Mar 71	
3. POSITION TITLE Ops Officer		4. GRADE OS-10	
5. OFFICE DIVISION BRANCH DDP/WL		6. EMPLOYEE'S EXT. 7431	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/IDY	<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT	
<input type="checkbox"/> ENTRANCE ON DUTY	ETD September 1971		
<input type="checkbox"/> TDY STANDBY	STATION		
<input type="checkbox"/> SPECIAL TRAINING	TDY OR PCS PCS		
<input type="checkbox"/> ANNUAL	TYPE OF COVER		
<input type="checkbox"/> RETURN TO DUTY	<input type="checkbox"/> RETURN FROM OVERSEAS		
<input type="checkbox"/> FITNESS FOR DUTY	ETA		
<input type="checkbox"/> MEDICAL RETIREMENT	STATION		
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input checked="" type="checkbox"/> YES	SIGNATURE		
<input type="checkbox"/> NO	ROOM NO. & BUILDING 3D 5300 Hqs		
		EXT. 7431	

10. COMMENTS		
<input type="checkbox"/>	wife	<input type="checkbox"/>
<input type="checkbox"/>	dau	<input type="checkbox"/>
Please schedule appointments week of 31 May 1971.		
11. REPORT OF EVALUATION		16 0 7R
<input type="checkbox"/>		
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF	

SECRET

1. PROPOSED STATION (Title) <input type="text"/>		2. FAMILY STATUS	3. GRADE
4. OFFICE, DIVISION, BRANCH (OF OVERSEAS STATION AND DISTRICT) <input type="text"/>		5. PROPOSED POSITION (Title, Number, Grade)	6. EXTENSION
7. PROPOSED STATION <input type="text"/>		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/0030/CS-13	
9. TYPE OF COVER AT NEW STATION <input type="text"/>		10. ESTIMATED DATE OF DEPARTURE	11. NO. OF DEPENDENTS TO ACCOMPANY
12. COMMENTS Vico: <input type="text"/> Please schedule appointments week of 31 May 1971/ Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.			
13. DATE OF REQUEST 11 Mar 71	14. SIGNATURE OF REQUESTING OFFICIAL <input type="text"/>	15. ROOM NUMBER AND BUILDING, G. EXTENSION 3D 5309 Bldg 7451	
17. OFFERED BY Qualified Overseas POB 11 June 1971 <input type="text"/> OMS/pro			
16. OFFICE OF SECURITY DISPOSITION			
18. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION			
REQUEST FOR PCS OVERSEAS EVALUATION			

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 August 1935	3. GRADE GS-08
4. OFFICE DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WH/4		5. PRESENT POSITION Ops Officer	6. EMPLOYEE EXTENSION 6815
7. PROPOSED STATION <input type="text"/>		8. PROPOSED POSITION (Title, Number, Grade) Ops Off 0376 GS-09	
9. TYPE OF COVER AT NEW STATION <input type="text"/>		10. ESTIMATED DATE OF DEPARTURE o/a 27 April 69	11. NO. OF DEPENDENTS TO ACCOMPANY 1
12. COMMENTS <p align="center">VICE <input type="text"/></p> <p align="center"><input type="text"/></p> <p align="center">89'B ATTACHED.</p> <p align="right"><i>[Signature]</i> 10 MAR 1969</p>			
13. DATE OF REQUEST 6 March 1969	14. <input type="text"/>	15. ROOM NUMBER AND BUILDING 3D5309 Hqs.	16. EXTENSION 6815
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION 25 MAR 1969 QUALIFIED <input type="text"/> AT CHAIRMAN, OVERSEAS <input type="text"/>			
REQUEST FOR PCS OVERSEAS EVALUATION			

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 6 March 1969
2. NAME (Last, First, Middle) Flores, Daniel (dependent)	3. POSITION TITLE Ops Officer	4. GRADE GS-08
5. OFFICE, DIVISION, BRANCH DDP/WII/4	6. EMPLOYEE'S EXT. 6815	

7. PURPOSE OF EVALUATION	
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> TDY
<input type="checkbox"/> ENTRANCE ON DUTY	<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT
<input type="checkbox"/> TDY STANDBY	PTD o/a 27 April 1969
<input type="checkbox"/> SPECIAL TRAINING	STATION
<input type="checkbox"/> ANNUAL	TDY OR PCS PCS
<input type="checkbox"/> RETURN TO DUTY	TYPE OF COVER
<input type="checkbox"/> FITNESS FOR DUTY	NO. OF DEPENDENTS TO ACCOMPANY 1
<input type="checkbox"/> MEDICAL RETIREMENT	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (OF 50) ATTACHED 1
	<input type="checkbox"/> RETURN FROM OVERSEAS
	LTA
	STATION
	NO. OF DEP.'S

8. OVERSEAS PLANNING EVALUATION (One block must be checked)	9. REQUESTING OFFICER	
<input checked="" type="checkbox"/> YES	SIGNATURE	WII/Personnel
<input type="checkbox"/> NO	ROOM NO. & BUILDING 3D5309 Hqs.	

10. COMMENTS Wife - [] - []	
11. REPORT SUBJECT QUALIFIED FOR PROPOSED OS PCS	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		7. DATE OF BIRTH 4 August 1935		3. GRADE GS-09	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WI/4		5. PRESENT POSITION Ops Officer		6. EMPLOYEE EXTENSION 6815	
7. PROPOSED STATION <input type="text"/>		8. PROPOSED POSITION (Title, Number, Grade) Ops Off 0376 GS-09			
9. TYPE OF COVER AT NEW STATION <input type="text"/>		10. ESTIMATED DATE OF DEPARTURE o/a 27 April 69		11. NO. OF DEPENDENTS TO ACCOMPANY 1	
12. COMMENTS VICE <input type="text"/> <input type="text"/> 83's ATTACHED.					
13. DATE OF REQUEST 6 March 1969		14. SIGNATURE OF REQUESTING OFFICIAL <input type="text"/>		15. ROOM NUMBER AND BUILDING 3D6309 Hqs.	16. EXTENSION 6815
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION MEDICALLY QUALIFIED FOR PROPOSED OS PCS. <input type="text"/> 13 21 69					
REQUEST FOR PCS OVERSEAS EVALUATION					

SECRET
(When Filled In)

70

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 6 October 1961										
2. NAME (Last, First, Middle) FIORIS, DANIEL		3. POSITION TITLE File Clerk	4. GRADE GS-04									
5. OFFICE, DIVISION, BRANCH DDP/OPBR		6. EMPLOYEE'S EXT.										
7. PURPOSE OF EVALUATION												
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> XXXXXXXXXXXXXXXXXX <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1"> <tr><td>ETD</td></tr> <tr><td>STATION</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS <table border="1"> <tr><td>EIA</td></tr> <tr><td>STATION</td></tr> <tr><td>NO. OF DEPTS</td></tr> </table>		ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	EIA	STATION	NO. OF DEPTS
ETD												
STATION												
TDY OR PCS												
TYPE OF COVER												
NO. OF DEPENDENTS TO ACCOMPANY												
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED												
EIA												
STATION												
NO. OF DEPTS												
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER										
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE Chirley Wells ROOM NO. & BUILDING BOL 1016 16th Street										
		EXT. 2781										

10. REPORT OF EVALUATION	
101328 2MARI	
12 NOV 61 19 23 74:01	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF
12 NOV 61	OFFICE OF THE CHIEF OF MEDICAL STAFF

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REQUEST FOR PRE-EMPLOYMENT MEDICAL EVALUATION		1. DATE
2. NAME (Last) (First) (Middle) FLORES, DANIEL		3. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
4. ORGANIZATIONAL ASSIGNMENT DDP/OPSER	5. POSITION, TITLE AND GRADE File Clerk GS-C4	
6. MEDICAL STAFF REQUESTED TO CHECK DESIRED ACTION BELOW, RETURN ORIGINAL COPY TO OFFICE OF PERSONNEL.		
<input type="checkbox"/> Approve Processing For E. O. D.	<input checked="" type="checkbox"/> Hold Pending Receipt of Additional Medical Information (Form Letters Attached)	<input checked="" type="checkbox"/> Request Pre-Employment Medical Examination
7. REMARKS 259 Forwarded as of 6 October 1961		
SIGNATURE FOR MEDICAL STAFF		

FORM NO. 570
1 MAY 55

Obsolete Previous Editions

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File

QUALIFICATIONS UPDATE

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

Note that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 58-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 036130	NAME (Last-First-Middle) Flores, Daniel	DATE OF BIRTH 08/04/35
-------------------------	--	---------------------------

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------	--------------------------------	--------------------------	--

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/STR. HRS. (Specify)
	MAJOR	MINOR				
1. American University, Washington, DC	Political Science		1962-1967	B.A.	1967	120 hrs
2.						

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

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:				
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)				
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)			
5. OCCUPATION	6. PRESENT EMPLOYER			
7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT RECORD
1	<input type="checkbox"/> ADD				
2	<input type="checkbox"/> DELETE				
3	<input type="checkbox"/> ADD				
4	<input type="checkbox"/> DELETE				

FORM 444 8-66

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(When Filled In)

SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK LIST		
				TRAVEL	STUDY	WORK ASSIGNMENT
			Jul 30 '58	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION VI - TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (M/M)	2. SHORTHAND (M/M)
3. INDICATE SHORTHAND SYSTEM USED - CHECK ALL APPROPRIATE ITEM	
<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY:	

SECTION VII - SPECIAL QUALIFICATIONS
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED

SECTION VIII - MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION
<input type="checkbox"/> YES <input type="checkbox"/> NO	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS	
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK
	3. EXPIRATION DATE OF CURRENT OBLIGATION
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED	
5. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED

MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)			
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	
			<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED

SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS			
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO

SECTION X - EMPLOYERS

21 June 1961

SECRET

Name: Daniel, Daniel
 Date of Birth: 4-8-35
 Place of Birth: San Marco, Texas

Date & Place of Birth: 4-8-35, San Marco, Texas
 Non-degree Wash. Sem.

HS
 P
 F
 X

THE AMERICAN COLLEGE
 WASHINGTON, DISTRICT OF COLUMBIA

ADMISSION RECORD: Full Standing

PREVIOUS RECORD: San Marcos High School, Texas 5/55

TOOLS OF RESEARCH PASSED:

COMPREHENSIVE EXAMINATIONS PASSED:

CATALOG NUMBER	TITLE OF COURSE	SEM.	GRADE	CREDIT
	NEW STUDENT NUMBER			
10306	INTRO ACCOUNTING I	3	C	3
37458	ADV SPANISH II	3	A	3
53511	MODERN POLIT THEORY	3	A	3
	SUMMER 1966			
	COLLEGE OF ARTS & SCIENCES			
29531	RUSSIA SINCE 1917	3	C	3
37550	ICHRN ADV SPAN II	3	B	3
47376	PROB RELIG THOUGHT	3	C	3
	FALL 1966			
	COLLEGE OF ARTS & SCIENCES			
33450	CONTEMP INT POLIT	3	B	3
33584	LATIN AMER SEM I	9	A	27
37550	GOLDEN AGE NOVEL	3	A	3
53548	GOV & POL LAT AMER	3	C	3
	SPRING 1967			
	COLLEGE OF ARTS & SCIENCES			
33440	INTERNATL LAW & ORGANIZA	3	B	3
33529	LAT AMER INTERNATL RELA	3	A	3
37354	MODERN SPANISH DRAMA	3	B	3
37551	SPANISH 19TH C NOVEL	3	B	3
53150	U S POLITICAL SYSTEM I	3	C	3

COURSE NUMBER	TITLE OF COURSE	SEM.	GRADE	CREDIT
	FALL 62			
1100	INTRO ECONOMICS I	3	C	3
1100	ENGLISH COMP I	3	C	3
1100	BACKGROUNDS CIV I	3	D	3
1100	INTRO WORLD POL	3	C	3
	SPR 63			
1100	INTRO ECONOMICS II	3	D	3
1100	AMERICAN GOVT NATL	3	D	3
2101	ENGLISH COMP II	3	F	3
2101	BACKGROUNDS CIV II	3	C	3
	FALL 1963			
3101	COMP & READING II	3	B	3
3102	GEOM ANAL INCOME	3	F	3
	SPRING 1964			
3101	INTRO PHILOSOPHY	3	C	3
3101	WEST GOVT ST & SOC	3	F	3
	SPRING 1965			
3101	GENERAL BIOLOGY	3	C	3
3102	INTRO POL INT POWRS	3	B	3
3101	WEST GOVT PHILOSOPHY	3	C	3
3102	STATE GOVERNMENT	3	B	3
	SUMMER 1965			
3101	LANG SCIENCES	3	B	3
3102	INT & MOD INSTANT (Course cancelled by Univ.)			
	FALL 1965			
3101	INTERNATL NUMBER 460-48-6230			
3101	INTRO LATIN AMER	3	A	3
3101	CONTEMP POLIT	3	C	3
3101	CONTEMP GOVTS	3	C	3
3101	GOV & POL INT AMER	3	C	3
3101	GENERAL PSYCHOLOGY	3	D	3
	SPRING 1966			
	COLLEGE OF ARTS & SCIENCES			
3101	INTRO POL INT POWRS	3	A	3
3101	INTRO POL INT POWRS	3	A	3

TERMINATION: Summer
 Dates: Spring 1966, Fall 1966.

REGISTRATION FEE: \$10.00

THE AMERICAN COLLEGE
 WASHINGTON, DISTRICT OF COLUMBIA

JUL 12 1967

John E. Brown

SECRET

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FORM

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llc

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

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

SECTION I

BIOGRAPHIC AND POSITION DATA

1. EMP. SER. NO. 086130	2. NAME (Last, First, Middle) FLORES DANIEL	3. SEX	4. DATE OF BIRTH 08/04/35	5. SCHEDULE GRADE STEP GS-05-04
6. SO D	7. POSITION TITLE INTELLIGENCE CLERK	8. OFFICE OF ASSIGNMENT WH	9. LOCATION (Agency, City) WASH., D.C.	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	DATE SOLA	FROM	TO
NO OVERSEAS SERVICE			

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			

SECRET

FORM 100-101 (Rev. 1-60)

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When Filled In

SECTION III						
EDUCATION (Cont'd)						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, County)		YEARS ATTENDED FROM	TO	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM / QTR (MOS. (Specify))
	MAJOR	MINOR				
1 The American University Washington, D.C.	Pol.Sci.	Spanish Literature	1962 - 1967	A degree will be conferred in July 1967.		11 1/2 Sem. hrs.
2						
3						
4						
5 IF A GRADUATE DEGREE HAS BEEN LISTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
4						
5						
AGENCY SPONSORED EDUCATION						
Specify which, if any, of the education shown in Section III was Agency sponsored						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
4						
5						

SECRET

(When Filled In)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			CHECK IF WORK ASSIGNMENT
				RESEARCH	TRAVEL	STUDY	
Bolivia	Economic, topographic, cultural and political.	Nov. 1959- Jan. 1960	American Univ. 1962-1967	X		X	
Peru	Topographic, cultural, and political.	Jan. 1960- Nov. 1960	American Univ. 1962-1967	X		X	
Latin America in general.	Economic, topographic, cultural, and political.		American Univ. 1962-1967			X	

SECTION V TYPING AND STENOGRAPHIC SKILLS

1. TYPING (WPM) 45 2. SHORTHAND (WPM) _____ 3. INDICATE SHORTHAND SYSTEM USED. CHECK IN APPROPRIATE ITEM

GREGG SPEEDWRITING STENOTYPE OTHER SPECIFY _____

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comparator, mimeograph, card punch, etc.)

SECTION VI SPECIAL QUALIFICATIONS

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, sending & receiving), OFFSET PRESS, TURRET LATHE, LDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.

3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PROF., ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? YES NO

4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number, if known)

5. FIRST LICENSE/CERTIFICATE year of issue _____

6. LATEST LICENSE/CERTIFICATE year of issue _____

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

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

9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

SECRET
- 3 -

SECRET
(When Filled In)

11-61		LANGUAGE DATA RECORD			
PART I-GENERAL					
1. NAME (Last-First-Middle) <i>FLORES, RONIEV</i>			2. DATE OF BIRTH (2-10) MONTH DAY YEAR <i>Aug. 1, 1950</i>		
3. LANGUAGE (31-33) <i>SPANISH 720</i>		4. TODAY'S DATE (34-37) MONTH DAY YEAR <i>MARCH 12 1962</i>		5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS					
SECTION A. Reading (40)					
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.					
<input checked="" type="radio"/> 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.					
<input checked="" type="radio"/> 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)					
<input checked="" type="radio"/> 1. MY PRONUNCIATION IS NATIVE.					
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.					
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.					
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.					
5. I HAVE NO SKILL IN PRONUNCIATION.					
CONTINUE ON REVERSE SIDE					

CONTINUATION OF PART II-LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

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

SECTION E.

Understanding (44)

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

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

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

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

PART IV-CERTIFICATION

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

DATE SIGNED

March 13, 1962

SIGNATURE

David E. Lee

1461

1471

DO NOT USE THIS SPACE		PERSONAL HISTORY STATEMENT		THIS DATE 8 SEP 69, 1961
INSTRUCTIONS				
<p>1. Answer all questions completely or check appropriate box. If question is not applicable, write "NA". Write "Unknown" only if you do not know the answer and it cannot be determined from personal records. Use blank space at end of form for extra details on any question for which you have insufficient space.</p> <p>2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.</p> <p>3. Consider your answers carefully. Your signature at the end of this form will certify to their correctness. Careful completion of all applicable questions will permit review of your qualifications to the best advantage.</p>				
SECTION I GENERAL PERSONAL AND PHYSICAL DATA				
1. FULL NAME (Last-First-Middle)		2. AGE		3. SEX
FLORES, Daniel		26		<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
4. HEIGHT	5. WEIGHT	6. COLOR OF EYES	7. COLOR OF HAIR	8. TYPE COMPLEXION
5' 8"	165 lbs.	Brown	Black	Dark
9. SCARS (Type and Location)				
Right cheek, one-half inch scar; left upper lip, one-quarter inch scar; both received playing football				
10. OTHER DISTINGUISHING PHYSICAL FEATURES				
None				
12. CURRENT ADDRESS (No., Street, City, Zone, State and Country)			13. PERMANENT ADDRESS (No., Street, City, Zone, State and Country) AND PHONE NO.	
Washington S, D. C.			- Washington O, D.C.	
14. CURRENT PHONE NO.	15. OFFICE PHONE NO. (EXT.)	16. LEGAL RESIDENCE (State, Territory or Country)		
265-8322	None	Washington, District of Columbia		
17. NICKNAMES		18. OTHER NAMES YOU HAVE USED		
Dan		None		
19. INDICATE CIRCUMSTANCES (including Length of Time) UNDER WHICH YOU HAVE EVER USED THESE NAMES				
Personal acquaintances - twelve years				
20. IF LEGAL CHANGE, GIVE PARTICULARS (Date and by what authority)				
NA				
SECTION II POSITION DATA				
1. INDICATE THE TYPE OF WORK OR POSITION FOR WHICH YOU ARE APPLYING				
Any phase of communications; administration; or personnel work.				
2. INDICATE THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT (You will not be considered for any position with a lower entrance salary).		3. DATE AVAILABLE FOR EMPLOYMENT		
\$ 4,250.00		Immediately		
4. INDICATE YOUR WILLINGNESS TO TRAVEL				
<input type="checkbox"/> OCCASIONALLY <input checked="" type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY <input type="checkbox"/> OTHER				
5. INDICATE YOUR WILLINGNESS TO ACCEPT ASSIGNMENT IN THE FOLLOWING LOCATIONS (Check (X) each item applicable)				
<input checked="" type="checkbox"/> WASHINGTON, D.C. <input type="checkbox"/> ANYWHERE IN U.S. <input type="checkbox"/> CERTAIN LOCATIONS ONLY (Specify)				
<input checked="" type="checkbox"/> OUTSIDE CONTINENTAL U.S.				
6. INDICATE WHAT RESERVATIONS YOU WOULD PLACE ON ASSIGNMENTS OUTSIDE THE WASHINGTON, D.C. AREA.				
I would be willing to travel within the United States provided said travel would not involve a permanent move whereby my legal residence would be changed. However, it is my wish to live overseas on a permanent basis.				



FORM 444 USE PREVIOUS EDITION.
11-68

JOY COONEY

SECTION IV CONTINUED FROM PAGE 3

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

NA

6. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
NA				

7. MILITARY TRAINING (FULL TIME DUTY IN SPECIALIZED SCHOOLS SUCH AS ORDNANCE, INTELLIGENCE, COMMUNICATIONS, ETC.)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
Marine Security Guard School - Handerson Hall Hq. Marine Corps, Washington 25, D.C.	Security Guard Training	9/22/58	10/31/58	(5 wks)

8. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE.

Weapons Training in Marine Corps.
Acted as partisan during cold weather training at Bridgeport, California (Pickle Meadows - USMC).

SECTION V FOREIGN LANGUAGE ABILITIES

1. LANGUAGE (List below each language in which you possess any degree of competence. Indicate competence in Read, Write or Speak by placing a check (X) in the appropriate boxes.)	2. COMPETENCE - IN ORDER LISTED R-Read, W-Write, S-Speak							3. HOW ACQUIRED					
	EQUI-VALENT TO NATIVE FLUENCY	FLUENT BUT NOT EQUI-VALENT	ADEQUATE FOR RESEARCH	ADEQUATE FOR TRAVEL	LIMITED KNOWLEDGE	NATIVE OF COUNTRY	PRO-LONGED RES-IDENCE	CONTACT WITH NATIVE SPEAKERS (etc.)	ACADEMIC STUDY (all levels)				
										R	W	S	R
Spanish	X	X	X								X		

2. IF YOU HAVE CHECKED "ACADEMIC STUDY" UNDER "HOW ACQ." INDICATE LENGTH AND INTENSIVENESS OF STUDY

NA

3. IF YOU HAVE CHECKED "FLUENT" FOR A LANGUAGE HAS THIS PERSON DIFFERENCES IN SPEECH AND GRAMMAR FROM ENGLISH? IF YES, DESCRIBE THEM

NA

4. DESCRIBE YOUR ABILITY TO UNDERSTAND AND SPEAK THE LANGUAGE OF THE PEOPLE OF THE COUNTRY IN WHICH YOU HAVE LIVED OR VISITED. IF YOU HAVE LIVED OR VISITED IN MORE THAN ONE COUNTRY, DESCRIBE EACH SEPARATELY.

Could act as literal interpreter at almost any level.

5. IF YOU HAVE CHECKED "LIMITED KNOWLEDGE" UNDER "HOW ACQ." INDICATE LENGTH AND INTENSIVENESS OF STUDY

SECTION VIII CONTINUED FROM PAGE 1

6. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY OF THE FOLLOWING PROFESSIONS OR SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, OR MEDICAL TECHNICIAN, ETC. YES NO

7. IF YOU HAVE ANSWERED "YES" TO ABOVE, INDICATE KIND OF LICENSE AND STATE (Include License/Registry Number, if known).

NA

8. FIRST LICENSE OR CERTIFICATE (Year of Issuance) LASTEST LICENSE OR CERT. (Year of Issuance)

NA NA

9. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not include unless requested). INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-Fiction or Scientific articles, Technical literature, Novels, Short Stories, Etc.).

None

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

None

11. LIST PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

Have spoken in my father's church and other churches approximately 150 times. Met and assisted public in Embassies during my tour of duty with the Marine Security Guard.

12. 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.

None

SECTION IX EMPLOYMENT HISTORY

NOTE: (LIST LAST POSITION FIRST.) Indicate chronological history of employment for last 15 years. Account for all periods including casual employment and all periods of unemployment. Give address and state what you did during periods of unemployment. List all civilian employment by a foreign government, regardless of date. In completing item 7, "Description of Duties" consider and describe carefully and describe meaningful, in a true statement.

1. INCLUSIVE DATES (From and To. Use "and")	3. NAME OF EMPLOYER (If a firm or agency)
From 1949 to 1953	Walburn's Drug Store
2. ADDRESS (No. street, City, State, Country)	
San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Drug Store	Mr. [Redacted]
6. TITLE OF JOB	7. SALARY OR BASIC PAY (If class grade or Federal term, so state)
Fountain Attendant	\$120.00 per month
8. DESCRIPTION OF DUTIES	
Employee at soda counter	
9. REASON FOR LEAVING	
To participate in school events (football).	

SECTION IX CONTINUED FROM PAGE 1

SECTION II - EMPLOYER KNOWLEDGE	
1. INCLUSIVE DATES (From and To - By No. and St.) July 1955 - June 1956	2. NAME OF EMPLOYING FIRM OR AGENCY Diamond Grocery Store
3. ADDRESS (No., Street, City, State, Country) South Guadalupe St., San Marcos, Texas	
4. KIND OF BUSINESS Grocery Store	5. NAME OF SUPERVISOR Mr. [REDACTED]
6. TITLE OF JOB Butcher	7. SALARY OR EARNINGS \$20.00 PER WEEK
8. DESCRIPTION OF DUTIES Slaughtering and preparing meat for sale as well as actual selling.	
9. REASONS FOR LEAVING To attend college?	
1. INCLUSIVE DATES (From and To - By No. and St.) May, 1955 - September, 1955	2. NAME OF EMPLOYING FIRM OR AGENCY San Marcos Baptist Academy
3. ADDRESS (No., Street, City, State, Country) San Marcos, Texas	
4. KIND OF BUSINESS Private School	5. NAME OF SUPERVISOR Mr. [REDACTED]
6. TITLE OF JOB Painter's Assistant	7. SALARY OR EARNINGS \$ 15.00 PER WEEK
8. DESCRIPTION OF DUTIES Painted dormitories in the Academy	
9. REASONS FOR LEAVING To attend school	
1. INCLUSIVE DATES (From and To - By No. and St.) September, 1955 - July, 1957	2. NAME OF EMPLOYING FIRM OR AGENCY Economy Department Stores
3. ADDRESS (No., Street, City, State, Country) San Marcos, Texas	
4. KIND OF BUSINESS Clothing Store	5. NAME OF SUPERVISOR Mr. [REDACTED]
6. TITLE OF JOB Sales Clerk	7. SALARY OR EARNINGS \$ 30.00 PER WEEK
8. DESCRIPTION OF DUTIES Assisted customers in selecting and buying goods.	
9. REASONS FOR LEAVING To join the Marine Corps.	
1. INCLUSIVE DATES (From and To - By No. and St.) July 25, 1957 - July 25, 1961	2. NAME OF EMPLOYING FIRM OR AGENCY United States Marine Corps
3. ADDRESS (No., Street, City, State, Country) Marine Corps Schools, Quantico, Virginia	
4. KIND OF BUSINESS Military	5. NAME OF SUPERVISOR [REDACTED]
6. TITLE OF JOB Marine Corps Museum Attendant	7. SALARY OR EARNINGS \$100.00 per month Sp4 (E-4)
8. DESCRIPTION OF DUTIES [REDACTED]	
9. REASONS FOR LEAVING [REDACTED]	

SECTION II (CONTINUED FROM PAGE 1)

<p>10 DESCRIPTION OF DUTIES</p> <p>Acted as guide to all visitors entering Museum, explaining Marine Corps history, etc. Also on several occasions acted as interpreter for visiting military personnel from Latin America.</p>		
<p>11 REASONS FOR LEAVING</p> <p>Discharged</p>		
<p>1 INCLUSIVE DATES (From and To, Mo, Do, and Yr.)</p> <p>July 29, 1961 - August 30, 1961</p>	<p>2 NAME OF EMPLOYER, BUSINESS OR AGENCY</p> <p>Ohio Valley Engineering Company</p>	
<p>3 ADDRESS (No., Street, City, State, Country)</p> <p>3. Capital and I Streets, S. W., Washington, D. C.</p>		
<p>4 KIND OF BUSINESS</p> <p>Construction</p>	<p>5 NAME OF SUPERVISOR</p> <p>Mr. [redacted]</p>	<p>6 TITLE OF JOB</p> <p>Laborer</p>
<p>7 SALARY OR EARNINGS</p> <p>2.17 per hour</p>	<p>8 CLASS. GRADE (If Federal Service)</p>	
<p>9 DESCRIPTION OF DUTIES</p> <p>Handyman for Company</p>		
<p>10 REASONS FOR LEAVING</p> <p>Temporary work while seeking permanent employment.</p>		
<p>1 INCLUSIVE DATES (From and To, Mo, Do, and Yr.)</p>	<p>2 NAME OF EMPLOYER, BUSINESS OR AGENCY</p>	
<p>3 ADDRESS (No., Street, City, State, Country)</p>		
<p>4 KIND OF BUSINESS</p>	<p>5 NAME OF SUPERVISOR</p>	<p>6 TITLE OF JOB</p>
<p>7 SALARY OR EARNINGS</p> <p>PER</p>	<p>8 CLASS. GRADE (If Federal Service)</p>	
<p>9 DESCRIPTION OF DUTIES</p>		
<p>10 REASONS FOR LEAVING</p>		
<p>11 IF PRIOR SERVICE WITH THE FEDERAL GOVERNMENT IS NOTED ABOVE, INDICATE THE NUMBER OF YEARS CREDITABLE TOWARD U.S. CIVIL SERVICE RETIREMENT, IF ANY</p> <p>7 1/2 years</p>		
<p>12 HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>13 HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN</p> <p>YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>IF YOUR ANSWER TO EITHER OR BOTH QUESTIONS IS "YES", GIVE DETAILS</p> <p>Honorably discharged from United States Marine Corps.</p>		

SECTION X		MILITARY SERVICE						
1. CURRENT DRAFT STATUS								
1. ARE YOU REGISTERED FOR THE DRAFT UNDER THE UNIVERSAL MILITARY TRAINING AND SERVICE ACT OF 1964 (As amended)?		X YES		2. SELECTIVE SERVICE CLASSIFICATION				
		NO		3. SELECTIVE SERVICE NO.				
6. IF DEFERRED, GIVE REASON		7. LOCAL DRAFT # AND NO. OR DESIGNATION AND ADDRESS						
NA		855 - 100 1/2 E. San Antonio St.,						
2. MILITARY SERVICE RECORD								
3. CURRENT AND OR PAST ORGANIZATIONAL MEMBERSHIP								
CHECK IN AS APPROPRIATE	ARMY	NAVY	MARINE CORPS	AIR FORCE	COAST GUARD	NATIONAL GUARD	AIR NATIONAL GUARD	FOREIGN ORGAN OR MIL. SERVICE (Specify)
HAVE SERVED			X					
NOW SERVING								None
4. BRANCH OR CORPS OF ABOVE CHECKED ORGANIZATION(S)								
Personnel Administration								
5. DATE SEPARATED FROM EXTENDED ACTIVE DUTY (Past service)				6. TOTAL LENGTH OF EXTENDED ACTIVE DUTY IN U.S. ARMED FORCES (Past or current service)				
25 July, 1961				12 MONTHS				
8. DATE ENTERED ACTIVE DUTY				9. TOTAL LENGTH OF ACTIVE DUTY IN FOREIGN MILITARY ORGANIZATION				
26 July, 1957				None				
7. RANK, GRADE OR RATE		PAST SERVICE		CURRENT SERVICE				
Cpl. (2-4)		Cpl. (2-4)		None				
9. PRIMARY MILITARY OCC. SPECIALTY (Use of Designation) AND TITLE		PAST SERVICE		CURRENT SERVICE				
None		Clerk - Chief Clerk		None				
10. SECONDARY MIL. OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		PAST SERVICE		CURRENT SERVICE				
None		None		None				
11. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate whether applicable to each of current service)								
Past Service: Clerk - Maintained personnel service records. 2 years as Security Guard in the American Embassies in La Paz, Bolivia and Lima, Peru.								
12. CHECK (X) TYPE OF SEPARATION FROM ACTIVE DUTY								
X HONORABLE DISCHARGE		RETIREMENT FOR SERVICE		UNCLE SAM'SHIP				
X RELEASE TO INACTIVE DUTY		RETIREMENT FOR COMBAT DISABILITY		OTHER:				
RETIREMENT FOR AGE		RETIREMENT FOR PHYSICAL DISABILITY						
13. CHECK (X) COMPONENT IN WHICH YOU SERVED								
X REGULAR		X RESERVE (Including the National and Air National Guard)		OTHER (Including ACSI)				
3. MILITARY RESERVE, NATIONAL GUARD AND ROTC STATUS								
1. DO YOU NOW HAVE RESERVE STATUS?		2. ARE YOU NOW A MEMBER OF THE NATIONAL GUARD OR AIR NATIONAL GUARD?		3. ARE YOU NOW A MEMBER OF THE ROTC?				
X YES		NO		X YES				
NO		YES		NO				
4. IF YOU HAVE ANSWERED "YES" TO ITEMS 1, 2 OR 3 ABOVE, CHECK COMPONENT MEMBERSHIP BELOW								
ARMY	X	MARINE CORPS	NAT. GUARD	COAST GUARD	NAVY ROTC	IND. CAT. ROTC CATEGORY NUMBER		
NAVY		AIR FORCE	AIR NAT'L GUARD	ARMY ROTC	AIR FORCE ROTC			
8. CURRENT RANK, GRADE OR RATE		4. DATE OF APPOINTMENT IN CURRENT SERVICE		5. EXPIRATION DATE OF CURRENT RESERVE OBL. CONTRACT				
Cpl. (2-4)		May, 1959		January 22, 1962				
9. CHECK (X) CURRENT RESERVE CATEGORY								
READY RESERVE								
STANDBY ACTIVE								
STANDBY INACTIVE								
RETIRED								
9. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		10. SECONDARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE						
0111		None						
11. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES								
None								
12. ARE YOU CURRENTLY ASSIGNED OR ATTACHED TO A RESERVE, NAT'L GUARD OR ROTC TRAINING UNIT?		YES		13. IF YOU HAVE ANSWERED "YES" TO ITEM 12, GIVE UNIT OR AGENCY AND ADDRESS				
		NO						
14. HAVE YOU A MILITARY MOBILIZATION ASSIGNMENT?		YES		15. IF YOU HAVE ANSWERED "YES" TO ITEM 14, GIVE UNIT OR AGENCY AND ADDRESS				
		NO						
16. INDICATE TOTAL MILITARY SERVICE YEARS		MONTHS		17. WHERE ARE YOUR SERVICE RECORDS KEPT?				
7		7		Washington, D.C.				

SECTION XI		FINANCIAL STATUS	
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?		YES	<input checked="" type="checkbox"/> NO
2. IF YOUR ANSWER IS "NO" TO THE ABOVE QUESTION, LIST ALL OTHER INCOME:			
Wife's Income			
3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS:			
NAME OF INSTITUTION	ADDRESS (City, State, Country)		
The Bank of California, N.A.	330 S.W. 5th Avenue, Portland, Oregon		
Union Trust Company	15 and H Streets, N.W., Washington, D.C.		
4. HAVE YOU EVER BEEN IN OR DEFICIENT FOR BANKRUPTCY?		YES	<input checked="" type="checkbox"/> NO
5. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE PARTICULARS INCLUDING COURT AND DATE(S)			
6. GIVE THREE CREDIT REFERENCES IN THE UNITED STATES:			
NAME	ADDRESS (No., Street, City, State)		
General Motors Acceptance Corp.	1310 S.W. Yamhill Street, Portland 5, Oregon		
Gulf Oil Corporation	P.O. Box 7215, Atlanta 9, Georgia		
Minde Furniture Company	917 Carolina Street, Fredericksburg, Virginia		
7. 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	<input checked="" type="checkbox"/> NO
8. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS:			
9. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTIONS WITH, U.S. CORPORATIONS OR BUSINESSES, OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS?			
<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
(If answer "YES," furnish details on separate sheet.)			
SECTION XII		MARITAL STATUS	
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, or Annulled) SPECIFY: <u>Married</u>			
2. STATE DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS:			
NA			
WIFE, HUSBAND OR FIANCEE 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. If marriage contemplated, fill in appropriate information for fiancee.			
3. NAME		Flones	
4. STATE ANY OTHER NAMES EVER USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH ANY OF THESE NAMES WERE USED. IF LEGAL CHANGE, GIVE PARTICULARS (Date and by what authority). USE EXTRA SPACE PROVIDED ON PAGE 10 OF THIS FORM TO RECORD THIS INFORMATION.	
5. DATE OF MARRIAGE		6. PLACE OF MARRIAGE (City, State, Country)	
November 14, 1960		Lima, Peru	
7. HIS (OR HER) ADDRESS, BEFORE MARRIAGE (No. Street, City, State, Country)			
American Embassy, La Paz, Bolivia			
8. LIVING		9. DATE OF DEATH	
<input checked="" type="checkbox"/> YES			
10. CURRENT ADDRESS (Give last address if separated)			
Washington 5, D.C.			
11. DATE OF BIRTH		12. PLACE OF BIRTH (City, State, Country)	
		Portland, Oregon	
		13. CITIZENSHIP	
		United States of A.	

SECTION XII CONTINUED FROM PAGE 9

14. IF BORN OUTSIDE U.S. - DATE OF ENTRY		15. PLACE OF ENTRY			
NA		NA			
16. FORMER CITIZENSHIP(S) (Country, Date)		17. DATE U.S. CITIZENSHIP WHERE ACQUIRED (City, State, Country)			
NA		NA			
18. OCCUPATION		19. PRESENT EMPLOYER (Name, Address, City, State, Country) or if spouse deceased or unemployed (Date last employed)			
Legal Secretary		Boykin and De Francis Formerly Department of State			
21. EMPLOYER'S OR BUSINESS ADDRESS (No. Street, City, State, Country)					
1000 16th St., N.W., Suite 603, Washington 2, D.C.					
22. DATES OF MILITARY SERVICE (From and to - If No. and 17)					
None					
23. BRANCH OF SERVICE		24. COUNTRY OF WHICH MILITARY SERVICE AFFILIATED			
25. DETAILS OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN (Foreign Service - Jan., 1953 - Oct., 1960; Civil Service - Jan., 1953 - June, 1953)					
SECTION XIII CHILDREN AND OTHER DEPENDENTS					
1. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS					
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	ADDRESS	
None					
2. NUMBER OF CHILDREN (including non-children and adopted children) who are UNMARRIED, UNDER 21 YRS. OF AGE, AND NOT SELF-SUPPORTING.		0	3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, grandparents, etc.) who are UNMARRIED, UNDER 21 YRS. OF AGE, AND NOT SELF-SUPPORTING.		0
SECTION XIV FATHER (Give same information as for Statist and use continuation sheet)					
1. STATE OTHER NAMES HE HAS USED		2. LIVING		3. DATE OF DEATH	4. CAUSE OF DEATH
None		Y YES NO			
5. INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS BEEN USED THESE NAMES. IF CLASS CHANGE, GIVE PARTICULARS. Where and by what authority. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.					
6. CURRENT ADDRESS - Give last address, if deceased (No. Street, City, State, Country)					
San Marcos, Texas					
7. DATE OF BIRTH		8. PLACE OF BIRTH (City, State, Country)		9. CITIZENSHIP	
May 24, 1913		Mex 7, Mexico, Mexico		MCA	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY			
12. FORMER CITIZENSHIP(S) (Country, Date)		13. DATE U.S. CITIZENSHIP ACQUIRED		14. WHERE ACQUIRED (City, State, Country)	
Mexican		1953		San Marcos, Texas	
15. OCCUPATION		16. PRESENT EMPLOYER (Name, Address, City, State, Country) or if spouse deceased or unemployed (Date last employed)			
Baptist Minister		Mexican Baptist Church			
17. EMPLOYER'S BUSINESS ADDRESS (No. Street, City, State, Country)					
San Marcos, Texas					
18. ADDRESS OF MILITARY SERVICE (Branch of Service) (If No. and 17)					19. COUNTRY
To my knowledge never served in any military organization					
20. DATES OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN					

SECTION XV MOTHER (Give name and email for Stepmother in separate sheet)			
1. FULL NAME (Last-First-Middle)	2. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	3. DATE OF DEATH	4. CAUSE OF DEATH UNKNOWN
5. STATE OTHER NAMES SHE HAS USED None to my knowledge		INDICATE CIRCUMSTANCES including length of time under which she has EVER USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS (where and by what authority). USE EXTRA SPACE PROVIDED ON PAGE 18 OF THIS FORM TO RECORD THIS INFORMATION.	
6. CURRENT ADDRESS - GIVE LAST ADDRESS, IF DECEASED (No., Street, City, State, Country) San Marcos, Texas			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country) Mar y Marlene, Nuevo Leon, Mexico	9. CITIZENSHIP Mexican	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY Unknown		11. PLACE OF ENTRY Unknown	
12. FORMER CITIZENSHIP(S) (Country/ies) NA	13. DATE U.S. CITIZENSHIP ACQUIRED NA	14. WHERE ACQUIRED (City, State, Country) NA	
15. OCCUPATION Housewife		16. PRESENT EMPLOYER (Give last employer, if mother is deceased or unemployed) NA	
17. EMPLOYER'S BUSINESS ADDRESS OR MOTHER'S BUSINESS ADDRESS IF SELF EMPLOYED NA			
18. DATES OF MILITARY SERVICE (From-and-To) NA	19. BRANCH OF SERVICE NA	20. COUNTRY NA	
21. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN NA			
SECTION XVI BROTHERS AND SISTERS (Including Half-, Step- and Adopted Brothers and Sisters)			
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) Semin, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 11
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) San Antonio, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 39
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) San Marcos, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 24
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) Semin, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 22
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) San Marcos, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 27
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) San Marcos, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 24
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) Semin, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 27
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) Semin, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 27

SECTION XVII		FATHER-IN-LAW	
1. FULL NAME (Last, First, Middle Initial)		2. LIVING	
Ray		X YES NO	
3. STATE OTHER NAMES HE HAS USED		4. DATE OF DEATH	
INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS BEEN USED THESE NAMES, IF LEGAL CHANGE OF NAME BY LAW, FATHER AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 15 OF THIS FORM TO RECORD THIS INFORMATION.		5. CAUSE OF DEATH	
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
Milwaukee, 22, Oregon			
7. PLACE OF BIRTH (City, State, Country)		8. CITIZENSHIP	
Minot, North Dakota		U.S. of America	
9. IF BORN OUTSIDE U.S. - DATE OF ENTRY		10. PLACE OF ENTRY	
NA		NA	
11. FORMER CITIZENSHIP(S) (Country/ies)		12. DATE U.S. CITIZENSHIP ACQUIRED	
NA		NA	
13. WHERE ACQUIRED (City, State, Country)		14. OCCUPATION	
NA		Warehouse Foreman	
15. PRESENT EMPLOYER (Give last employer, if Father-in-Law is deceased or unemployed)		16. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)	
Rudy Wilhelm Inc., Portland, Ore. on		Rudy Wilhelm Inc., Portland, Ore. on	
SECTION XVIII		MOTHER-IN-LAW	
1. FULL NAME (Last, First, Middle Initial)		2. LIVING	
		X YES NO	
3. STATE OTHER NAMES SHE HAS USED		4. DATE OF DEATH	
INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH SHE HAS BEEN USED THESE NAMES, IF LEGAL CHANGE OF NAME BY LAW, FATHER AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 15 OF THIS FORM TO RECORD THIS INFORMATION.		5. CAUSE OF DEATH	
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
Portland 36, Oregon			
7. PLACE OF BIRTH (City, State, Country)		8. CITIZENSHIP	
Portland, Oregon		U.S. of America	
9. IF BORN OUTSIDE U.S. - DATE OF ENTRY		10. PLACE OF ENTRY	
NA		NA	
11. FORMER CITIZENSHIP(S) (Country/ies)		12. DATE U.S. CITIZENSHIP ACQUIRED	
NA		NA	
13. WHERE ACQUIRED (City, State, Country)		14. OCCUPATION	
NA		Homemaker	
15. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)		16. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)	
SECTION XIX			
RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO EITHER (1) LIVE ABROAD, (2) ARE NOT U.S. CITIZENS OR (3) WORK FOR A FOREIGN GOVERNMENT			
1. FULL NAME (Last, First, Middle Initial)		2. RELATIONSHIP	
None to my knowledge			
3. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		4. EMPLOYED BY	
5. CITIZENSHIP (Country)		6. DATE OF LAST CONTACT	
1. FULL NAME (Last, First, Middle Initial)		2. RELATIONSHIP	
3. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		4. EMPLOYED BY	
5. CITIZENSHIP (Country)		6. DATE OF LAST CONTACT	
1. FULL NAME (Last, First, Middle Initial)		2. RELATIONSHIP	
3. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		4. EMPLOYED BY	
5. CITIZENSHIP (Country)		6. DATE OF LAST CONTACT	
1. FULL NAME (Last, First, Middle Initial)		2. RELATIONSHIP	
3. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		4. EMPLOYED BY	
5. CITIZENSHIP (Country)		6. DATE OF LAST CONTACT	

SECTION XIX CONTINUED FROM PAGE 12

8. SPECIAL REMARKS, IF ANY, CONCERNING RELATIVES NOTED IN SECTION XIX ABOVE

NA

SECTION XX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO ARE IN THE MILITARY OR CIVIL SERVICE OF THE UNITED STATES

1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[Redacted]	Bro-in-law	24	U.S. of America
5. ADDRESS (No., Street, City, State, Country)			
[Redacted] Pueblo, Colorado			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[Redacted]	2nd Cousin	None	U.S. of America
5. ADDRESS (No., Street, City, State, Country)			
[Redacted] Virginia Aviation - 1st S. Lt. USAF			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[Redacted]			
5. ADDRESS (No., Street, City, State, Country)			
[Redacted]			

SECTION XXI REFERENCES, ACQUAINTANCES, AND NEIGHBORS

1. LIST FIVE CHARACTER REFERENCES NOT RELATIVES IN THE U.S. WHO KNOW YOU INTIMATELY

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Mr. and Mrs. [Redacted]	San Marcos, Texas	San Marcos, Texas
Rev. [Redacted]	Austin, Texas	Austin, Texas
Mr. [Redacted]	Alexandria, Virginia	Alexandria, Virginia
Mr. [Redacted]	Washington, D.C.	Washington, D.C.
Col. [Redacted]	Waco, Texas	Waco, Texas

2. LIST FIVE PERSONS IN THE U.S. WHO KNOW YOU SOCIALLY, NOT RELATIVES, SUPERVISORS OR EMPLOYERS

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Mr. [Redacted]	Washington, D.C.	Washington, D.C.
Mr. [Redacted]	Washington, D.C.	Washington, D.C.
Miss [Redacted]	Washington, D.C.	Washington, D.C.
Miss [Redacted]	Denver, Colorado	Denver, Colorado
Mrs. [Redacted]	Fredericksburg, Virginia	Fredericksburg, Virginia

3. LIST THREE NEIGHBORS AT YOUR MOST RECENT USUAL RESIDENCE IN THE U.S.

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Miss [Redacted]	Fredericksburg, Virginia	Fredericksburg, Virginia
Lt. and Mrs. [Redacted]	Waco, Texas	Waco, Texas

SECTION XXII CLUBS, SOCIETIES AND OTHER ORGANIZATIONS

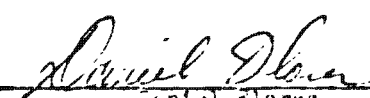
NOTE: List names and addresses of all clubs, societies, professional societies, employee groups or organizations of any kind (in case membership in or support of any organization having been quarters or branch in a foreign country) to which you belong or have belonged.

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATES OF MEMBERSHIP	
		FROM	TO
Spanish Club	San Marcos High School, San Marcos, Texas	Sept., 1931	May, 1933
Distributive Education Club	San Marcos High School, San Marcos, Texas	Sept., 1931	May, 1933
Baptist Youth Organization	First Mexican Baptist Church, San Marcos, Tex.	Jan., 1937	May, 1937

SECTION XXIII RESIDENCES FOR THE PAST 15 YEARS

ADDRESS - LAST RESIDENCE FIRST (Number, Street, City, State, Country)	INCLUSIVE DATES	
	FROM	TO
4716 Kenners Ave., #201, Alexandria, Virginia	March, 1961	Aug., 1961
102 Haxover St., Fredericksburg, Virginia	Dec., 1960	Mar., 1961
172 Bartolomea Herrera, Miraflores, Lima, Peru Calle Pototí,	Jan., 1959	May, 1960
ESIS Building, 3rd & 14th Floors, La Paz, Bolivia	Nov., 1958	Jan., 1960
47 th Company, Headquarters Marine Corps, Henderson Hall, Washington 25, D.C.	Sept., 1958	Nov., 1960
Cold Weather Training Battalion, Pickle Weavers, Folsom, California	Jan., 1958	Aug., 1960
Marine Corps Base, 29 Palms, California	Dec., 1957	Jan., 1958
Marine Corps Recruit Depot, San Diego, California	July, 1957	Nov., 1957
Marine Corps Base, Camp Pendleton, California	Nov., 1951	Dec., 1957
501 S. Guadalupe St., San Marcos, Texas	May, 1956	July, 1957
Howard Payne College, Brownwood, Texas	Sept., 1955	May, 1956
501 S. Guadalupe St., San Marcos, Texas	1956	Sept., 1955

SECTION XXIV		ADDITIONAL INFORMATION		
1. DO YOU AVOW OR HAVE YOU EVER AVOWED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU EVER SUPPORTED OR BEEN ASSOCIATED WITH ANY POLITICAL PARTY, ORGANIZATION OR UNION, LEAGUE WHICH ADVOCATES OR PRACTICES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES, BY FORCE OR VIOLENCE OR OTHER UNLAWFUL MEANS, OR WITH ANY GROUP OR PERSON OR PERSONS WHOSE PURPOSE IS TO DENY OR VIOLATE THE RIGHTS OF ANY PERSON OR PERSONS UNDER THE CONSTITUTION OF THE UNITED STATES?				YES NO
2. IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION, EXPLAIN				
3. DO YOU USE OR HAVE YOU EVER USED "INTOXICANTS"?		YES NO	4. IF SO, TO WHAT EXTENT?	
5. DO YOU USE OR HAVE YOU EVER USED "NARCOTICS"?		YES NO	6. IF SO, TO WHAT EXTENT?	
7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE ORGANIZATION OR ITS ACTIVITIES?				YES NO
8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1945				
I served 4 years in the United States Marine Corps.				
9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME OF THE AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION.				
An investigation (I do not know by whom) was conducted prior to my departure for Bolivia where I was assigned to the American Embassy. This investigation took place during August and September of 1953.				
NOTE SPECIAL: If your answer to "YES" to the following Questions 10, 11 or 12, provide the information requested for each question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.				
10. HAVE YOU, OR TO YOUR KNOWLEDGE, HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A VIOLATION OF TRAFFIC LAWS IN THE UNITED STATES OR ABROAD?		YES NO		
IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE.				
11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.		YES NO		
12. 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 INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.		YES NO		
SECTION XXV		PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
1. NAME (First-Middle-Last)		2. RELATIONSHIP		
Mrs. Daniel Flores		Wife		
3. HOME ADDRESS (No. Street, City, Zone, State, Country)		4. HOME PHONE NO.		
Washington 8, D.C.		365-8182		
5. BUSINESS ADDRESS (No. Street, City, Zone, State, Country) - INDICATE NAME OF FIRM OR 6. BUSINESS PHONE NO. & EXT.				
Boydin and De Francis 1000 15th St., Suite 603, Washington 5, D.C.		DI 7-5444		
7. IN CASE OF EMERGENCY OTHER CLOSE RELATIVES (Immediate Family) MAY ALSO BE NOTIFIED IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS. (SEE INSTRUCTIONS)				
In all cases wife: Relative, Mrs. [redacted] Seguin, Texas Telephone FR 9-1007				

SECTION XVII	CERTIFICATION						
<p>YOU ARE INFORMED THAT THE CORRECTNESS OF ANY STATEMENT MADE IN THIS APPLICATION WILL BE INVESTIGATED.</p> <p><small>I have read and understand the instructions. I certify that the foregoing answers are true and correct to the best of my knowledge and belief. I agree that any misstatement or omission in this material fact will constitute grounds for immediate dismissal or rejection of my application. I also understand that any false statement made herein may be punishable by law (U.S. Code, Title 18, Section 1001).</small></p>							
<p><small>DATE OF SIGNATURE</small> <i>September 5, 1961</i></p>	<p><small>SIGNATURE OF APPLICANT</small> <i>Daniel Flores</i></p>						
<p><small>SIGNED AT (City and State)</small> Washington, District of Columbia</p>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>						
<p><small>NOTE: Use the following space for extra details. Refer to each continued item by section and item number to which it relates. Sign your name at the end of the added material. If additional space is required use extra pages the same size as this page and sign each such page.</small></p>							
<p>MARITAL STATUS: Item #4, Section XII September 1, 1956 to October 6, 1956. Married to Lt. Col. in Portland, Oregon, by Circuit Court Judge. Used name of Moran until November 14, 1960, when changed to Flores.</p> <p>FATHER-IN-LAW: Item #5, Section XVII Short name for Raymond</p> <p>GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL: Item #1, Section VI</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Argentina</td> <td style="width: 30%;">2 July 1959 to 3 July 1959</td> <td style="width: 40%;">Travel</td> </tr> <tr> <td>Panama</td> <td>10 November 1958 to 13 November 1958</td> <td>Travel</td> </tr> </table> <p style="text-align: center; margin-top: 10px;">SEE ATTACHED SHEET FOR PERTINENT INFORMATION RELATIVE TO STEP-MOTHER.</p> <p style="text-align: center; margin-top: 20px;">Signed at Washington, D. C., this <u>5th</u> day of September, 1961.</p> <p style="text-align: center; margin-top: 20px;">  Daniel Flores </p>		Argentina	2 July 1959 to 3 July 1959	Travel	Panama	10 November 1958 to 13 November 1958	Travel
Argentina	2 July 1959 to 3 July 1959	Travel					
Panama	10 November 1958 to 13 November 1958	Travel					

ATTACHMENT TO FORM NO. 144 - PERSONAL HISTORY STATEMENT

Section XV - STEPMOTHER

Full name: [REDACTED]
Living: Yes
Other Names She Has Used: None to my knowledge
Current Address: [REDACTED] San Marcos, Texas
Date of Birth: [REDACTED]
Place of Birth: Mexico
Citizenship: Mexican
If Born Outside U.S. - Date of Entry: December 8, 1922
Place of Entry: Unknown
Former Citizenships: None
Occupation: Homemaker and Missionary
Present Employer: Mexican Baptist Church, San Marcos, Texas
Never served in Military or other Government service to my knowledge.

This paper is attached to and hereby made a part of Form No. 144.


Daniel Flores

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 19 January 1962

YOUR REFERENCE: 07100 OPEER

CASE NO. : 195221

TO : Director of Personnel

FROM : Director of Security

SUBJECT : FLORES, Daniel

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

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

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

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

3. As part of the entrance on duty processing:

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

A personal interview is not necessary.

FOR THE DIRECTOR OF SECURITY:

[Signature Box]

Chief, Personnel Security Division

OFFICE OF PERSONNEL SECURITY

*2/1/62
OK to look
see with R.
AP*