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MATERIAL REVIEWED AT CIA HEADQUARTERS BY  
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: Personnel file:  
Thomas B. CASASIN [redacted]

INCLUSIVE DATES: \_\_\_\_\_

CUSTODIAL UNIT/LOCATION: \_\_\_\_\_

ROOM: \_\_\_\_\_

DELETIONS, IF ANY: Sources and methods

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
04/29/73	10/10	Betsy WOLF	Betsy Wolf

RICHARDSON, JACQUES G. 006102

320089

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED  
5 April 1972

1. SERIAL NUMBER: 006102  
2. NAME (Last-First-Middle): [REDACTED]

3. NATURE OF PERSONNEL ACTION: RESIGNATION  
4. EFFECTIVE DATE REQUESTED: MONTH 05, DAY 14, YEAR 72  
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: [REDACTED] V TO V, V TO CF, CF TO V, CF TO CF: X  
7. FINANCIAL ANALYSIS NO. CHARGABLE: 9136-1231  
8. LEGAL AUTHORITY (Completed by Office of Personnel):

9. ORGANIZATIONAL DESIGNATIONS: DDP/EUROPEAN DIVISION, FOREIGN FIELD FRENCH AREA  
10. LOCATION OF OFFICIAL STATION: [REDACTED]

11. POSITION TITLE: OPS OFFICER  
12. POSITION NUMBER: 0668  
13. CAREER SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS  
15. OCCUPATIONAL SERIES: 0136.01  
16. GRADE AND STEP: 15 8  
17. SALARY OR RATE: \$31,554

18. REMARKS: 24065

19. SIGNATURE OF REQUESTING OFFICIAL: [REDACTED] DATE SIGNED: [REDACTED]  
20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [REDACTED] DATE SIGNED: 9/6/72

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE: 45  
20. EMPLOY CODE: 10  
21. OFFICE CODING: NUMERIC [REDACTED], ALPHABETIC [REDACTED]  
22. STATION CODE: [REDACTED]  
23. INTEGRITY CODE: [REDACTED]  
24. HDQTRS. CODE: 3  
25. DATE OF BIRTH: 01/20/24  
26. DATE OF SECE: [REDACTED]  
27. DATE OF LET: [REDACTED]  
28. NTE EXPIRES: [REDACTED]  
29. SPECIAL REFERENCE: [REDACTED]  
30. RETIREMENT DATA: [REDACTED]  
31. SEPARATION DATA CODE: [REDACTED]  
32. CORRECTION, CANCELLATION DATA: [REDACTED] EOD DATA  
33. SECURITY REQ. NO.: [REDACTED]  
34. SEX: [REDACTED]  
35. VET PREFERENCE: [REDACTED]  
36. SERV COMP. DATE: [REDACTED]  
37. LONG. COMP. DATE: [REDACTED]  
38. CAREER CATEGORY: [REDACTED]  
39. FEGLI, HEALTH INSURANCE: [REDACTED]  
40. SOCIAL SECURITY NO.: [REDACTED]  
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE: [REDACTED]  
42. LEAVE CAT. CODE: [REDACTED]  
43. FEDERAL TAX DATA: [REDACTED]  
44. STATE TAX DATA: [REDACTED]

45. POSITION CONTROL CERTIFICATION: 8-9-72 [REDACTED]  
46. O.P. APPROVAL: [REDACTED] DATE APPROVED: 9 AUG 1972

54B

SECRET  
(When Filled In)

# REQUEST FOR PERSONNEL ACTION

DATE PREPARED

10 JULY 1970

1 SERIAL NUMBER <b>006102</b>		2 NAME [REDACTED]		3 NATURE OF PERSONNEL ACTION <b>EXTENSION OF PRA NTE-24 FEB 1971</b>		4 EFFECTIVE DATE REQUESTED MONTH: 07 DAY: 20 YEAR: 71		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>			
6 FUNDS [REDACTED]		7 FINANCIAL ANALYSIS NO CHARGEABLE <b>1136-1231</b>		8 LEGAL AUTHORITY (Complied by Office of Personnel)		9 ORGANIZATIONAL DESIGNATIONS <b>DDP/EUR FOREIGN FIELD FRENCH AREA</b>		10 LOCATION OF OFFICIAL STATION			
11 POSITION TITLE <b>OPS OFFICER (14)</b>		12 POSITION NUMBER <b>0668</b>		13 CAREER SERVICE DESIGNATION <b>D</b>		14 CLASSIFICATION SCHEDULE (GS, FS, etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0136.01</b>			
16 GRADE AND STEP <b>15 7</b>		17 SALARY OR RATE <b>\$ 27,463</b>		18 REMARKS <b>cc: PAYROLL</b> <b>NTE 24 FEB 1971</b> <b>* PRA Pw AREA 20-17 EU (6)</b>							
18A SIGNATURE OF REQUESTING OFFICIAL [REDACTED]			DATE SIGNED <b>7/12/70</b>			18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER [REDACTED]			DATE SIGNED <b>14 Jul 1970</b>		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODE NUMERIC: <b>44620</b> ALPHABETIC: <b>EUR</b>		22 STATION CODE	23 INTEGREE CODE	24 ROUTES CODE	25 DATE OF BIRTH MO: 07 DA: 20 YR: 71		26 DATE OF GRADE MO: DA: YR:		27 DATE OF LES
28 NTE EXPRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA		33 SECURITY RES NO		34 SEC RES NO		
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 POSITION CONTROL CERTIFICATION <b>7-28-70</b> <b>mw</b>				46 O.P. APPROVAL [REDACTED]		47 DATE APPROVED <b>7-22-70</b>					

XK.P

SECRET  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED <b>25 FEB 1969</b>	
1 SERIAL NUMBER <b>006102</b>					
3 NATURE OF PERSONNEL ACTION <b>EXTENSION OF PRA NTE: 1 year</b>			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>02 25 69</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6 FUNDS V TO V CF TO V		V TO CF CF TO CF <b>XX</b>		7 FINANCIAL ANALYSIS NO. CHARGEABLE <b>9136 1231</b>	
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/EUR FOREIGN FIELD CENTRAL REGION</b>			10 LOCATION OF OFFICIAL STATION		
11 POSITION TITLE <b>OPS OFFICER</b>			12 POSITION NUMBER <b>0668</b>		13 CAREER SERVICE DESIGNATION <b>D</b>
14 CLASSIFICATION SCHEDULE (GS, F.B., etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0136.01</b>		16 GRADE AND STEP <b>15 8 7</b>	
17 SALARY OR RATE <b>2,373.34 - \$ 23,075</b>					
18 REMARKS					
18A SIGNATURE OF REQUESTING OFFICER <b>C/E/Pers</b>		DATE SIGNED <b>2/26/69</b>		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <b>3-4-69</b>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE <b>37</b>	20 EMPLOY CODE <b>10</b>	21 OFFICE CODING NUMERIC ALPHABETIC <b>44 LNC EUR</b>		22 STATION CODE <b>24065</b>	23 INTEGREE CODE
24 HOOURS CODE <b>3</b>		25 DATE OF BIRTH MO. DA. YR. <b>01 20 24</b>		26 DATE OF GRADE MO. DA. YR.	
27 DATE OF LEI MO. DA. YR.		28 NTE EXPIRES MO. DA. YR. <b>02 24 70</b>		29 SPECIAL REFERENCE <b>S 2</b>	
30 RETIREMENT DATA CODE		31 SEPARATION DATA CODE		32 CORRECTION CANCELLATION DATA TYPE MO. DA. YR.	
33 SECURITY REQ. NO.		34 SEC		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 CAR RESY PROP. TEMP		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 (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT. CODE		43 FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	
44 STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE EXEMP.		45 POSITION CONTROL CERTIFICATION <b>3-7-69</b>		46 OP APPROVAL <b>3/7/69</b>	

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED 24 February 1967			
1. SERIAL NUMBER 006102		2. NAME (Last, First, Middle) [REDACTED]							
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH: 02, DAY: 20, YEAR: 67		5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS V TO V CF TO V		V TO CF XX CF TO CF		7. FINANCIAL ANALYSIS NO. CHARGEABLE 7136-1231	8. LEGAL AUTHORITY (Completed by Office of Personnel)				
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD CENTRAL REGION			10. LOCATION OF OFFICIAL STATION						
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER (14) 0668	13. CAREER SERVICE DESIGNATION D					
14. CLASSIFICATION SCHEDULE (G.S., F.B., etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 15-6	17. SALARY OR RATE \$ 20,585					
18. REMARKS XRA-per HR-21c (2) for duration of present tour. 21-170(B) Slotting for new T/O.									
18A. SIGNATURE OF REQUESTING OFFICIAL [REDACTED]		DATE SIGNED	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]		DATE SIGNED 2 MAR 1967				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 37 10	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 46600 ALPHABETIC: 2465		22. STATION CODE 3	23. INTEGREE CODE	24. HQQTRS CODE	25. DATE OF BIRTH MO. DA. YR. 01 20 24	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. NTE EXPIRES MO. DA. YR. 03 169 82	29. SPECIAL REFERENCE 1-ENC 2-FIELD 3-NONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR. EOD DATA →		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 CAR RESY PROV TEMP	39. FEGLI HEALTH INSURANCE CODE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO.				
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE EXEMPT.			
45. POSITION CONTROL CERTIFICATION 3-3-67 [Signature]			46. O.P. APPROVAL [Signature]			DATE APPROVED			

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19

SECRET  
(When Filled In)

P 55

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED 29 March 1966	
1 SERIAL NUMBER 006102		2 NAME [REDACTED]					
3 NATURE OF PERSONNEL ACTION <b>DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM</b>						4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 10 66	
5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>						7 COST CENTER NO CHARGEABLE 6136-1231	
6 FUNDS V TO V CF TO V		V TO CF CF TO CF		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203			
9 ORGANIZATIONAL DESIGNATIONS DEP/WE FOREIGN FIELD INTERNAL OPERATIONS SECTION						10 LOCATION OF OFFICIAL STATION [REDACTED]	
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 0885		13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, LH, etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 15 5		17 SALARY OR RATE \$19,415
18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION.							
18A. SIGNATURE OF REQUESTING OFFICIAL [REDACTED]				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [REDACTED]	
DATE SIGNED							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 28		20. EMPLOY. CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 506001 IUC		22. STATION CODE 24065	
23. INTEGREE CODE 3		24. HDQTRS. CODE [REDACTED]		25. DATE OF BIRTH MO. DA. YR. 02 23 20		26. DATE OF GRADE MO. DA. YR. 02 23 66	
27. DATE OF LEI MO. DA. YR. 01 31 65		28. WFE EXPIRES MO. CA. YR. [REDACTED]		29. SPECIAL REFERENCE [REDACTED]		30. RETIREMENT DATA 1-CS 2-FLA 3-NONE [REDACTED]	
31. SEPARATION DATA CODE [REDACTED]		32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR. [REDACTED]		33. SECURITY REQ. NO. [REDACTED]		34. SEN [REDACTED]	
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 EMP/RESV PROV. TEMP	
39. FEGLI HEALTH INSURANCE CODE 0-NONET 1-YES		40. SOCIAL SECURITY NO. [REDACTED]		41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE [REDACTED]	
43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPT. STATE CODE		45. POSITION CONTROL CERTIFICATION [REDACTED]		46. OP APPROVAL See memo signed by [REDACTED] 31 MAR 1966	
DATE APPROVED [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	

FORM 1152 USE PREVIOUS EDITION

OP-2 1-66

SECRET

GROUP 1  
EXEMPT FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED <b>10 FEBRUARY 1964</b>	
1 SERIAL NUMBER <b>006102</b>		2 NAME (Last-First-Middle) [REDACTED]			
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>			4 EFFECTIVE DATE REQUESTED MONTH: <b>02</b> DAY: <b>15</b> YEAR: <b>64</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6 FUNDS V TO V CF TO V		V TO CF <b>CC</b>	CF TO CF	7 COST CENTER NO CHARGE-ABLE <b>4136-6250-1012</b>	
9 ORGANIZATIONAL DESIGNATIONS <b>DDP WE</b> [REDACTED] <b>INTERNAL OPERATIONS SECTION</b>			10 LOCATION OF OFFICIAL STATION [REDACTED]		
11 POSITION TITLE <b>OPS OFFICER</b>		12 POSITION NUMBER <b>0885</b>		13 CAREER SERVICE DESIGNATION <b>D</b>	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0136.01</b>	16 GRADE AND STEP <b>15 4</b>	17 SALARY OR RATE <b>\$ 17,210</b>	
18 REMARKS FROM: <b>DDP WE</b> / [REDACTED] / <b>0886</b> . PRA IN ACCORDANCE WITH HR 20-21c (2) FOR DURATION OF TOUR. <i>NTE</i> <i>Wage schedule 1967</i> <i>03/14/66</i>					
18a [REDACTED]		DATE SIGNED <b>6/21/64</b>		18b SIGNATURE OF CAREER SERVICE APPROVING OFFICER [REDACTED]	
[REDACTED]		AC/WE/PT		DATE SIGNED <b>10 Mar 64</b>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE <b>31</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODING NUMERIC: <b>506000</b> ALPHABETIC: <b>WE</b>		22. STATION CODE <b>4065</b>	23. INTEGRAL CODE <b>3</b>
24. NDQTRS CODE <b>3</b>		25. DATE OF BIRTH MO. DA. YR. <b>01/20/24</b>		26. DATE OF GRADE MO. DA. YR.	
27. DATE OF LEI MO. DA. YR.		28. NTE EXPIRES <b>03/14/66</b>		29. SPECIAL REFERENCE <b>182</b>	
30. RETIREMENT DATA 1-ESC 3-FICA 5-NONE		31. SEPARATION DATA CODE		32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR.	
33. SECURITY REG. NO.		34. SEX		EOD DATA →	
35. VET PREFERENCE 0-NONE 1-5 PT 2-10 PT		36. SERV. COMP. DATE MO. DA. YR.		37. LONG. COMP. DATE MO. DA. YR.	
38. CAREER CATEGORY CAR RESV PROV TEMP		39. FEGLI/HEALTH INSURANCE CODE CODE 0-WAIVER 1-YES		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE PREVIOUS SERVICE 1-NONE BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	
44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		45. POSITION CONTROL CERTIFICATION <b>2. D. [Signature]</b> <b>03/14/64</b>		46. OP APPROVAL [Signature]	
47. DATE APPROVED <b>17/11/64</b>		14.			

7  
G

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION



**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>11 AUGUST 1963</b>	
1. SERIAL NUMBER <i>xxB</i> <del>6-11-63</del>		2. [REDACTED]					
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>				4. EFFECTIVE DATE REQUESTED MONTH: <u>12</u> DAY: <u>13</u> YEAR: <u>1963</u>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE <b>4136-6250-1012</b>	
		CF TO V		CC		CF TO CF	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP WE</b> <b>EXTERNAL OPS SECTION</b>				10. LOCATION OF OFFICIAL STATION [REDACTED]			
11. POSITION TITLE <b>OPS OFFICER</b>				12. POSITION NUMBER <del>0886</del> <b>0886</b>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>15 4</b>		17. SALARY OR RATE <b>16,005</b>	
18. REMARKS  FROM: DDP SR FOREIGN FIELD/WE AREA [REDACTED] 0240 PRAed IN ACCORDANCE WITH HR 20-580, PARA 4 (b). for 2 yrs. COPIES SENT TO FINANCE AND SECURITY.  <div style="float: right; border: 1px solid black; padding: 5px; transform: rotate(-15deg);">ROBERT COFF cm</div>							
19. [REDACTED]				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
				<b>AC/WE/PT</b>		DATE SIGNED <b>15 Oct 63</b>	
NOTE 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	25. DATE OF BIRTH
<b>2710</b>		NUMERIC ALPHABETIC <b>50660 WE</b>		<b>24015</b>		<b>3</b>	MO. DA. YR. <b>12 13 63</b>
26. DATE OF BIRTH	27. DATE OF GRADE	28. DATE OF LEI	29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE
			<b>34</b>				
32. NTE EXPIRES	33. SECURITY REQ. NO.		34. SER		35. VET. PREFERENCE		
MO. DA. YR. <b>10 12 65</b>					CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.		
36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FECLTY/HEALTH INSURANCE	
MO. DA. YR.		MO. DA. YR.		CODE		CODE 0 - NONE 1 - YES	
40. PREVIOUS GOVERNMENT SERVICE DATA				41. LEAVE CAT. CODE		42. FEDERAL 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)				CODE		FORM EXECUTED 1 - YES 2 - NO	
43. POSITION CONTROL CERTIFICATION				44. G.P. APPROVAL		45. STATE TAX DATA	
<b>W. Kearney 10/22/63</b>				<b>Nashik 10/22/63</b>		DATE APPROVED <b>15 Oct 63</b>	

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>23 January 1963</b>	
1. SERIAL NUMBER: 2. NA <span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span>							
3. NATURE OF PERSONNEL ACTION <b>Promotion</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>02   03   63</b>		5. CATEGORY OF EMPLOYMENT <b>Regular</b>	
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE <b>3134 4008 1000</b>	
		CF TO V		<input checked="" type="checkbox"/> CF TO CF		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/SR - FOREIGN FIELD Western European Area</b>				10. LOCATION OF OFFICIAL STATION <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>			
11. POSITION TITLE <b>Ops Officer</b>				12. POSITION NUMBER <b>0240</b>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>			15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>15 4</b>		17. SALARY OR RATE <b>\$ 16005<sup>cl</sup></b>
18. REMARKS <b>From same slot.</b>  <b>PRA in accordance with HR-20-21c(3) for a period not to exceed 2 years.</b>							
18A. <span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span>				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span>	
<b>C/SR/PERSONNEL</b>				<b>24 Jan 63</b>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE <b>22</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODING NUMERIC ALPHABETIC <b>4000 SR</b>		22. STATION CODE <b>24265</b>	23. INTEROFF CODE	24. WOTPS CODE <b>3</b>	25. DATE OF BIRTH MO. DA. YR. <b>01   26   34</b>
26. DATE OF GRAD MO. DA. YR. <b>02   03   63</b>		27. DATE OF LEA MO. DA. YR. <b>02   03   63</b>		28. SPECIAL REFERENCE <b>80</b>		29. RETIREMENT DATA 1 - CSC 3 - FICA 5 - NONE	
30. DATE EXPIRES MO. DA. YR.		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REQ. NO.	
34. VET. PREFERENCE CODE 1 - NONE 2 - 5 YR. 3 - 10 YR.		35. SRV. COMP. DATE MO. DA. YR.		36. LONG. COMP. DATE MO. DA. YR.		37. MIL. SERV. CREDIT/CD 1 - YES 2 - NO	
38. FEQT / HEALTH INSURANCE CODE 0 - NONE 1 - YES		39. SOCIAL SECURITY NO.					
40. PREVIOUS GOVERNMENT SERVICE 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)				41. LEAVE CAT. CODE		42. FEDERAL TAX DATA FORM EXECUTED CODE ALL TAX EXEMPTIONS	
				43. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE			
44. POSITION CONTROL CERTIFICATION <b>MCO 8 FEB 1963</b>				45. O.P. APPROVAL <b>Richard B. Rogers</b>		DATE APPROVED	

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>9 July 1962</b>	
1. <b>PERSONNEL NUMBER</b> X: B <del>XXXXXXXXXX</del>							
3. NATURE OF PERSONNEL ACTION <b>Excepted Appointment (Career)</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>08   05   62</b>		5. CATEGORY OF EMPLOYMENT <b>Regular</b>	
6. FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> CF TO V		<input type="checkbox"/> V TO CF <input checked="" type="checkbox"/> CF TO CF		7. COST CENTER NO. CHARGEABLE <b>3034 4008 1000</b>		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/SR Western European Area</b>				10. LOCATION OF OFFICIAL STATION			
11. POSITION TITLE <b>Ops Officer</b>				12. POSITION NUMBER <b>240</b>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>14 0136.01</b>		16. GRADE AND STEP <b>14 06</b>		17. SALARY OR RATE <b>510 OR 1350</b>	
18. REMARKS <p align="center">Last day at Headquarters will be 31 July 1962  <del>Departing U. S. around 10 August 1962.</del> Departing U. S. around 10 August 1962.</p> <p>259's submitted.          Copy furnished Office of Security.  <i>c. 7/54</i></p> <p align="right"><i>WE concurrence on the telephone          Acting DC/WE</i></p>							
18A. DATE SIGNED CIA <b>C/SR/PERSONNEL</b>				18B. SIGNATURE OF CAREER SERVICE APPROVING DATE SIGNED <b>24 July '62</b>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION EMPLOYMENT CODE <b>A3 10</b>		21. OFFICE CODE NUMERIC ALPHABETIC <b>0160 SR</b>		22. STATION CODE <b>24065</b>		23. NOTES CODE <b>3</b>	
24. DATE OF BIRTH MO. DA. YR. <b>01   20   24</b>		25. DATE OF DEATH MO. DA. YR. <b>01   16   55</b>		26. DATE OF LEI MO. DA. YR. <b>08   08   61</b>		27. DATE OF LEI	
28. WTE EMP RES MO. DA. YR.		29. SPECIAL REFERENCE 1 - CSC 3 - FICA 5 - NONE <b>1</b>		30. RETIREMENT DATA CODE <b>1</b>		31. SEPARATION DATA CODE <b>1</b>	
32. FEDERAL GOVERNMENT SERVICE DATA CODE <b>1</b>		33. LEAVE CAT. CODE <b>8</b>		34. MIL. SERA. CREDITED 1 - YES 2 - NO <b>2</b>		35. FEEDBACK / HEALTH INSURANCE CODE CODE <b>0 1</b>	
36. SERA. COMP. DATE MO. DA. YR. <b>03   07   44</b>		37. LONG. COMP. DATE MO. DA. YR. <b>11   20   49</b>		38. FEDERAL TAX DATA CODE <b>0 0 -</b>		39. STATE TAX DATA CODE <b>0 0 -</b>	
40. SECURITY NO. <b>642-20-5339</b>		41. PREVIOUS GOVERNMENT SERVICE DATA CODE <b>1</b>		42. MIL. SERA. CREDITED 1 - YES 2 - NO <b>2</b>		43. FEEDBACK / HEALTH INSURANCE CODE CODE <b>0 0 -</b>	
44. POSITION CONTROL CERTIFICATION				45. D.P. APPROVAL <b>Joseph B Ragan</b>		46. DATE APPROVED <b>7/24/62</b>	

1000  
1000

6101

[Redacted]

6 August 1932

Memorandum in Lieu of Fitness Report

Subject: [Redacted]

My last statements concerning the performance of [Redacted] should be extended to cover the remainder of his service as Chief of SR/S. He departed headquarters for a field assignment 31 July 1932.

[Redacted Signature]

Chief of Operations and Plans  
SR Division

CONCUR: [Redacted]  
Chief, SR Division

SECRET

110-2-6-7

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 9 July 1962	
1. SERIAL NUMBER 006102		2. NAME (Last-First-Middle) [Redacted]					
3. NATURE OF PERSONNEL ACTION Resignation				4. EFFECTIVE DATE REQUESTED 25 JUL 62		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X		7. COST CENTER NO. CHARGE-ABLE 3234 1300 1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/SR SR/6 Office of the Chief				10. LOCATION OF OFFICIAL STATION Washington, D. C.			
11. POSITION TITLE Ops Officer (Sr Ch)			12. POSITION NUMBER 0250		13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 14 06		17. SALARY OR RATE 13516	
18. REMARKS Copy furnished Vouchered Payroll.							
19a. SIC		19b. FIC		20. DATE SIGNED		21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]	
[Redacted]		[Redacted]		[Redacted]		[Redacted]	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
22. ACTION CODE 45		23. EMPLOYER CODE 10		24. DATE OF BIRTH 10/20/24		25. DATE OF DEATH	
26. WIE EXPIRES		27. SPEC. REFERENCE		28. REPORTING OFFICER'S SIGNATURE [Signature]		29. SECURITY PEO. NO.	
30. VET. PREFERENCE		31. SERVA. COMP. DATE		32. MIL. SERVA. COMP. DATE		33. SOCIAL SEC. NO.	
34. MILITARY GOVERNMENT SERVA. DATA		35. COLLEGE DATA		36. FEDERAL TAX DATA		37. STATE TAX DATA	
38. POSITION CONTROL CERTIFICATION		39. APPROVAL [Signature]				40. DATE APPROVED 7/24/62	

SECRET  
(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE 4 August 1962 FOR THE FOLLOWING REASON:  
(Date)

To accept private employment.

MY LAST WORKING DAY WILL BE -

DATE SIGNED

SIGNATURE OF EMPLOYEE

4 August 62. 23 July 62

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, Zone, State)

INSTRUCTIONS

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

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

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

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

FIRST LINE  
Major Component (Director, Deputy Director, etc.)  
Office, Major Staff, etc.  
Division or Staff (subordinate to first line)  
Branch  
Section  
Unit

Item 11 - "Position Title" should reflect the standard abbreviated title given in the most current edition of the Position Control Register or reported on Form 261, Staffing Complement Change Authorization.

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

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

SECRET

Act: 16 AUG 67

NOTIFICATION OF PERSONNEL ACTION				
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)		
016102				
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE	
RESIGNATION			NO. DA. TO 8 14 67	
5. CATEGORY OF EMPLOYMENT			REGULAR	
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY
<input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		1234		
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE		12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION	
OPS OFF CLR BR LN		15	0	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE	
GS	0136	4 6	1351	
18. REMARKS				
SIGNATURE OR OTHER AUTHENTICATION				

**SECRET**  
(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION						V to V		V to UV					
Mo	Da	Yr							UV to V		UV to UV					
09	12	60	1. Serial No.			2. Name (Last-First-Middle)			3. Date of Birth		4. Vet. Pref.		5. Sex		6. CS - EOD	
006102			JACQUE G. RICHARDSON			Mo Da Yr		Mo Da Yr		Mo Da Yr		Mo Da Yr		Mo Da Yr		
7. SCD			8. CSC Rmt.		9. CSC Or Other Legal Authority		10. Appt. Affid.		11. FEGLI		12. LCD		13. MIL. SERV. CREDIT. LCD			
Mo	Da	Yr	Yes - 1	Code	Mo	Da	Yr	Yes - 1	Code	Mo	Da	Yr	Yes - 1	Code		
			No - 2					No - 2					No - 2			

**PREVIOUS ASSIGNMENT**

14. Organizational Designations			Code		15. Location Of Official Station			Station Code		
DDP SR FAR EAST AREA										
SOVIET BRANCH										
16. Dept.-Field		17. Position Title			18. Position No.		19. Serv.	20. Occup. Series		
Dept. Usld. Frn.	Code	OPS OFFICER ER CH			189		GS	0136.01		
21. Grade & Step		22. Salary Or Rate		23. SD	24. Date Of Grade		25. PSI Due		26. Appropriation Number	
14 4		\$ 12,990		D	Mo Da Yr		Mo Da Yr		1134 7000 3000	
					11 15 57		7 12 61			

**ACTION**

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Date	
REASSIGNMENT TRANSFER OF FUNDS <i>to V. Rich</i>			Mo Da Yr		REGULAR				
			10 02 60						

**PRESENT ASSIGNMENT**

31. Organizational Designations			Code		32. Location Of Official Station			Station Code		
DDP SR SR 6 OFFICE OF THE CHIEF					WASH., D. C.					
33. Dept.-Field		34. Position Title			35. Position No.		36. Serv.	37. Occup. Series		
Dept. Usld. Frn.	Code	OPS OFFICER - ER CH			50 D-15		GS	0136.01		
38. Grade & Step		39. Salary Or Rate		40. SD	41. Date Of Grade		42. PSI Due		43. Appropriation Number	
14 4		\$ 12,990		D	Mo Da Yr		Mo Da Yr		1234 1000 1000	

**SOURCE OF REQUEST**

A. Requested By (Name And Title)			B. Request Approved By (Signature And Title)		
CH/SR/PERSONNEL					
B. For Additional Information Call (Name & Telephone Ext.)					
11407					

**CLEARANCES**

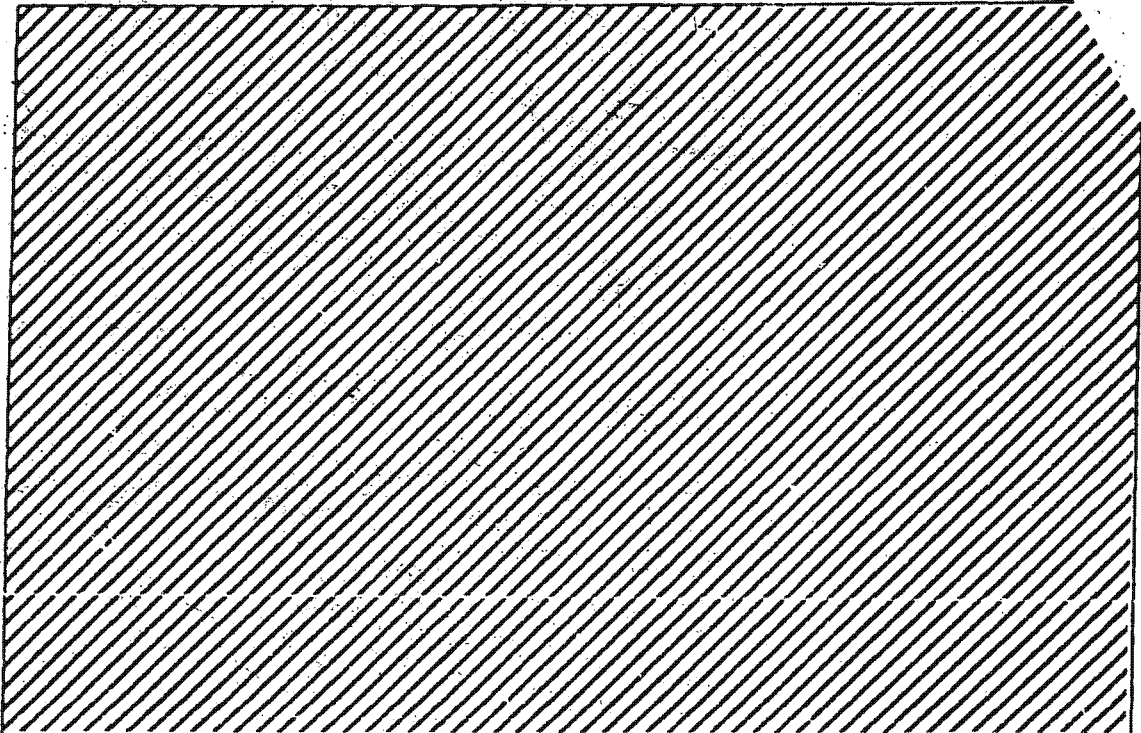
Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	9/16/60	D. Placement		
B. Pos. Control	<i>[Signature]</i>	10-16-60	E.		
C. Classification			F. Approved By	<i>[Signature]</i>	10 10 60

Remarks Two copies of this action have been forwarded to the Office of Security.

APPROVED BY  
CSPD  
10-5-60  
4/10/60



SECRET  
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
[Redacted]	X	59-41

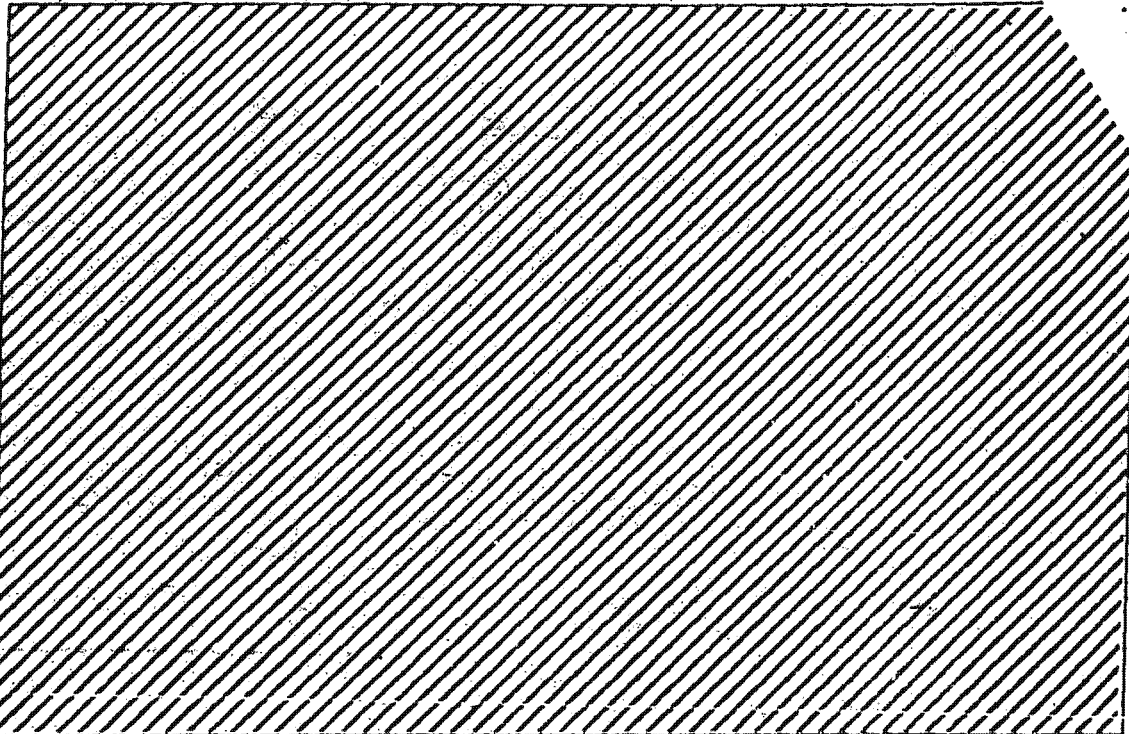
There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on 3 November 1954

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 BCD REPRESENTATIVE
28 AUG 1959	[Redacted]

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET  
(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
[Redacted]	Unk	58-201

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or ~~death~~ incurred on 4 Feb 1958.

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 HCD REPRESENTATIVE
15 July 1958	[Redacted Signature]

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

STANDARD FORM 52  
PERSONNEL ACTION  
U. S. GOVERNMENT PRINTING OFFICE  
1954 O-57829-2

REQUEST FOR PERSONNEL ACTION

VOUCHERED TO CONFIDENTIAL

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

1. NAME (Mr. Miss Mrs. One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
	20 Jan 1924		13 Dec 54
5. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A PROPOSED	7. C.S. OR OTHER LEGAL AUTHORITY
PROMOTION		5 Jan '55	
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED 16 Jan 1955	

FROM— Area Ops Officer (Br. Ch.) EC-171-13 GS-0136.01-13 \$8360.00 p.o. DDP/SR SR/5 Washington, D.C.	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE AND SALARY 11. ORGANIZATIONAL DESIGNATION 12. HEADQUARTERS	TO— Area Ops Officer ECF-189-14 GS-0136.01-14 \$9600.00 p.o. DDP/SR Far East Area Office of the Chief
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)

PLEASE TRANSFER FROM VOUCHERED TO CONFIDENTIAL FUNDS. 9560.00 7.3  
Memo stating why funds report not necessary. 7.3

B. REQUESTED BY (Name and title)	D. REQUEST APPROVED BY
	Signature: <i>[Signature]</i> Title: DDP/ Sr Admin.

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)	13. VETERAN PREFERENCE	14. POSITION CLASSIFICATION ACTION
Ext. 3718	NONE WWII OTHER 5-PT 10-POINT DISAB OTHER	NEW VICE I.A. REAL

15. SEX M W	16. RACE	17. APPROPRIATION FROM: 5-3400-20 TO: 5-3400-55-015	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE STATE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
----------------	----------	---	--	--	---

21. STANDARD FORM 50 REMARKS

*Effective date per [unclear] 1-11-55*  
*Done by [unclear] 1-11-55*

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL		212 4 Jan	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL		11/5/55	
E.			

APPROVED BY  
FI CAREER SERVICE BOARD  
DATE: DEC 21 1954

F. APPROVED BY  
*[Signature]*  
1-5-55

SECRET

SECRET  
Security Information

DD/P

PERSONNEL DATA SHEET

NAME:  AGE: 31 DATE: 13 Dec 1954

STATION Washington, D.C.  
AND DUTIES: Area Ops Off. DD/P UNIT: SR  
(Br. Ch.)  
PRESENT GRADE: GS-13  
PROPOSED GRADE: GS-14

PRIMARY CAREER  
DESIGNATION: SD/PI

PRESENT T/O SLOT BC-171  
NUMBER AND GRADE: GS-15

PROPOSED T/O SLOT BCF-189  
NUMBER AND GRADE: GS-15

CIA TRAINING:

SOC - 9 Jan - 3 Feb 1950  
Ops Course - 20 Feb - 17 Mar 1950  
Adv. Ops Course 27 Mar - 21 Apr 1950  
CE Course 4 Jan - 22 Jan 1954  
Audio-Surveillance 29 Nov - 1 Dec 1954 - Flaps & Seals 2 & 3 Dec 1954

EDUCATION:

University of Michigan, 1945 - BA  
Georgetown University - 1951 to 1952

LANGUAGE PROFICIENCY:

Japanese & French - Fluent  
Mandarin, Italian, Spanish, Portuguese & German - Fair

ASSESSLD: DATE: TYPE OF POSITION: RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-CSS):

Feb 1943 to Aug 1946 - US Army  
Sept 1946 to Mar 1948 - Civil Intell. USA  
Apr 1948 to Oct 1948 - Civil Intell. 1st Lt. (over)

SUMMARY OF CIA-SSU-CSS ASSIGNMENTS INCLUDING PREVIOUS GRADES AND DATES:

APT - 7-18-50 - Intell Asst. GS-7 - OPC/FE/FE-3,   
PRO - 10-1-50 - Intell Officer, GS-9 - OPC/FE/FE-3,   
PRO & REAS - 4-29-51 - Intell Officer, GS-11 - OPC/FE/FE-3  
PRO - 1-20-52 - Ops Officer - GS-12 - OPC/FE/FE-3  
REAS - 2-17-52 - Ops Officer - GS-12 - OPC/EE/EE-4, Great Russian Sec., Wash, D.C.  
REAS - 12-7-52 - Intell Officer (Dep. Ch.) GS-12 - DDP/SR - SR-5 O/C  
PRO - 7-5-53 - Intell Officer (Dep. Ch.) -GS-13 - DDP/SR - SR-5 O/C  
REAS - 2-28-54 - Area Ops Off. (Br. Ch.) GS-13 - DDP/SR - SR-5

RECOMMENDED BY:

CONCURRENCES:

Chief, SR/Admin

RECOMMENDATION OF SENIOR SERVICE BOARD:

Chief, SR

EXPERIENCE PRIOR TO CIA (excluding SSU-CSS)

Publications" [redacted] to  
Numerous news items, 2 editorials while editor, graduate term papers  
on Yugoslavia, China, Korea & Afghanistan.

MAIL ROOM

DEC 28 2 39 PM '54

OFFICE OF PERSONNEL

STANDARD FORM 52 FORM 52 OF THE U. S. CIVIL SERVICE COMMISSION GENERAL REGULATION PERSONNEL MANUAL, CHAPTER II		REQUEST FOR PERSONNEL ACTION																								
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separate data on reverse.																										
1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname)		2. DATE OF BIRTH	3. REQUEST NO.																							
[Redacted]		20 JAN 1954	[Redacted]																							
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		5. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY																							
Reassignment		14 Feb 1954	[Redacted]																							
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:																								
FROM— <del>DEPUTY CHIEF (FO)</del> <del>Area Ops Officer (Pr. Ch.)</del> EC-190-13	9. POSITION TITLE AND NUMBER	TO—	Area Ops Officer (Pr. Ch.) FC-171-13																							
GS-132-13 \$8360.00	10. SERVICE, GRADE, AND SALARY	GS-136.01-13 \$8360.00	11. ORGANIZATIONAL DESIGNATIONS																							
<del>DDP/SS</del> SR-5 (Far East Branch) Office of the Chief Washington, D.C.	12. HEADQUARTERS	DDP/SS SR-5	Washington, D.C.																							
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	13. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL																								
A. REMARKS (Use reverse if necessary)																										
B. REQUESTED BY (Name and title)		D. REQUEST APPROVED BY																								
[Redacted]		Signature: [Redacted]																								
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Title: <i>SA Personnel Officer</i>																								
[Redacted] Ext. 3745																										
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION																								
<table border="1"> <tr> <td>NONE</td> <td>WWII</td> <td>OTHER</td> <td>5-PT.</td> <td>10-POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>DISAB. OTHER</td> </tr> <tr> <td></td> <td>X</td> <td></td> <td>X</td> <td></td> </tr> </table>		NONE	WWII	OTHER	5-PT.	10-POINT					DISAB. OTHER		X		X		<table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>I. A.</td> <td>SEL.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>		NEW	VICE	I. A.	SEL.				
NONE	WWII	OTHER	5-PT.	10-POINT																						
				DISAB. OTHER																						
	X		X																							
NEW	VICE	I. A.	SEL.																							
15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)																							
M	W	FROM: 4-3400-20 TO: 4-3400-20	CD+ET																							
21. STANDARD FORM 50 REMARKS		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE STATE																							
[Redacted]		[Redacted]	[Redacted]																							
22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS																							
A.	[Redacted]	2/16	[Redacted]																							
B. CEIL. OR POS. CONTROL	[Redacted]	[Redacted]	[Redacted]																							
C. CLASSIFICATION	[Redacted]	[Redacted]	[Redacted]																							
D. PLACEMENT OR EMPL.	[Redacted]	[Redacted]	[Redacted]																							
E.	[Redacted]	[Redacted]	[Redacted]																							
F. APPROVED BY																										
[Redacted] <i>7/16/54</i>																										

STANDARD FORM 52  
 PREPARED BY THE  
 U. S. CIVIL SERVICE COMMISSION  
 JANUARY 1953 - FEDERAL PERSONNEL  
 MANUAL CHAPTER 10

**CONFIDENTIAL**  
 Security Information

**REQUEST FOR PERSONNEL ACTION**

VOUCHERED

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

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) [Redacted]	2. DATE OF BIRTH 20 Jan. 1924	3. REQUEST NO.	4. DATE OF REQUEST 10 Mar 1953
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Promotion</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		D. APPROVED: <i>5 July 53</i>	

FROM— Deputy Chief I.C. EC-190-12 GS-132-12 \$7010.00  DDP/SR Division SR-5 Far East Office of the Chief Washington, D.C.	9. POSITION TITLE AND NUMBER  10. SERVICE, GRADE, AND SALARY  11. ORGANIZATIONAL DESIGNATIONS  12. HEADQUARTERS	TO— Deputy Chief I.C. EC-190-13 GS-132-13 \$8360.00  DDP/SR Division SR-5 Far East Office of the Chief Washington, D.C.
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)  
 EC-190  
 APPROVED BY  
 FI CAREER SERVICE BOARD  
 DATE: JUN 24 1953  
*DDP/ADJ 35 June 53*

B. REQUESTED BY (Name and title)  
*Stine*

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)  
 Ext. 3748 Title: FI/CMO

13. VETERAN PREFERENCE				14. POSITION CLASSIFICATION ACTION				
None	WWII	OTHER	5-PT.	15 POINT	NEW	VICE	L.A.	REAL
								FI
				DISAB OTHER				

15. SEX	16. RACE	17. APPROPRIATION FROM: TO:	18. SUBJECT TO C. S. RETIREMENT ACT (Y/N)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
---------	----------	-----------------------------	---	---	---

21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>oco</i>	<i>July</i>	
E.			

F. APPROVED BY  
*7/2/53*  
**CONFIDENTIAL**  
 Security Information

PERSONNEL ACTION REQUEST				REGISTER NO.
NAME		REQUESTED EFFECTIVE DATE		
[REDACTED]		17 Feb.		
NATURE OF ACTION		WHEN LEAVING (EMPLOYER'S)		
Reassignment		LAST PAYING DAY:		
		EMPLOYEE'S SIGNATURE:		
FROM		TO		
TITLE		TITLE		
Operations Officer		Operations Officer		
GRADE AND SALARY		GRADE AND SALARY		
GS-12 \$7040		GS-12 \$7040		
OFFICE		OFFICE		
OPC		OPC		
DIVISION		DIVISION		
FE		EE		
BRANCH AND SECTION		BRANCH AND SECTION		
FE-3		EE-4 Great Russian Section		
OFFICIAL STATION		OFFICIAL STATION		
Washington, D. C.		Washington, D. C.		
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS:				
S-617 (3. 480) Jk 132				
MGR # 510				
RECOMMENDED:				
5 Jan. 52 [REDACTED]				
FOR USE OF PERSONNEL ONLY				
PLACEMENT		TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED		APPROPRIATIONS: 2123900		
CLEARANCE REQUESTED		ALLOTMENT: 2011		
CLEARANCE APPROVED		C. S. C. AUTHORITY: Sub A 6-16-52		
DATE	TYPE	DATE	TYPE	DATE SIGNATURE
				2-15-52 [Signature]
DATE	SIGNATURE		PERSONNEL RELATIONS	
			DATE	SIGNATURE
				[Signature]
CLASSIFICATION		APPROVALS		
BUREAU NO.	C. S. C. NO.	DATE		
9845		1/17/52		
NEW	VICE	SUBJECT TO SECURITY CLEARANCE		
	L.A.	SIGNATURE OF EXECUTIVE		
DATE	SIGNATURE		DATE	
2/5/52				
EFFECTIVE DATE	SIGNATURE OF DIVISION CHIEF			
	[REDACTED]			



PERSONNEL ACTION REQUEST

REGISTER NO.

NAME	REQUESTED EFFECTIVE DATE
NATURE OF ACTION <b>Promotion</b>	WHEN LEAVING (VOUCHERED) <i>20 Jan. 52</i>
FROM	TO
TITLE <b>Operations Officer</b>	<b>Operations Officer</b>
GRADE AND SALARY <b>GS-11 \$5400.00</b> <i>5980</i>	<b>GS-12</b> <i>7040</i> <b>\$6400.00</b>
OFFICE <b>OPC</b>	<b>OPC</b>
DIVISION <b>FE</b>	<b>FE</b>
BRANCH AND SECTION <b>FE-3</b>	<b>FE-3</b>
OFFICIAL STATION <b>Washington, D. C.</b>	<b>Washington, D. C.</b>
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>	DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>

REMARKS: *(S-617)* *132*  
*# 9930*

RECOMMENDED: *30 Oct. 51* (DATE) *[Signature]* (SIGNATURE OF OFFICE CHIEF, SUPERVISOR OR ADM. OFFICER)

FOR USE OF PERSONNEL ONLY

PLACEMENT				TRANSACTIONS AND RECORDS			
DATE QUALIFICATIONS APPROVED <i>W. Jensen</i>				APPROPRIATION: <i>212 3200</i>			
CLEARANCE REQUESTED				ALLOTMENT:			
DATE	TYPE	DATE	TYPE	C. S. C. AUTHORITY: <i>2017</i>			
DATE		SIGNATURE		DATE SIGNATURE	SIGNATURE		
CLASSIFICATION				PERSONNEL RELATIONS			
BUREAU NO. <i>9845</i>	C. S. C. NO.	DATE APPROVED <i>1/17/52</i>		DATE	SIGNATURE		
NEW	VICE	L. A.	FEAL	APPROVALS	SUBJECT TO SECURITY CLEARANCE		
DATE <i>1/17/52</i>	EFFECTIVE DATE			DATE	SIGNATURE OF EXECUTIVE		
JAN 1 1952				DATE	SIG.		

PERSONNEL ACTION REQUEST

REGISTER NO. 3511

NAME		REQUESTED EFFECTIVE DATE	
		29 April 57	
NATURE OF ACTION		WHEN LEAVING (VOICED)	
Transfer Promotion			
FROM		TO	
TITLE		TITLE	
Intelligence Officer GS-9		Intelligence Officer	
GRADE AND SALARY		GRADE AND SALARY	
GS-9, \$4600 p/a		GS-11, \$5400 p/a	
OFFICE		OFFICE	
OPC		OPC	
DIVISION		DIVISION	
FE		FE	
BRANCH AND SECTION		BRANCH AND SECTION	
FE-3 Japan Sec.		FE-3	
OFFICIAL STATION		OFFICIAL STATION	
Washington, D. C.		Washington, D. C.	
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>	
REMARKS:			
178 In grade since 14 Feb 57 S-24 1 Oct 50 #5729			
RECOMMENDED:			
11 March 1951		[Signature] Chief, FE Division	
FOR USE OF PERSONNEL ONLY			
PLACEMENT		TRANSACTIONS AND RECORDS	
DATE QUALIFICATIONS APPROVED		APPROPRIATION	
30 Nov 51		2115900	
CLEARANCE REQUESTED		ALLOTMENT	
		841-101	
DATE		C. S. C. AUTHORITY	
		Sec 6.116A	
DATE		DATE SIGNATURE	
		5-1-57 [Signature]	
DATE		SIGNATURE	
		[Signature]	
CLASSIFICATION		PERSONNEL RELATIONS	
BUREAU NO.		DATE	
2996			
C. S. C. NO.		APPROVALS	
3032		DATE	
DATE APPROVED		SIGNATURE OF EXECUTIVE	
6-2-57		[Signature]	
NEW		DATE	
VICE		SIGNATURE OF DIVISION CHIEF	
L.A. <input checked="" type="checkbox"/>		27 Apr [Signature]	
REAL			
DATE			
3/7/51			
EFFECTIVE DATE			

PERSONNEL ACTION REQUEST				REGISTER NUMBER	
NAME		REQUESTED EFFECTIVE DATE		2908	
NATURE OF ACTION <i>Exalted Appointment</i>		WHEN LEAVING (VOUCHERED)		17 Feb 1951	
TITLE		LAST WORKING DAY:		EMPLOYEE'S SIGNATURE:	
GRADE AND SALARY		Intelligence Officer			
OFFICE		OS-9, \$1600 p/a			
DIVISION		OPC			
BRANCH AND SECTION		FE			
OFFICIAL STATION		FE-3, Japan Section			
DEPARTMENTAL <input type="checkbox"/>		FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/>	
FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/>		FIELD <input type="checkbox"/>	
REMARKS: <span style="float: right;">132</span>					
<p>S-6 FE-39 JBEDICT <span style="float: right;"># 4998</span></p> <p>Transfer leave <i>for</i> vouchered funds.</p> <p>Please move <input type="checkbox"/> from S-6 to S-7, FE-3, <input type="checkbox"/> Washington Hdqrs.</p> <p><i>Consent for chg suspension and subjects 1/19/51</i></p> <p><i>Ch J. B. Security Div 1/25/51</i></p>					
RECOMMENDED:					
<p>9 January 1951 <span style="float: right;">for <i>W. H. ...</i></span> Chief, FE Division</p> <p>DATE SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR ADM. OFFICER</p>					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED			APPROPRIATION: 211 59 00		
23 Jan 51 <i>FLG</i> <i>June</i>			ALLOTMENT: 541-101		
CLEARANCE REQUESTED			CSC AUTHORITY: <i>Like 6.11.51</i>		
CLEARANCE APPROVED			DATE SIGNATURE		
DATE	TYPE	DATE	TYPE	DATE	SIGNATURE
				2/17/51	<i>J. B. ...</i>
CLASSIFICATION			PERSONNEL RELATIONS		
BUREAU NO.			DATE		
2977			SIGNATURE		
C.S.C. NO.			APPROVALS		
3051			<input type="checkbox"/> SUBJECT TO SECURITY CLEARANCE		
DATE APPROVED			DATE		
6-2-49			SIGNATURE OF EXECUTIVE		
NEW	VICE	I.A.	REAL	DATE	SIGNATURE OF DIVISION CHIEF
		<input checked="" type="checkbox"/>			
DATE	SIGNATURE		DATE	SIGNATURE OF DIVISION CHIEF	
2/17/51	<i>J. B. ...</i>				
EFFECTIVE DATE					

SECRET

SECRET

SECRECY AGREEMENT

1. I,  understand that by virtue of my duties in the CIA I may be the recipient of information and intelligence which concerns the present and future security of the United States and which belongs to the United States. This information and intelligence, together with the methods of collecting and handling it, are classified according to standards set in the State, War, and Navy Departments. I have read and understand the provisions of the Act of Congress of June 15, 1917 (Espionage Act), as amended, concerning the disclosure of information relating to the National Defense and I am familiar with the penalties provided for violation thereof.

2. I agree that I do not now, nor shall I ever possess any right, interest, title or claim in or to any of the information or intelligence or the methods of collecting or handling of it which has come or shall come to my attention by virtue of my connection with the CIA, but shall always recognize the property right of the United States of America in and to such matters.

3. I do solemnly swear that I will never divulge, publish nor reveal either by word, conduct, or by any other means such classified information, intelligence or knowledge, except in the performance of my official duties and in accordance with the laws of the United States, unless specifically authorized in writing in each case by the CIA.

4. I understand that no change in my assignment or employment will relieve me of my obligation under this oath and that the provisions of this oath will remain binding upon me even after the termination of my services with the United States.

5. I understand that my employment by the CIA is conditioned upon my understanding of and strict compliance with "Security Regulations \_\_\_\_\_," and the appendices thereto.

6. I take this obligation freely, without any mental reservation or purpose of evasion.

In witness whereof I have set my hand and seal this 21st day of November 1949.

X  (~~SECRET~~)

Sworn to before me this 21st day of November 1949.

at Washington, D.C.

SECRET  
SECRET

SECRET

PERSONNEL NUMBER		BIOGRAPHIC PROFILE (PART I)		DOB: 7 Nov 1921				
[REDACTED]		[REDACTED]		20 Nov 1949				
MARRIED		3 1953 1958 1963		III III				
MEMBERSHIP		OTHER STATUS		POS C/S POS C/S				
CURRENT RESERVE STATUS		GRADE		ACTIVITY WITH CIA				
X				RELEASED				
ASSESSMENT DATE		PROFESSIONAL TEST DATE		LIFE TEST DATE				
None		None		None				
15. NON-CIA EMPLOYMENT								
1943-48 Military Service, US Army, 1st Lt. - Civ. Consulting Officer, Japanese Translator & Inspector, Liaison Officer								
1949 Guide Publishing Co, Baltimore, Md - Country Editor of weekly paper								
1949 Baltimore Housing Authority, Md - Administrative Officer								
16. NON-CIA EDUCATION								
1942 Trinity College, Conn - French								
1940-42 Sir George Williams College, Montreal, Canada - French								
1945 Univ of Michigan, Army Language School - (1947), Oriental Civilization, Japanese								
1951-52 Georgetown Univ Graduate School - International Relations								
17. FOREIGN LANGUAGE ABILITIES								
French - R, P, S, U, High W, Inter (Feb 1962), Trans & Interp Aug 1957								
Japanese - R, S, U, Inter (Mar 1962), R, W, High Trans & Interp Aug 1957								
18. AGENCY SPONSORED TRAINING								
1949-50 USIA								
1950 Intel Orient								
1950 Ops								
1950 Ops Detail								
19. CIA EMPLOYMENT HISTORY SINCE 18 SEPT 1949 (Personnel Actions, Military Orders, and Principal Details)								
EFFCT	DATE	POSITION	TITLE	OCCUPATIONAL CODE	GRADE	DD	ORGANIZATION & BRANCH (if any)	LOCATION
	Nov 1949	I.O.		0138.06	7		CAC/EE/EE/EE/EE/EE	Hq
	Oct 1950	" "		0138.06	9		CAC/EE/EE	"
	Apr 1951	" "		0138.06	11		CAC/EE/EE, FE EE	"
	Jan 1952	Ops Off		0138.01	12		" " " "	"
	Jul 1953	" "		0138.01	13		DDP/EE/EE/EE, FE EE	"
	Feb 1954	Area Ops Off		0138.01	13	FE	DDP/EE/EE/EE, FE EE	"
	Jan 1955	" " "		0138.01	14	SI	DDP/EE/EE/EE Area	[REDACTED]
	Oct 1955	Ops Off		0138.01	14	B	DDP/EE/EE/EE, EE 6	Hq
	Sep 1962	" "		0138.01	14	B	DDP/EE/EE/EE Area	[REDACTED]
	Feb 1963	" "		0138.01	15	B	" " " "	"
	Oct 1963	" "		0138.01	15	B	DDP/EE/EE/EE Internal Ops	"
	Mar 1964	" "		0138.01	15	B	DDP/EE/EE/EE Internal Ops	"
	Feb 1967	" "		0136.01	15	D	DDP/EE/EE/EE/CenReg	"
20. DATE REV.		21. PROFILE REVIEWED BY		22. ITEMS 1-19 REVIEWED & VERIFIED BY EMPLOYEE				
20 Apr 1967		[REDACTED]		NO				

SECRET

23. SERIAL NO.		BIOGRAPHIC PROFILE (PART 2)	
NAME		DATE OF BIRTH	
[REDACTED]		[REDACTED]	
24. QUANTITIES OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS			
[REDACTED]			
24. SUMMARY OF CAREER PREFERENCE OUT			
[REDACTED]			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
[REDACTED]			
26. RECOMMENDATIONS			
<p>1955 from Director, FBI and the DFI for service in connection</p> <p>Commendation 1955 from CIA Defector Coordinator for cooperation and competence in the handling of the defectors.</p> <p>Commendation 1955 from the DFI for high degree of personal competence and devotion to duty.</p> <p>Letter of Appreciation 1960 for suggestion which proposed revisions of Form 1050.</p> <p>Appreciation 1960 from Commandant, USAP Command and Staff College for fine lecture.</p>			
27. DATE REVIEWED		28. PROFILE REVIEWED BY	
20 Apr 1964		[REDACTED]	

006102

20 Jan 1974

PERSONAL DATA

NAME: [REDACTED]

DATE OF BIRTH: [REDACTED]

DATE OF ENTRY: [REDACTED]

DATE OF DEPARTURE: [REDACTED]

DATE OF RE-EVALUATION: [REDACTED]

DATE OF ASSESSMENT: [REDACTED]

1949-50 Military Service, US Army, 1st Lt. - Civilian Contracting, [REDACTED]

1949 Guide Publishing Co, Baltimore, Md - County Editor of weekly paper

1949 Baltimore Housing Authority, Md - Administrative Officer

1949-50 [REDACTED] College, Conn - French

1949-50 Sir George Williams College, Montreal, Canada - French

1949-50 Univ of Michigan, Lang Language School - 21(1949), General Civilian Contracting, Japanese

1951-58 Georgetown Univ Graduate School - International Relations

17. FOREIGN LANGUAGES

French - B, U, S, U, Intermediate (Feb 1960), [REDACTED] & [REDACTED] May 1957

Japanese - B, S, U, Intermediate (Mar 1962), [REDACTED], [REDACTED], [REDACTED] & [REDACTED] May 1957

18. SPONSORED TRAINING

1949-50 [REDACTED] [REDACTED] [REDACTED]

1950 [REDACTED] [REDACTED] [REDACTED]

1950 [REDACTED] [REDACTED] [REDACTED]

1950 [REDACTED] [REDACTED] [REDACTED]

19. EMPLOYMENT HISTORY SINCE 1947 (Professional, Executive, Clerical, and General Services)

EFFECTIVE DATE	POSITION TITLE & ORGANIZATION	GRADE	ORGANIZATION & COUNTY (SEE 11)	STATUS
Nov 1949	W.O.	0132.00	OPC/OPS S&L/CANBLOT	...
Oct 1950	" "	0132.00	OPC/OPS-3	...
Apr 1951	" "	0132.00	OPC/OPS S&L, VA IS	...
Jan 1952	Ops Off	0133.01	" " " "	...
Jul 1953	" "	0133.01	OPC/OPS S&L, FLOR	...
Feb 1954	Assoc Ops Off	0133.02	OPC/OPS S&L, VA IS	...
Jan 1955	" "	0133.02	OPC/OPS S&L, VA IS	...
Oct 1955	Ops Off	0133.01	OPC/OPS S&L, VA IS	...
Aug 1962	(Resignation from SE Status)			
Aug 1962	(Excepted Appt to SA Status)			
Sep 1962	Ops Off	0136.01	D SR/WE Area	...
Feb 1963	Ops Off	0136.01	D SR/WE Area	...
Oct 1963	Ops Off	0136.01	D WE/External Ops	...
Mar 1964	Ops Off	0136.01	D WE/Internal Ops	...
Feb 1967	Ops Off	0136.01	D EUR/FF/CentReg	...

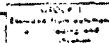
20. DATE REVIEWED: 20 Apr 1968

21. REVIEWED BY: [REDACTED]

22. APPROVED BY: [REDACTED]

SECRET

FITNESS REPORT		EMPLOYEE SERIAL NUMBER
SECTION A		GENERAL
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX
4. GRADE	5. SSN	
6. OFFICIAL POSITION TITLE	7. DIVISION OF ASSIGNMENT	8. CURRENT STATION
9. CHECK IN TYPE OF APPOINTMENT	10. CHECK IN TYPE OF REPORT	
<input type="checkbox"/> CAREER <input type="checkbox"/> PROBATIONARY <input type="checkbox"/> TEMPORARY <input type="checkbox"/> SPECIAL (Specify)	<input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	<input type="checkbox"/> ASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From - to)	
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 prepared 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).		
SP		RATING LETTER
	See the nature of further developing reports to enable entries and prepare to enter the overall cost of the	O
SPECIFIC DUTY NO. 2	Upon his to gain access to internal personnel and spot leads on eventual access and support against the local system and other users.	S
SPECIFIC DUTY NO. 3	Developed and assessed contacts of individuals with whom he has had contact as well as access prepared to the local system and other users.	P
SPECIFIC DUTY NO. 4	Responds to various station requirements including investigative work.	S
SPECIFIC DUTY NO. 5	Reports on the above activities.	P
SPECIFIC DUTY NO. 6		
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  
CLASSIFIED

NATIVE BORN SUBJECTS

**SECTION C**  
Indicate significant strengths of weaknesses demonstrated in current position by the subject, relative to his contribution 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. An title or explain ratings given in Section B to provide basis for determining future personnel action. Names of supervisors and dates of supervisory duties and cost control systems in the use of personnel, space, equipment and funds, must be given, if applicable. If extra space is needed to complete

Subject has had occasional difficulty switching from "professional" or intellectual subjects in his development of PERSONAL personalities or access prospects to more down-to-earth interests necessary --con't--

**SECTION D** **CERTIFICATION AND COMMENTS**

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

DATE: 9 June 1971  
SIGNATURE OF EMPLOYEE: /s/

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 18 months  
IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE:   
OFFICIAL TITLE OF SUPERVISOR: Handling Officer  
TYPED OR PRINTED NAME AND SIGNATURE: /s/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL  
The Station submitted comments on Subject's dossier recently in CRT-16549 (8 April 1971), to which we should add that Subject has, largely on his own merits, acquired a solid and potentially highly useful

DATE: 24 May 1971  
OFFICIAL TITLE OF REVIEWING OFFICIAL:   
TYPED OR PRINTED NAME AND SIGNATURE: 0008

S H C R E T

- 2 -

FRANK'S REPORT

Section C (continued)

to the development of human relations. His forte is therefore more in the field of creating and making operational contacts than in that of more than short-range operational development. Subject's operational situation is "It is impossible for him to attempt recruitments." Thus, his very real achievements are not by essence of the spectacular variety.

Subject's reporting has been satisfactory and continues to be copious. He could, however, further improve the collectivity of the leads provided the station and make more of an effort to "digest" the information contained in his reports.

Although Subject has, at present, no supervisory function, he has repeatedly requested such a responsibility. He is careful with operational expenses and has exercised good security.

During the period under review, additional efforts have been made to make full use of subject's potential and integrate him further in the work of the station component with which he works. He is a particularly valuable asset for the station programs directed against the local targets and water targets.

Section E (continued)

substantial. In a word, is it worth it? We do not yet know, although our initial impressions are favorable.

On the fitness report itself, this writer would have preferred an "A" rating for specific duty within one. Subject may ultimately deserve an "A", but it does not seem warranted at the present time. However, I believe the overall rating would more properly have been in the higher range of the "B" category, rather than "C", but it is of course a subjective judgment of the rating officer, who is more intimately and directly involved with subject on a frequent basis.

In sum, [redacted] is capable, and only time will reveal to what extent the [redacted] requirements permit a full measure on behalf of the Organization. We are following this aspect closely and will be commenting upon it subsequently as we gain experience and knowledge.

S H C R E T

**APPRAISAL REPORT**

<b>SECTION A</b>		<b>GENERAL INFORMATION</b>	
1. NAME (Last, First, Middle Initial)	2. DATE OF BIRTH (MM/DD/YY)	3. GRADE	4. OFFICE
5. OFFICIAL POSITION TITLE	6. DUTY ASSIGNMENT OR ASSIGNMENTS (List in order of assignment or priority of position)		
7. CHARACTER OF APPOINTMENT	8. REPORTING PERIOD (From - to)		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT (Specify)	
9. CAREER PROFESSIONAL (See instructions - Section C)	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> PROMOTIONAL (Specify)	
10. SPECIAL APPOINTMENT	11. REPORTING PERIOD (From - to)		
	1 April 1969 - 31 March 1970		
<b>SECTION B</b>			
<b>PERFORMANCE EVALUATION</b>			
<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.		
<u>M-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.		
<u>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.		
<u>S-Superior</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.		
<b>SPECIFIC DUTIES</b>			
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).			
SPECIFIC DUTY NO. 1	Established and maintains a [redacted] for the purpose of developing natural access to Station targets.	RATING LETTER	S
SPECIFIC DUTY NO. 2	Uses [redacted] to develop leads on eventual access or support type assets to be used by the Section against the local MIMARSII targets.	RATING LETTER	S
SPECIFIC DUTY NO. 3	Responds to various Station requirements including investigative work.	RATING LETTER	S
SPECIFIC DUTY NO. 4	Initiates contact with selected local MIMARSII targets and undertakes to develop sufficient rapport with them to provide operational assessments.	RATING LETTER	S
SPECIFIC DUTY NO. 5		RATING LETTER	
SPECIFIC DUTY NO. 6		RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>			
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.			RATING LETTER
			S



SECRET

Section 7.3 continued

from the Organization, his continued presence at this Station definitely appears to be warranted for a suitable period to reach more definite conclusions concerning the level of his actual performance over a somewhat longer period than that reflected by this report.

On balance, we are pleased that this officer has responded so well to greater case officer direction and that, to his inspiration somewhat made aggressive efforts to expand his network contacts in immediate proximity to the primary Station targets. This officer does bring many talents to bear on his operational activity: he has obviously smart branch, a solid and available [redacted] and a vast network of contacts in the local community. Nonetheless, it will require additional time to explore these contacts in depth, select those which appear to be operationally viable, and pursue them actively either to the point of recruitment by another officer or elimination from further development, for whatever reason.

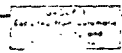
In sum, in spite of the recognized and commendable improvement in this officer's performance during the period under review, the reviewer submits that the letter grade for specific duties 3 and 4 would more properly have been a "P", and that the overall rating, at this point, would more accurately be set at a level between "P" and "B", probably closer to the former than the latter.

This reviewing comment has been read by the officers who prepared the Witness Report.

SECRET

SECRET

FITNESS REPORT			EMPLOYEE SERIAL NUMBER		
SECTION A			057301		
1. NAME	2. DATE OF BIRTH	3. SEA	4. GRADE	5. SO	
6. OFFICIAL POSITION TITLE		7. OFFICER OF ASSIGNMENT / 8. CURRENT STATION			
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
CAREER RESERVE TEMPORARY		INITIAL		REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)		ANNUAL		REASSIGNMENT EMPLOYEE	
SPECIAL (Specify)		SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
31 May 1959		1 July 1958 - 30 June 1959			
SECTION B PERFORMANCE BY					
<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. Desirable 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>					
SPECIAL 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
[redacted] as a genuine working member of his profession.					O
SPECIFIC DUTY NO. 2					RATING LETTER
Spotting and assessing persons of operational interest to [redacted] and to other stations.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Investigating of organizations and phenomena of operational interest to the Station.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Collection of positive and operational information using his cover for contacts.					S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
16 July 59					
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



SECRET

SECTION C NARRATIVE COMMENTS

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

See attached sheet.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE 15 May 1963 SIGNATURE OF EMPLOYEE

BY SUPERVISOR

IF EMPLOYED HAS BEEN UNDER SUPERVISION 6 1/2 months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE 15 May 1963 OFFICIAL TITLE OF SUPERVISOR Ops Officer TYPED OR PRINTED NAME AND SIGNATURE /s/ [ ]

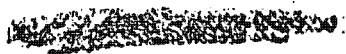
2. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL See attached sheet.

DATE 20 May 1963 OFFICIAL TITLE OF REVIEWING OFFICIAL Ops Officer TYPED OR PRINTED NAME AND SIGNATURE /s/ Edward Ryan

SECRET

SECRET

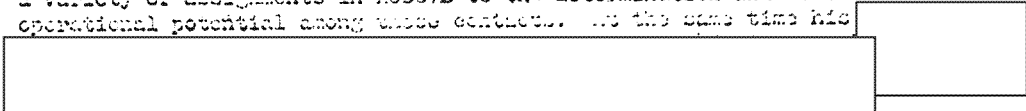


SECTION C

NARRATIVE COMMENTS



During the reporting period he has developed a wide circle of contacts in the scientific and journalistic milieu and applies a long background in a variety of assignments in HUSCOM to the determination and assessment of operational potential among these contacts. At the same time his



This employee requires a minimum of detailed operational supervision; it is necessary in specific cases only to indicate the operational or informational objectives.

From the point of view of administrative support, his attention to detail and meticulousness reduce the problems of his support by the Station to a minimum.

This employee uses the [redacted] continuously, and his facility in such as to permit him to handle himself consistently in a broad range of complex technical subjects. He has in addition undertaken specialized [redacted] language training to develop this capability further. His operational reporting is excellent both with regard to clarity and pertinence.

In the immediate future he will be assigned case work, for the most part in fields where it will complement, and be complemented by, his independent operational activities [redacted]

SECRET





**SECRET**  
(When Filled In)

REF: 16 AUG 72

NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)															
006102		[REDACTED]															
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT									
RESIGNATION						MO DA YR 05 14 72		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		3130 1231 0000											
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION											
DDP/EUROPEAN DIVISION FOREIGN FIELD						[REDACTED]											
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION									
OPS OFFICER						0568		0									
14. CLASSIFICATION SCHEDULE (GS, LR, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE									
GS				0136.01		15 2		31534									
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. Mdn's Code		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
45		10		NUMERIC ALPHABETIC								MO DA YR 01 00 24		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 REQ. NO		34. SER		EOD DATA →			
MO DA YR				1-ESC 2-LIA 3-TICA 5-NONE		GAINFOG		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		MO DA YR		MO DA YR		CAR BSVV 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				NO TAX EXEMPT		STATE CODE	
0- NO PREVIOUS SERVICE 1- BREAK IN SERVICE 2- BREAK IN SERVICE (LESS THAN 3 YRS) 3- BREAK IN SERVICE (MORE THAN 3 YRS)						1- YES 2- NO				1- YES 2- NO							
SIGNATURE OR OTHER AUTHENTICATION												<div style="border: 2px solid black; padding: 10px; display: inline-block;"> <p style="font-size: 24px; margin: 0;">POSTED</p> <p style="font-size: 24px; margin: 5px 0 0 0;">8-11-72 <i>M</i></p> </div>					

FORM 5-66 1150- Use Previous Edition  
Mfg. 10-67

**SECRET**  
**WEB**

GROUP 1  
Excluded from automatic  
downgrading and  
declassification  
(When Filled In)

5010-107 THE STANDARD REGISTRATION SYSTEM U.S.A.

12/1/72

1. SERIAL NO.		NAME		3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
006102		<del>XXXXXXXXXXXXXXXXXXXX</del>		44 620	CF						
6. OLD SALARY RATE				7. NEW SALARY RATE			8. TYPE ACTION				
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.		
GS	15	7	\$29,099	01/26/69	GS	15	R	\$29,907	01/23/72		
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.											
SIGNATURE						DATE					
						20 Dec 71					
<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 7-66 560 E Use previous editions		PAY CHANGE NOTIFICATION						(4-31)			

"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
<del>XXXXXXXXXXXXXXXXXXXX</del>	006102	44	735	CF GS 15 7	\$30,701
<i>Richardson, Jacques</i>					

0000  
L 3

SECRET

BEG: 01 JUN 71

NOTIFICATION OF PERSONNEL ACTION															
CCB															
1 SERIAL NUMBER 006102															
3 NATURE OF PERSONNEL ACTION EXTENSION OF PRANTE: 24 FEBRUARY 1973						4 EFFECTIVE DATE MO DA YR 02 25 71		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		1136 1231 0000		50 USC 403 J						
9 ORGANIZATIONAL DESIGNATIONS DOP/EUR FOREIGN FIELD						10 LOCATION OF OFFICIAL STATION									
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 0668		13 SERVICE DESIGNATION D									
14 CLASSIFICATION SCHEDULE (GS LP etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 15 7		17 SALARY GRADE 29099								
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 44620 EUR		22 STATION CODE 24065		23 POSTAL CODE 3		24 DATE OF BIRTH MO DA YR 01 20 24		25 DATE OF GRADE MO DA YR		27 DATE OF LEV MO DA YR	
23 NTE EXPIRES MO DA YR 02 24 73		26 SPEC AL REFERENCE 82		30 RETIREMENT DATA 1 CSC 2 CIA 3 NCPA		31 DEPARTURE DATA CODE		32 Correction - Correction Data YES		33 SECURITY REQ NO		34 SER			
35 VET PREFERENCE		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY		39 REGU HEALTH INSURANCE YES		40 SOCIAL SECURITY NO					
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1 NO PREVIOUS SERVICE 2 BREAK IN SERVICE LESS THAN 2 YRS. 3 BREAK IN SERVICE MORE THAN 2 YRS.				42 LEA-E CAT CODE		43 FEDERAL TAX DATA YES		44 FEDERAL TAX DATA NO TAX DEPENDENTS		45 STATE TAX DATA NO TAX DEPENDENTS YES NO					
SIGNATURE OR OTHER AUTHENTICATION															
<div style="float: right; border: 1px solid black; padding: 5px; text-align: center;"> <p>POSTED</p> <p>6-2-71 <i>Law</i></p> </div>															

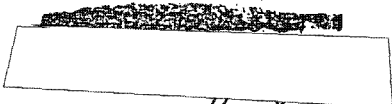
ABS

GROUP 1 Excluded from automatic downgrading and declassification

(When Filled In)

"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
	006102	44	620	CF GS 15 7	\$29,099

SECRET

BBG: 17 AUG 70

NOTIFICATION OF PERSONNEL ACTION

006

1. SERIAL NUMBER 006 102		2. NATURE OF PERSONNEL ACTION EXTENSION OF PRA NOTE: 24 FEBRUARY 1971		4. EFFECTIVE DATE MO DA YR 07   20   70		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
V TO V		V TO CF		1136 1231 0000		50 USC 403 J	
CF TO V		X CF TO CF					
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD				10. LOCATION OF OFFICIAL STATION			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0668		13. SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, IB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15-7		17. SALARY OR RATE 27463	

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 14620 EUR		22. STATION CODE 24065	23. INTEGREE CODE	24. HDQRS CODE 3	25. DATE OF BIRTH MO DA YR 01   20   24			26. DATE OF GRADE MO DA YR			27. DATE OF LEI MO DA YR			
28. NFE EXPIRES MO DA YR 02   24   71		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. CSC 2. CIA 3. FICA 4. NONE		31. SEPARATION DATA CODE		32. CORRECTION - CONCESSION DATA TYPE MO DA YR			33. SECURITY REG NO.			34. SEX		
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FECH / HEALTH INSURANCE			40. SOCIAL SECURITY NO.					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA								
45. FORM EXECUTED		46. NO TAX EXEMPTIONS		47. FORM EXECUTED		48. NO TAX STATE CODE										

SIGNATURE OR OTHER AUTHENTICATION

POSTED  
878.20

SECRET

FVD

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"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: 15 JULY 1969

[REDACTED]

SERIAL - ORGN. FUNDS GR-STEP  
006102 44 600 CF GS 15 7

NEW  
SALARY  
\$25,909

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-291 AND EXECUTIVE ORDER 11524 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  
[REDACTED]

SERIAL ORGN. FUNDS GR-STEP  
006102 44 620 CF GS 15 7

NEW  
SALARY  
\$27,463





"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 3 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 OCTOBER 1967

SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
[REDACTED] 006102	44	600	CF GS 15 6	\$20,585	\$21,469

"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
[REDACTED]	006102	44	600	CF GS 15 6	\$21,469	\$23,075

EUR

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS							
006102	[REDACTED]	44 600	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	15	6	\$23,075	01/29/67	GS	15	7	\$23,734	01/26/69		

CERTIFICATION AND AUTHENTICATION

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

SIGNATURE

*[Signature]*

DATE

11 Dec 68

NO EXCESS LWOP

IN PAY STATUS AT END OF WAITING PERIOD

LWOP STATUS AT END OF WAITING PERIOD

CLERKS INITIALS

AUDITED BY

FORM

SECRET  
(When Filled In)

F JH: 8 MAR 67

NOTIFICATION OF PERSONNEL ACTION											
OCB											
1. SERIAL NUMBER		2. [REDACTED]									
006102		[REDACTED]									
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT					02   26   67		REGULAR				
6. FUNDS		V TO W		W TO CF		7. Financial Analysis No. Chargeable		8. USC OR OTHER LEGAL AUTHORITY			
CF TO W		X		CF TO CF		7136 1231 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DDP/EUR FOREIGN FIELD CENTRAL REGION					[REDACTED]						
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER					0668		D				
14. CLASSIFICATION SCHEDULE (GS, LS, WS)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS			0136.01		15 6		20585				
18. REMARKS											
<div style="border: 1px solid black; padding: 5px; display: inline-block;">             POSTED ON              3-20-67  <i>[Signature]</i> </div>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Employ Code	21. OFFICE LOADING		22. STATION CODE	23. INTEGREE CODE	24. Hdqrs. Code	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI	
37	10	NUMERIC	ALPHABETIC	44600	EUR	24065	3	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 REQ. NO.	34. SEX
MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR			
02   25   69		82									
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
0 - NONE						CAB SERV		O. WAIVER		HEALTH INS CODE	
1 - 5 PT.						PROV. SERV.		1 - YES			
2 - 10 PT.											
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT.		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE				CODE		CODE		CODE			
0 - NO PREVIOUS SERVICE						FORM EXECUTED		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											
<div style="border: 1px solid black; padding: 5px; display: inline-block;">             POSTED              3-3-67  <i>[Signature]</i> </div>											

FORM 1150 5-66

Use Previous Edition

SECRET

*BJT*

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

\*PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962.\*

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966



SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
006102	50	600	CF GS 15 5	\$19,415	\$19,978

*Cur*

1. Serial No		2. [Redacted]		3. Cost Center Number		4. LWOP Hours						
006102		[Redacted]		50 600 CF								
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION				
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI		
GS	15	5	\$19,978	01/31/65	GS	15	6	\$20,587	01/29/67			
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: <i>W. Wood</i>						DATE: <i>10 Jan 67</i>						
<b>PAY CHANGE NOTIFICATION</b>												

RECEIVED  
JAN 1967

RZF: 7 APR 66

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
OCB										
1. SERIAL NUMBER 006102										
3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM					4. EFFECTIVE DATE MO. DA. YR. 04   10   66		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 6136 1231 0000		8. CSC OR OTHER LEGAL AUTHORITY SECTION 203 P.L. 88-643		
CF TO V		X		CF TO CF						
9. ORGANIZATIONAL DESIGNATIONS DDP/WE FOREIGN FIELD INTERNAL OPERATIONS SECTION					10. LOCATION OF OFFICIAL STATION					
11. POSITION TITLE OPS OFFICER					12. POSITION NUMBER 0885		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 5		17. SALARY OR RATE 19415			
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION.										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE 28	20. Empl. Code 10	21. OFFICE CODING NUMERIC ALPHABETIC 50600 WE		22. STATION CODE 24065	23. INTEGREE CODE	24. Hdqtrs. Code 3	25. DATE OF BIRTH MO. DA. YR. 01   20   24		26. DATE OF GRADE MO. DA. YR. 02   03   63	27. DATE OF LEI MO. DA. YR. 01   31   65
28. NTE EXPIRES NO. DA. YR.		29. SPECIAL REFERENCE 82	30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE CODE 2		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE NO. DA. YR.		33. SECURITY REQ. NO.		34. SEX
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.		36. SERV. COMP. DATE NO. DA. YR.		37. LONG. COMP. DATE NO. DA. YR.		38. CAREER CATEGORY CAV RESV PROV TEMP		39. FEGLI / HEALTH INSURANCE CODE CODE 0 - WAIVER 1 - YES		40. SOCIAL SECUR. TV NO.
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)			42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED: CODE 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO		CODE	NO TAX EXEMP.	STATE CODE
SIGNATURE OR OTHER AUTHENTICATION										

APR 31 1966

EOD DATA

POSTED  
APR 27 1966





MHC: 2 13 MAR 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
OCB										
1. SERIAL NUMBER 006102										
3. NATURE OF PERSONNEL ACTION REASSIGNMENT					4. EFFECTIVE DATE MO. DA. YR. 03 15 64		5. CATEGORY OF EMPLOYMENT REGULAR			
4. FUNDS			V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
			CF TO V		X		4136 6250 1012		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP WE INTERNAL OPERATIONS SECTION					10. LOCATION OF OFFICIAL STATION					
11. POSITION TITLE OPS OFFICER					12. POSITION NUMBER 0885		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 4		17. SALARY OR RATE 17210			
18. REMARKS  <div style="border: 1px solid black; padding: 5px; display: inline-block;">FOSTERED 03-15-64</div>										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE 37	20. EMPLOY. CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 50600 WE		22. STATION CODE 24065	23. INTEGREE CODE	24. MGRS. CODE 3	25. DATE OF BIRTH MO. DA. YR. 01 20 24		26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. NTE EXPIRES MO. DA. YR. 03 14 66		29. SPECIAL REFERENCE 82	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. SEX
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.		36. SERV. COMP. DATE NO. DA. YR.		37. LONG. COMP. DATE NO. DA. YR.		38. CAREER CATEGORY CAR. RLSL. CODE PROV. TEMP.		39. FEGLI / HEALTH INSURANCE CODE 0 - WAIVER 1 - YES		40. SOCIAL SECURITY NO.
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)			42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		NO TAX EXEMPTIONS	NO TAX EXEMP.	STATE CODE
SIGNATURE OR ORDER AUTHENTICATION										
<div style="border: 2px solid black; padding: 10px; display: inline-block;"> <p style="font-size: 24px; margin: 0;">FOSTERED</p> <p style="font-size: 24px; margin: 0;">03/23/64 JK</p> </div>										

FORM 11-62 1150

Use Previous Edition

SECRET

20 MAR 1964 J Jd

GROUP 1  
Excluded from automatic  
downgrading and  
declassification



(4-5)  
When Filled In





(P)

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
ADPD 08/17/63											
1 SERIAL NUMBER		2									
006102		[REDACTED]									
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT					
REASSIGNMENT				07 08 63							
6 FUNDS		7 COST CENTER NO CHARGABLE		8 CSC OR OTHER LEGAL AUTHORITY							
<table border="1"> <tr> <td>V TO V</td> <td>V TO CF</td> </tr> <tr> <td>CF TO V</td> <td>X CF TO CF</td> </tr> </table>		V TO V	V TO CF	CF TO V	X CF TO CF	4136 6250 1012					
V TO V	V TO CF										
CF TO V	X CF TO CF										
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION							
PLP/SR DIV				[REDACTED]							
11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION					
CPS OFFICER				0240		C					
14 CLASSIFICATION SCHEDULE (GS, LR, etc)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE					
GS		0136.01		15							
18 REMARKS											
											
SIGNATURE OR OTHER AUTHENTICATION											
											

19 AUG 1963

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

BAB: 1 FEB 63

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 006102 037367		2. NAME [REDACTED]									
3. NATURE OF PERSONNEL ACTION PROMOTION						4. EFFECTIVE DATE MO DA YR 02   03   63		5. CATEGORY OF EMPLOYMENT REGULAR			
A. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 3134 4008 1000		B. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
CF TO V		X		CF TO CF		9. ORGANIZATIONAL DESIGNATIONS DDP SR FOREIGN FIELD WESTERN EUROPEAN AREA					
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0240		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 15 4		17. SALARY OR RATE 16005			
18. REMARKS  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;">         FEB 27 1963          [Signature]       </div>											
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
22	10	NUMERIC 60600	ALPHABETIC SR	24065		3	MO DA YR 01   20   24	MO DA YR 02   03   63	MO DA YR 02   03   63		
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG. NO.		34. SEE
NO. DA YR		80	1 - CSC 2 - FICA 3 - NONE				TYPE MO. DA. YR. EOD DATA				
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE		MO. DA. YR		MO DA YR		CAR RESV CODE PROV TEMP		CODE CODE 0 - WAIVER 1 - YES		HEALTH INS CODE	
0 - NONE 1 - 5 PT. 2 - 10 PT.											
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE				CODE		FORM EXECUTED: CODE 1 - YES 2 - NO		FORM EXECUTED: CODE 1 - YES 2 - NO		CODE NO TAX EXEMP. STATE CODE	
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)											
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;">           POS: [Signature]            FEB 27 1963         </div>											

FORM 462 1150 114

Use Previous Edition

11 FEB 1963

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC  
DOWNGRADING AND  
DECLASSIFICATION

(When Filled In)

[Handwritten initials]

**AUTOMATED PSI RECORD ADJUSTMENT**

◀	SERIAL NO.	LEI	PSI DUE DATE	ORGANIZATION CODE	CURRENT
		YR MO DA	YR MO DA	OFFICE DIVISION	GRADE STEP
		62   07   08	64   07   05	DDF/   SR	GS-14   6

PROJECTED	20 CHARACTERS
GRADE STEP	
GS-14 7	

FUND	SCHED.	CURRENT SALARY	PROJECTED SAL.	ID CODE	
V/CF		(OR HOURLY RATE)	(OR HOURLY RATE)		
CF	GS	\$14,970	\$15,865	C	>

REMARKS  
**Subject received a PSI 07/08/62 to GS-14-6 so will not be due another until 07/05/64.**

(2/27/62)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-795 AND  
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.  
 EFFECTIVE 14 OCTOBER 1962

[Redacted]

SERIAL	ORGN	FUNDS	OLD GROSS SALARY	NEW GROSS SALARY
CC6162		40600	CF 14 6 313510	14 6 314970

10/12/62  
 [Stamp]

PSC: 20 AUG 62

SECRET  
(When Filled In)

OAB												NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 88616						2. NAME (LAST-FIRST-MIDDLE) [REDACTED]																	
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT (CAREER)						4. EFFECTIVE DATE 08, 05, 62			5. CATEGORY OF EMPLOYMENT REGULAR														
6. FUNDS			V TO V			V TO CF			7. COST CENTER NO. CHARGEABLE 3134 4008 1000			8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J											
CF TO V			X			CF TO CF			9. ORGANIZATIONAL DESIGNATIONS DDP SR WESTERN EUROPEAN AREA														
10. LOCATION OF OFFICIAL STATION						11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0240			13. CAREER SERVICE DESIGNATION D								
14. CLASSIFICATION SCHEDULE (GS, RB, etc.) GS						15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 14 6			17. SALARY OR RATE 13510											
18. REMARKS  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;">           POSTED ON            20 Aug 62         </div>												SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 13		20. EMPLOY. CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 60600 SR				22. STATION CODE 24065		23. INTEGREE CODE		24. Hdqts. Code 3		25. DATE OF BIRTH 01, 20, 24			26. DATE OF GRADE 01, 16, 55			27. DATE OF LEI 01, 08, 61			
28. WFE EXPIRES			29. SPECIAL REFERENCE			30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE			31. SEPARATION DATA CODE			32. CORRECTION/CANCELLATION DATA TYPE NO. DA. YR.			33. SECURITY REQ. NO. 06102			34. SEX MI					
35. VET. PREFERENCE 1			36. SERV. COMP. DATE 03, 07, 44			37. LONG. COMP. DATE 11, 20, 43			38. CAREER CATEGORY CAR SERV PROV TEMP C			39. REGI / HEALTH INSURANCE CODE NO. DA. YR. 1 YES			40. SOCIAL SECURITY NO. 042205339								
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)						42. LEAVE CAT. CODE 3			43. FEDERAL TAX DATA FORM EXEMPTED, CODE 1 - YES 2 - NO 0 0			44. STATE TAX DATA FORM EXEMPTED, CODE 1 - YES 2 - NO											
SIGNATURE OR OTHER AUTHENTICATION												<div style="border: 2px solid black; padding: 10px; width: fit-content; margin: auto;">           POSTED            [Signature]         </div>											

FORM 4-62 1150

Use Previous Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

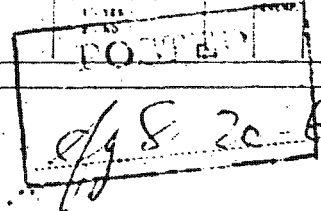
(4-62)

(When Filled In)

8-20-62

EAB: 16 AUG 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
006102											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
RESIGNATION						MO. DA. YR. 08 04 62		REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X						3234 1000 1000					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SR SR/6 OFFICE OF THE CHIEF						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
OPS OFFICER BR CH						0050		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE		
GS			0136.01			14 6			13510		
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. MGRS. CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
45	10						MO. DA. YR. 01 20 24				
28. NTC EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA		33. SECURITY REC. NO.	34. SER.
						180091		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	
CODE				CODE		CODE				CODE	
0 - NO PREVIOUS SERVICE						FORM EXECUTED				NO TAX STATE CODE	
1 - NO BREAK IN SERVICE						1 - YES					
2 - BREAK IN SERVICE (LESS THAN 3 YRS)						2 - NO					
3 - BREAK IN SERVICE (MORE THAN 3 YRS)											
SIGNATURE OR OTHER AUTHENTICATION											
											

234-1010-10  
3040  
85  
3/20

1 Serial No 006102		2 Name		3 Cost Center Number 60 300 V 7		4 LWOP Hours				
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-14	5	\$13,250	01/08/61	GS-14	6	\$13,510	07/08/62			
8 Remarks and Authentication										
/ / NO EXCESS LWOP / / EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS      AUDITED BY PAY CHANGE NOTIFICATION										

Form 9-61 560

Obsolete Previous Edition

(4-51)

SECRET  
(WHEN FILLED IN)

1. EMP. SERIAL NO. 006102		2. NAME			3. ASSIGNED ORGAN. DDP/SR 7		4. FUNDS V-20		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
GS-14	4	\$12990	NO.	DA.	YE.	GS-14	5	\$13250	NO.	DA.	YE.
			07	12	59				01	08	61
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK			11. AUDITED BY		
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. TYPE OF ACTION <input type="checkbox"/> P.S.I. <input type="checkbox"/> L.S.I. <input type="checkbox"/> PAY ADJUSTMENT						13. REMARKS					
14. AUTHENTICATION											
PAY CHANGE NOTIFICATION											

FORM 8-59

560 OBSOLETE PREVIOUS EDITION REPLACES FORM 560a AND 560b.

SECRET

OFFICIAL PERSONNEL FOLDER

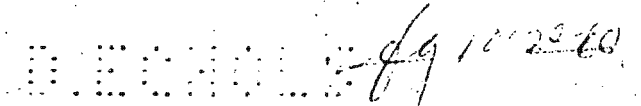
(4)

2220

SECRET  
(When Filled In)

REF: 30 SEPT 1960

NOTIFICATION OF PERSONNEL ACTION

OCF											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
006102											
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT AND TRANSFER TO VOUCHERDD FUNDS					MO. DA. YR.		REGULAR				
					10   02   60						
4. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		1234 1000 1000		50 USC 403			
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DDP SR SR 6 OFFICE OF THE CHIEF					WASH., D. C.						
11. POSITION TITLE					12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION				
OPS OFFICER BR CH					0050		D				
14. CLASSIFICATION SCHEDULE (GS, WB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS			0136.01		14 4		12990				
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Empl. 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	
16	10	NUMERIC	ALPHABETIC	75013		1	MO. DA. YR.	MO. DA. YR.	MO. DA. YR.		
		60300	SR				01   20   24				
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO.	34. SEX
NO. DA. YR.				1 - CSC 2 - PICA 3 - NONE		CCODE		TYPE MO. DA. YR.			
								EOD DATA			
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. MIL. SERV. CREDIT/LCO		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE		0 - NONE 1 - 5 PT 2 - 10 PT		NO. DA. YR.		NO. DA. YR.		1 - YES 2 - NO		CODE 0 - WAIVER 1 - YES	
								HEALTH INS CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA				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 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)		FORM EXECUTED		NO. TAX EXEMPTIONS		FORM EXECUTED	
						1 - YES 2 - NO				1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION											
											

05/10/18/20

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL  
(When Filled In)

U. S. GOVERNMENT PRINTING OFFICE: 1954-280090

1. Agency and organizational designations					2. Payroll period		3. Block No. LV		4. SRP No.		
5. Employee's name (and social security account number when appropriate)					6. Grade and salary GS-14, \$10,320						
PAYROLL CHANGE DATA											
	BASE PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F. L. C. A.	STATE TAX	GROUP LIFE INS.	NET PAY
7. Previous normal											
8. New normal											
9. Pay this period											
10. Remarks					11. Appropriation(s) SR 9			12. Prepared by DTS 3 May 56 13. Audited by			
<input type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase											
14. Effective date 15 Jul 56	15. Date last equivalent increase 16 Jan 55	16. Old salary rate \$10,320	17. New salary rate \$10,535	18. Release from military service <del>XXXXXXXXXXXXXXXXXXXX</del> SERVICE AND CONDUCT ARE SATISFACTORY (Signature or other authentication)							
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods)				<input type="checkbox"/> No excess LWOP. Total excess LWOP							
STANDARD FORM NO. 1126- Revised Form prescribed by Comp. Gen., U. S. October 26, 1954, General Regulations No. 102											

CONFIDENTIAL PAYROLL CHANGE SLIP — PERSONNEL COPY

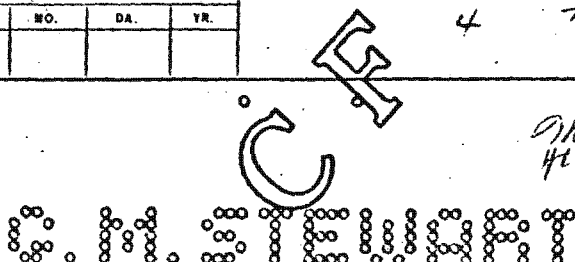
IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
DI	[Redacted]	506102	48 40	GS-14 4	\$12,075	\$12,990

/S/ EMMETT D. ECHOLS  
DIRECTOR OF PERSONNEL



**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO. 506102		2. NAME [REDACTED]			3. ASSIGNED ORGAN. DOP/SR 10		4. FUNDS UV		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			NO.	DA.	YR.				NO.	DA.	YR.
GS 14	3	\$11,835	01	12	58	GS 14	4	\$12,075	07	12	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF MCGRS LWOP					
IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK			11. AUDITED BY		
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	NO.	DA.	YR.	4 742 DOP 8/5/59 HEF 7/31/59					
14. AUTHENTICATION											
 PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO. 560a  
1 MAR. 58

**SECRET**

PERSONNEL FOLDER (4)

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE  
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI  
DIRECTIVE. SALARY AS OF 13 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
[REDACTED]	506102	GS-14-3	\$10,750	\$11,835

GORDON M. STEWART  
/S/ DIRECTOR OF PERSONNEL

S E C R E T

**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO. <b>506102</b>		2. NAME				3. ASSIGNED ORGAN. <b>DDP/SR 8</b>		4. FUNDS <b>UV</b>		5. ALLOCATION	
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
<b>14</b>	<b>2</b>	<b>\$10,535</b>	<b>07</b>	<b>15</b>	<b>56</b>	<b>14</b>	<b>3</b>	<b>\$10,750</b>	<b>01</b>	<b>12</b>	<b>58</b>
REMARKS											
<b>CERTIFICATION</b>											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED, OR PRINTED, NAME OF SUPERVISOR <b>BELIC, GEORGE</b>			DATE <b>15 Jan 1958</b>			SIGNATURE OF SUPERVISOR <i>George N Belic</i>					
<b>PERIODIC STEP INCREASE - CERTIFICATION</b>											

FORM NO. 560  
1 MAR 58

**SECRET**

PERSONNEL FOLDER (4)

**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO. <b>506102</b>		2. NAME				3. ASSIGNED ORGAN. <b>DDP/SR</b>		4. FUNDS <b>UV</b>		5. ALLOCATION	
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
<b>14</b>	<b>2</b>	<b>\$10,535</b>	<b>07</b>	<b>15</b>	<b>56</b>	<b>14</b>	<b>3</b>	<b>\$10,750</b>	<b>01</b>	<b>12</b>	<b>58</b>
<b>TO BE COMPLETED BY THE OFFICE OF COMPTROLLER</b>											
9. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LEAVE LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK			11. AUDITED BY		
<b>TO BE COMPLETED BY THE OFFICE OF PERSONNEL</b>											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO.	DA.	YR.						
14. AUTHENTICATION											
<b>PERIODIC STEP INCREASE - AUTHENTICATION</b>											

**SECRET**

PERSONNEL FOLDER (4)

SECRET

STANDARD FORM 52 PLANNED BY THE U. S. CIVIL SERVICE COMMISSION GENERAL REG. - FEDERAL PERSONNEL MANAGEMENT SYSTEM		UNVOUCHERED	
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs. - One given name, initials, and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
[Redacted]	20 Jan. 1924		26 Sept. '56
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>REASSIGNMENT</b>		6. EFFECTIVE DATE A. PROPOSED	7. U.S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: 21 27	
FROM - Area Ops Officer BCF-189-14 GS-0136.01-14 \$10,535.00 p.a.	8. POSITION TITLE AND NUMBER 9. SERVICE GRADE AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS	TO - Area Ops Officer BCF-189-14 GS-0136.01-14 \$10,535.00 p.a.  DDP/SR Far East Area [Redacted]	
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	(D)
A. REMARKS (Use reverse if necessary)  RE-SLOTTING FOR NEW APPROVED T/O.			
B. REQUESTED BY (Name and telephone extension) Robert D. Lovelace Ext. 4407		D. REQUEST APPROVED BY Signature: [Redacted]	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Title:	
13. VETERAN PREFERENCE NONE   WWII   OTHER 3 PT.   10 POINT DISAB.   OTHER		14. POSITION CLASSIFICATION ACTION NEW   VICE   I. A.   REAL	
15. SEX M	16. APPROPRIATION FROM: 7-3400-55-015 TO: 7-3400-55-015	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) SD: DI <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
20. STANDARD FORM 50 REMARKS  R.A. Skelton, L.S. 11/1/56 2 Oct 56			
21. CLEARANCES		INITIAL OR SIGNATURE	DATE
A.		[Signature]	11 OCT 1956
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.		743	10-9
E.			

USED IN LIEU OF SF 50  
NOTIFICATION OF PERSONNEL ACTION

POSTED  
11 OCT 1956

per 743 mar. 9 Oct '56

Agency and organizational designations		2. Pay roll		3. Sheet No. 5-3400-20		4. Slip No.	
5. Employee's name, last, first, middle, and social security number when appropriate		6. Grade and salary GS-13 \$8360.00					
PAY ROLL CHANGE DATA							
	BASE PAY	OVERTIME		GROSS PAY	RET.	TAX	NET PAY
7. Previous period							
8. New period							
9. Pay this period							
10. Remarks <i>5 8360</i> <b>ADJUSTED TO DIRECTIVE TO MGR. 1955 DIRECTIVE TO DCI</b>				11. Appropriation(s) SR 7		12. Prepared by NZ 9 Nov 54	
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase							
14. Effective date 2 Jan 55	15. Date last equivalent increase 5 Jul 53	16. Old salary rate \$8360.00	17. New salary rate \$8560.00	18. Performance rating is satisfactory or better.			
19. LWOP date (fill in appropriate spaces covering LWOP during following periods):				<input type="checkbox"/> No excess LWOP. Total excess \$0.00 <input type="checkbox"/> Excess LWOP. Total excess \$0.00			
STANDARD FORM NO. 1172d—Revised Form prescribed by Comp. Gen., U. S. Nov. 8, 1950, General Regulations No. 102							

PAY ROLL CHANGE SLIP—PERSONNEL COPY

**CONFIDENTIAL**

**CENTRAL INTELLIGENCE AGENCY**

**NOTIFICATION OF PERSONNEL ACTION**

**r/s**

1. NAME (LAST, FIRST, MIDDLE, ONE GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE																		
[Redacted]		20 Jan 1924		19 Jan. 1955																		
This is to notify you of the following action affecting your employment:																						
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY																			
PROMOTION (ASSIGNMENT)*		B.O.B. 16 Jun 1955	50 USCA 403 J																			
FROM		TO																				
Area Ops Officer (Br. Ch) EC-171-13 GS-0136.01-13 \$3560.00 per annum DDP/ER SR/5 Washington, D. C.		8. POSITION TITLE	Area Ops Officer BCF-189-14 GS-0136.01-14 \$9600.00 per annum DDP/ER Far East Area																			
9. SERVICE, SERIES, GRADE, SALARY		10. ORGANIZATIONAL DESIGNATIONS																				
11. HEADQUARTERS		12. FIELD OR DEPT'L																				
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL																				
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION																				
<table border="1"> <tr> <td>None</td> <td>5</td> <td>10</td> <td>15</td> <td>20</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		None	5	10	15	20						<table border="1"> <tr> <td>REG</td> <td>TITLE</td> <td>C. S.</td> <td>GRADE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>			REG	TITLE	C. S.	GRADE				
None	5	10	15	20																		
REG	TITLE	C. S.	GRADE																			
15. SEX, RACE		17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)																		
M		FROM: 5-3400-20 TO: 5-3400-55-035	Yes																			
20. LEGAL RESIDENCE		21. REMARKS																				
<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: MI.		This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.																				
*This action amends Item #9, on the "from" side, on Notification dated 11 Jan. 1955, to show the correct salary, previously shown as \$3360.00 per annum.																						
Subject to approved medical clearance prior to being sent overseas.																						
"Transfer TO Unvouchered funds FROM Vouchered funds."																						
1/20/55																						
22. SIGNATURE		23. AUTHORITY																				
[Signature]		[Signature]																				

**CONFIDENTIAL**











CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION (b)(6)

1. NAME (MR. MISS - MRS. - OR) LAST, FIRST, MIDDLE, INITIAL, OF, AND SURNAME		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
[REDACTED]		20 Jan. 1924	9930	18 Jan. 58
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Promotion		20 Jan. 58	Conduct 5-6.116(b)	
FROM		TO		
Intelligence Officer GS-11		Operations Officer GS-12		
GS-11-132 \$5940.00 per annum		GS-12-132 \$7000.00 per annum		
8. SERVICE SERIES, GRADE, SALARY		9. SERVICE SERIES, GRADE, SALARY		
OFC FE FE-3 Washington, D.C.		OFC FE FE-3 Washington, D.C.		
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS		
[REDACTED]		[REDACTED]		
12. FIELD OR DEPT'L		12. FIELD OR DEPT'L		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> 10% <input type="checkbox"/> 5% <input type="checkbox"/> 3% <input type="checkbox"/> 2% <input type="checkbox"/> 1% <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>		NEW <input type="checkbox"/> VICY <input type="checkbox"/> S.A. <input checked="" type="checkbox"/> REAL <input type="checkbox"/>		
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		16. RACE <input type="checkbox"/> W <input type="checkbox"/> N <input type="checkbox"/> O		
17. APPROPRIATION FROM 2123900 TO 2017		18. SUBJECT TO C. 5. RETIREMENT ACT (YES - NO) yes		
19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE Maryland		
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
(617)				
[REDACTED]				
[REDACTED]				
Personal Division				
22. SIGNATURE OR OTHER AUTHENTICATION				
ENTRANCE EFFICIENCY RATING: [REDACTED]				

STANDARD FORM 50  
OCTOBER 1969  
PROBULGATED BY  
U. S. CIVIL SERVICE COMMISSION  
CHAPTER 81, FEDERAL PERSONNEL MANUAL

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(a1)

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
[Redacted]		20 Jan. 1924	#5729	23 April 1951
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Transfer and Promotion FROM		29 April 1951	Schedule A-6, 116(b)	
8. POSITION TITLE		Intelligence Officer, GS-11		
Intelligence Officer, GS-9				
9. SERVICE, SERIES, GRADE, SALARY		GS-11-132 \$5400.00 per. annua.		
GS-9-132 \$4600.00 per. annua. Bu. #2974				
10. ORGANIZATIONAL DESIGNATIONS		OPC FE FE-3		
OPC FE FE-3 Japan Section				
11. HEADQUARTERS		Washington, D. C.		
Washington, D. C.				
12. FIELD OR DEPT'L		FIELD DEPARTMENTAL		
FIELD DEPARTMENTAL		FIELD DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE WWI OTHER 5-PT. 10-POINT DISAB. OTHER		NEW VICE I. A. REAL		
		Bu. #2996 COA3032 6/2/50		
15. SEX		16. APPROPRIATION		17. DATE OF APPOINTMENT OF AFFIDAVITS (ACCESSIONS ONLY)
		FROM: 2115900 TO: 841-101		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)
				19. DATE OF APPOINTMENT OF AFFIDAVITS (ACCESSIONS ONLY)
				20. CLAIMED PROVED STATE: Md.
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
(778)				
Pursuant to DCI Directive				
5740				
ENTRANCE EFFICIENCY RATING:				
22. SIGNATURE AND DIVISION IDENTIFICATION				
[Redacted Signature]				

Handwritten initials: ER R

12

STANDARD FORM 50 (8 PARTS)  
REVISED 1-48  
PUBLISHED BY  
CHAPTER 53, FEDERAL PERSONNEL MANUAL  
U. S. CIVIL SERVICE COMMISSION

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

P.C. 1/19/51  
(ml)

1. NAME (MR. MISS MRS. ONE GIVEN NAME, INITIALS AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
[Redacted]		20 Jan. 1924	4998	19 Feb. 1951
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Exempted Appointment		19 Feb. 1951	Schedule A-6.116(a)	
FROM		TO		
8. POSITION TITLE		Intelligence Officer, GS-9		
9. SERVICE, SERIES, GRADE, SALARY		GS-9-132-\$4600.00 per. annum.		
10. ORGANIZATIONAL DESIGNATIONS		OPC FB FK-3, Japan Section		
11. HEADQUARTERS		Washington, D. C.		
12. FIELD OR DEPT'L		12. FIELD OR DEPT'L		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> A.A. <input type="checkbox"/> REAL <input type="checkbox"/>		
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> O		17. APPROPRIATION
				FROM: 2115900
				TO: 041-101
		18. SUBJECT TO C. S. RETIREMENT ACT (YES--NO)		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		19 Feb. 1951
		20. LEGAL RESIDENCE		STATE: Md.
		CLAIMED <input type="checkbox"/> PROVED <input type="checkbox"/>		
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
Trial period has been completed.				
ENTRANCE EFFICIENCY RATING:				
[Redacted]				
[Redacted]				
Personnel Division 09				
22. SIGNATURE OR OTHER AUTHENTICATION				
[Signature]				
* U. S. GOVERNMENT PRINTING OFFICE : 1950-599275				

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME	DATE 9 January 1951	
NATURE OF ACTION Resignation	EFFECTIVE DATE <i>16 Feb 1951</i>	
	FROM	TO
TITLE	Intelligence Officer V	
GRADE AND SALARY	GS-9, \$4600 p/a	
OFFICE	OPC	
DIVISION	FE	
BRANCH	FE-3 Japan Section	
OFFICIAL STATION		
QUALIFICATIONS	APPROVAL	
	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	Chief, FE Division PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS	YES <input type="checkbox"/>	NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER		
REMARKS:  S-49 FE-39 JREDICT Transfer leave <del>to</del> unvouchered funds.  <i>- not due US for travel work</i>		

SECRET

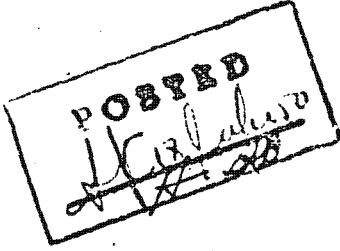
CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME		DATE	
[Redacted]		7 September 1950	
NATURE OF ACTION		EFFECTIVE DATE	
Promotion		1 October 1950	
	FROM	TO	
TITLE	Intelligence Assistant	Intelligence <i>Officer</i> ✓	
GRADE AND SALARY	GS-7 \$3825 p/a	GS-9 \$4600 p/a	
OFFICE	OIC	OIC	
DIVISION	FE	FE	
BRANCH	FE 3	FE 3	
OFFICIAL STATION	[Redacted]	[Redacted]	
QUALIFICATIONS	[Redacted]	EXECUTIVE	
CLASSIFICATION	F-75	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES	NO
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON		<input type="checkbox"/>	<input type="checkbox"/>
SECURITY CLEARED ON			
OVERSEAS AGREEMENT SIGNED			
ENTERED ON DUTY			
SIGNATURE OF AUTHENTICATING OFFICER			
REMARKS: Employee EOD with CIA 20 Nov 49 as GS-7 130 Charged to FE-11, JSEDIOT, Position No. 49, Japan <i>BLD H</i> <i>JL</i>			

SECRET

CONFIDENTIAL

RESTRICTED

<b>ENTRANCE ON DUTY RECORD</b>		DATE 18 July 1950	
TO:  OPC		BUILDING "X"	ROOM 1044
FROM: PERSONNEL OFFICER		EOD DATE 18 July 1950	
NAME OF EMPLOYEE [Redacted]			
POSITION TITLE Intelligence Assistant	GRADE GS-7	SALARY \$3325.00 per annum	
PAYROLL unvouchered funds	DUTY STATION [Redacted]		
DATE SECURITY CLEARED 10 June 1949	DATE OATH OF OFFICE ADMINISTERED 18 July 1950		
DATE PERMANENT IDENTIFICATION REQUESTED 18 July 1950	DATE FINGERPRINTED 18 July 1950		
DATE BRIEFED BY SECURITY 18 July 1950	DATE OF PHYSICAL EXAMINATION Not Applicable		
DATE 24 MONTH AGREEMENT SIGNED 18 July 1950			
EMPLOYEE'S EMERGENCY ADDRESS		[Redacted] (wife)	
EMPLOYEE'S LOCAL ADDRESS Silver Spring, Maryland, Tele: ST 3953			
REMARKS:  Same as above			
			
		SIGNATURE OF PERSONNEL OFFICER ROBERT S. RATTLES	

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME: [Redacted]		DATE: 15 July 1950
NATURE OF ACTION: Resignation		EFFECTIVE DATE: 00 17 July 1950
	FROM:	TO:
TITLE:	Intelligence Assistant	
GRADE AND SALARY:	GS 7, \$3825 p/a	
OFFICE:	OPO	
DIVISION:	Operations	
BRANCH:	FED	
OFFICIAL STATION:	[Redacted]	
QUALIFICATIONS:	APPROVAL FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION:	HOLLIS CHLOX, Fb PERSONNEL OFFICER <i>Robert J. [Signature]</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
A H OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
		SIGNATURE OF AUTHENTICATING OFFICER
REMARKS: Subject to be entered on duty on unvouchered funds in his true name of [Redacted]. The effective date of his true name appointment is 18 July 1950. <i>ASR [Signature]</i> Authorized Certifying Officer		

SECRET



SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME		DATE
NATURE OF ACTION		EFFECTIVE DATE
Exempted Appointment		7 November 1949 20 November 1949
	FROM	TO
TITLE		Intelligence Center GS-7
GRADE AND SALARY		GS-7, \$8225.00
OFFICE		CPC Ops Staff
BRANCH		FID Area III
DIVISION		50-11-1BEDICT
OFFICIAL STATION		
QUALIFICATIONS	APPROVAL	
	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON 21 November 1949		
SECURITY CLEARED ON 10 June 1949		
OVERSEAS AGREEMENT SIGNED 21 November 1949		
ENTERED ON DUTY 20 November 1949		
WCG-07/05/53 CSECID - 11/10/49 WOT 11/16/49		SIGNATURE OF AUTHENTICATING OFFICER
REMARKS: Opendory Acknowledged 21 November 1949. JST		
IS VERIFIED BY <u>109</u> DATE <u>1-13-55</u>		Provided to the Authorized Contracting Office

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER		
SECTION A					GENERAL		
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD		
[REDACTED]		20 Jan 24	M	GS-15	D		
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION			
Ops Off			DDP/EUR				
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/>	CAREER	<input type="checkbox"/>	RESERVE	<input type="checkbox"/>	INITIAL	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	CAREER-PROVISIONAL (See instructions - Section C)	<input checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT SUPERVISOR	<input type="checkbox"/>	
<input type="checkbox"/>	SPECIAL (Specify):	<input type="checkbox"/>	SPECIAL (Specify):	<input type="checkbox"/>	REASSIGNMENT EMPLOYEE	<input type="checkbox"/>	
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
31 May 1971				1 April 1970 to 31 March 1971			
SECTION B 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 C.						
<u>M-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.						
<u>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.						
<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).							
S	[REDACTED] for the purpose of further developing access to station targets and appreciably [REDACTED]					RATING LETTER	O
SPECIFIC DUTY NO. 2	Uses [REDACTED] to gain access to MHIARSH personnel and spot leads on eventual access and support-type assets directed against the local MHIARSH and TPFAS targets.					RATING LETTER	S
SPECIFIC DUTY NO. 3	Develops and assesses MHIARSH officials with whom he has made contact as well as access prospects to the local MHIARSH and TPFAS targets.					RATING LETTER	P
SPECIFIC DUTY NO. 4	Responds to various Station requirements including investigative work.					RATING LETTER	S
SPECIFIC DUTY NO. 5	Reports on the above activities.					RATING LETTER	P
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 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.

During the period under review, Subject managed to gain [redacted]

[redacted] He did this without help from Headquarters or the Station. Such an achievement is a tribute to Subject's fluency in [redacted] his ability to write, his general scientific know-how and his good business sense.

[redacted] Subject's contribution to the Station operations in the MHIARSH and TPFAS fields against which he is targetted temporarily decreased somewhat. Subject continued, however, to maintain contact with three local MHIARSH officials and initiated contact with three others. He also continued to search for new leads to personalities in the priority areas assigned to him. Subject has the capability to call on local scientists or technicians of just about any nationality with the possible exception of TPFAS citizens. He has used this near-unique potential well.

Subject has had occasional difficulty switching from "professional" or intellectual subjects in his development of MHIARSH personalities or access prospects to more down-to-earth interests necessary --con't--

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

9 June 1971

SIGNATURE OF EMPLOYEE

/s/ Thomas B. CASASIN

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

16 months

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

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

Handling Officer

/s/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

The Station submitted comments on Subject officer recently in OFPT-16549 (6 April 1971), to which we should add that Subject has, largely on his own merits, acquired a solid and potentially highly useful

DATE

24 May 1971

OFFICIAL TITLE OF REVIEWING OFFICIAL

DCS

TYPED OR PRINTED NAME AND SIGNATURE

/s/ Hugh Montgomery

SECRET

S E C R E T

- 2 -

FITNESS REPORT

Section C (continued)

to the development of human relations. His forte is therefore more in the field of spotting and making operational contacts than in that of more than short-range operational development. Subject's operational situation makes it impossible for him to attempt recruitments. Thus, his very real achievements are not by essence of the spectacular variety.

Subject's reporting has been satisfactory and continue to be copious. He could, however, further improve the selectivity of the leads provided the Station and make more of an effort to "digest" the information contained in his reports.

Although Subject has, at present, no supervisory function, he has repeatedly requested such a responsibility. He is careful with operational expenses and has exercised good security.

During the period under review, additional efforts have been made to make full use of Subject's potential and integrate him further in the work of the station component with which he works. He is a particularly valuable asset for the Station programs directed against the local MHIARSH and TPFASST targets.

Section D (continued)

substantial. In a word, is it worth it? We do not yet know, although our initial impressions are favorable.

On the fitness report itself, this rater would have preferred an "S" rating for specific duty number one; Subject may ultimately deserve an "O", but it does not seem warranted at the present time. Moreover, I believe the overall rating would more properly have been in the higher range of the "P" category, rather than "S", but it is of course a subjective judgment of the rating officer, who is more intimately and directly involved with Subject on a frequent basis.

In sum, [ ] is superb, and only time will reveal to what extent the [ ] requirements permit a full measure on behalf of the Organization. We are following this aspect closely and will be commenting upon it subsequently as we gain experience and knowledge.

S E C R E T

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY				
NAME OF EMPLOYEE (Use pseudo only if SA)		DATE (from item S-2)	NAME OF SUPERVISOR (Leave)	
[REDACTED]		17 Oct 69	[REDACTED]	
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
12 December 1969		[REDACTED]-15240		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE		4. STATION OR BASE
20 I 1924	CS	S&T project manager, Area Ops Off, GS 15		[REDACTED]
5A. DATE OF PCS ARRIVAL IN FIELD	5B. REQUESTED DATE OF DEPARTURE	5C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	5D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
5 Sep 1967	Please see 11B	Summer 1970	o/a 1 October, 1970	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
2: (at that time) 42 and 17				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
I would like very much to use my fluent [REDACTED] in my next assignment, as well as make use of my extensive exposure to science and technology -- both operations and and the larger world of the scientist and the engineer in today's evolving societies and economies. I would most especially hope to use my long experience in [REDACTED] activities and the managerial exposure accumulated thereby.				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)				
<ul style="list-style-type: none"> <li>I planned, established and operated a long-range S&amp;T spotting-assessment activity against sensitive targets, and a shorter range similar local activity during a period marked largely by an adverse political climate.</li> <li>I planned, developed and exploited, and modified a [REDACTED] in order to mask our operational activity, and integrated these into the broader ranging overall activities of a major field Station.</li> <li>I managed the [REDACTED] activity of [REDACTED] organizations. The tasks included many business and production aspects as well as management of the [REDACTED] personnel in the field and from the home office.</li> <li>I assisted other Stations and Bases, upon their request, in spotting-assessment activities, in local search and surveillance of targets, and in recruitment.</li> <li>As my original [REDACTED] became modified as a result of [REDACTED] I was able to develop, alone, continuing cover to serve our needs of operational access as well as those of [REDACTED]</li> </ul>				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
<p>(a) the senior-most management course offered through the Organization;</p> <p>(b) a review course of activities within the CS and the Organization as a whole;</p> <p>(c) at least audit the S&amp;T course, if that is still being offered.</p> <p>If (a) is possible through a civil school away from Headquarters, I would have no objection to the displacement involved.</p>				

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. 8 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

First choice: to manage a large-scale [ ] project in a [ ] speaking technically advanced locale.  
Second choice: chief of station or base [ ] in an area where I can combine my experience and linguistic ability.  
Third choice: to be assigned to Staff training, preferably training (a) senior unit or project managers, or (b) JOTs.  
Fourth choice: to be assigned to Staff personnel work -- above the Division level -- where new personnel are screened, tested and evaluated, then assigned.  
Fifth choice: to work on the Intelligence side of the house.

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 ROTATE FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAFF, OR OFFICE.  
1ST CHOICE Staff training 2ND CHOICE Personnel 3RD CHOICE Intelligence
- BE ASSIGNED TO ANOTHER FIELD STATION; INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION  
1ST CHOICE [ ] 2ND CHOICE [ ] 3RD CHOICE [ ]
- RETURN TO MY CURRENT STATION; with different responsibilities

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:

Station recommends that Subject return PCS to Headquarters at the end of his current tour. We would welcome a replacement who is capable of functioning in the same general [ ] context, but any such individual must also be able to spot and thoroughly access agent candidates. He should also handle a number of agents in the same field. We are, in short, seeking an officer who will aggressively exploit his [ ]

---- continued ----

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

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

No decision has been made concerning next assignment

DATE 24 Aug 70 TITLE C/E/PERS SIGNATURE [ ]

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. \_\_\_\_\_ DATED: \_\_\_\_\_

CABLE NO. \_\_\_\_\_ DATED: \_\_\_\_\_

CAREER SERVICE REPRESENTATIVE: \_\_\_\_\_ DATE: \_\_\_\_\_  
(SIGNATURE)

SECRET

Field Reassignment Questionnaire (continued)

12. develop new operational leads on his own initiative, and at the same time be prepared to take over and run assets related to his own

SECRET

SECRET  
(When Filled In)

EAL

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				006102	
SECTION A		GENERAL			
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
[REDACTED]		20 Jan 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Off		DDP/EUR/			
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 checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify)	<input type="checkbox"/>	SPECIAL (Specify)	<input type="checkbox"/>	REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From- to)		
			1 April 1969 - 31 March 1970		
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					RATING LETTER
Established and maintains a [REDACTED] for the purpose of developing natural access to Station targets.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Uses [REDACTED] to develop leads on eventual access or support type assets to be used by the Station against the local MINARSH target.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Responds to various Station requirements including investigative work.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Initiates contact with selected local MINARSH targets and undertakes to develop sufficient rapport with them to provide operational assessments.					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

29 JUN 1970



**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. Mention 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 comments of the rating officer are limited to the period from October 1969 to March 1970 during which he worked with Subject. The previous rating officer has added his comments to allow coverage of the total indicated period from April 1969 to March 1970. During this period Subject was integrated in a new team assigned to the local S&T and Commercial MHHARSH target. Subject's recent activity has been very productive indeed. Subject used the excellent potential [redacted] to skillfully spot and assess access agent candidates. As Subject's operational situation [redacted] precludes making recruitment, the most promising of these candidates was placed in contact with a Station officer during social events Subject organized. At the same time, Subject continued his efforts to develop personal relationship with several MHHARSHers. The beginning of personal, as opposed to purely professional, relations with a major MHHARSH target enabled him to obtain insight into the target's beliefs and personality which was the best the Station had to date. Subject also managed to establish contact with two other MHHARSH representatives of interest. This, in one case, required almost six months to accomplish via a combination of patience, skill and determination. Subject is an experienced officer. He is cost conscious and practices good security. The Station has no other asset with the necessary scientific and editorial know-how, fluent [redacted] and local knowledge to replace Subject. In view of this and the recent progress made by Subject in response to very specific requirements and his willingness to try to establish personal and, hopefully, social relations with access prospects and MHHARSH targets, the Station recently recommended that he be extended in [redacted]. At the same time, the Station recommended that Subject's [redacted]

**SECTION D SIGNATURE AND COMMENTS**

**1. BY EMPLOYEE**

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

DATE	SIGNATURE OF EMPLOYEE
	/s/ [redacted]

**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
	Handling Officer Chief, SR II	/s/ [redacted]

**3. BY REVIEWING OFFICIAL**

**COMMENTS OF REVIEWING OFFICIAL**

As previous Station correspondence and fitness reports will reflect, this officer has been the subject of varying evaluations and projections in recent years. In fairness to him, however, it is equally true that an officer [redacted] reflects, in the level and quality of his performance, the amount and type of guidance, direction and push he receives from the responsible [redacted] officer. Making allowances for these variables, this officer's past record has not been impressive; however, it is also correct to note that he has improved substantially during the latter part of the period under review, and that if the Station can work out some fiscal arrangement which will reduce the heavy financial input

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
19 May 1970	DCOS	/s/ Hugh Montgomery

SECRET

Section D3 continued

from the Organization, his continued presence at this Station definitely appears to be warranted for a sufficient period to reach more definite conclusions concerning the level of sustained performance over a somewhat longer period than that reflected by this report.

On balance, we are pleased that this officer has responded so well to greater [ ] direction and that he has undertaken somewhat more aggressive efforts to expand his range of contacts in immediate proximity to the primary Station targets. This officer does bring many talents to bear on his operational activity: he has absolutely fluent [ ] a solid and [ ] and a vast range of contacts in the local community. Nonetheless, it will require additional time to explore these contacts in depth, select those which appear to be operationally viable, and pursue them actively either to the point of recruitment by another officer or elimination from further development, for whatever reason.

In sum, in spite of the recognized and commendable improvement in this officer's performance during the period under review, the reviewer submits that the letter grade for specific duties 2 and 4 would more properly have been a "P", and that the overall rating, at this point, would more accurately be set at a level between "P" and "S", probably closer to the former than the latter.

This reviewing comment has been read by the officers who prepared the Fitness Report.

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD	
[REDACTED]		20 Jan 1924		M	GS-15	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/EUR/		[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		<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> SPECIAL (Specify):	<input type="checkbox"/> SPECIAL (Specify):	
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 October 1968 - 31 March 1969			
SECTION B PERFORMANCE EVALUATION							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
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	
Establishes and maintains [REDACTED] for the purpose of developing natural access to Station targets.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Develops [REDACTED] pretexts to meet WOLADY and third national of operational interest in the S&F community.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Responds to Station ad-hoc requirements on the local internal target.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Develops potential agent prospects in the S&F community to the point where they can be recommended as Station agent candidates.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
[REDACTED]							
SPECIFIC DUTY NO. 6						RATING LETTER	
[REDACTED]							
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						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 must be described, if applicable.

During this reporting period subject had <sup>UCT 9 1 35</sup> ~~very~~ <sup>markedly</sup> increased the tempo of his activities and contacts. Many agent prospects have been screened and contacts were established with people of interest to several elements of the Station. Subject is particularly thorough and outstanding on specific investigations where he utilized [ ] in a skillful and imaginative way. He has improved in terms of people development but in this respect he is still best with people in a professionally related context rather than a contrived social context. As mentioned in the previous report subject's [ ] does not allow him to make recruitments. Subject has a high degree of cost consciousness and does not exercise any supervisory responsibilities.

**SECTION D CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

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

DATE: 11 June 1969 SIGNATURE OF EMPLOYEE: /s/ [ ]

2. BY SUPERVISOR

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

DATE: 5 June 1969 OFFICIAL TITLE OF SUPERVISOR: Ops Officer TYPED OR PRINTED NAME AND SIGNATURE: /s/ [ ]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL: I do not concur in this rating. I would have given the employee STRONG in the performance of his [ ] responsibilities, that is to say in the manner in which he has created and expanded [ ] I would have restricted myself to PROFICIENT, however, in assessing his exploitation [ ] for operational purposes. For a fuller treatment of this [ ] performance, suggest that reference be made to the [ ] Status Report, submitted 26 May 1969, via [ ]-99925.

DATE: 23 JUNE 1969 OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief of Station TYPED OR PRINTED NAME AND SIGNATURE: /s/ [ ]

SECRET

SECRET  
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
SECTION A					GENERAL	
1. NAME <i>[Redacted]</i>		2. DATE OF BIRTH 20 Jan 1924	3. SEX M	4. GRADE GS-15	5. SD D'	
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/EUR/		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"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From to) 1 April 1967 - 30 November 1967			
SECTION B PERFORMANCE EVALUATION						
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
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	
Establishes and maintains <i>[Redacted]</i> for the purpose of developing natural access to station targets.					S	
SPECIFIC DUTY NO. 2					RATING LETTER	
Develops <i>[Redacted]</i> pretents to meet WCLADY and third national of operational interest in the S&T community.					S	
SPECIFIC DUTY NO. 3					RATING LETTER	
Responds to Station ad-hoc requirements on the local internal target.					S	
SPECIFIC DUTY NO. 4					RATING LETTER	
Develops potential agent prospects in the S&T community to the point where they can be recommended as Station agent candidates.					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 managerial or supervisory duties must be described, if applicable.

Since the last reporting period subject's efforts were directed by the Station toward the spotting, developing and assessing WCLADY S&T agent candidates in terms of recruitment and inclusion in the Station's S&T spotting network.

Subject has done thorough and at times imaginative spade work in this field despite the fact that the mission was not as successful as anticipated. Recent progress however would indicate that the next reporting period would be more productive.

Subject continues to respond to ad-hoc specific assignments in an exemplary manner.

Because of the nature of his [redacted] Subject is not authorized to make recruitments.

Subject has a high degree of cost consciousness. He does not exercise any supervisory responsibilities [redacted]

**SECTION D CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

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

DATE: 24 Oct. 1968 SIGNATURE OF EMPLOYEE: /s/ [redacted]

2. BY SUPERVISOR

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

DATE: 28 Oct. 1968 OFFICIAL TITLE OF SUPERVISOR: Ops Officer TYPED OR PRINTED NAME AND SIGNATURE: /s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL: See attached.

DATE: OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief of Station TYPED OR PRINTED NAME AND SIGNATURE: /s/ David E. Murphy

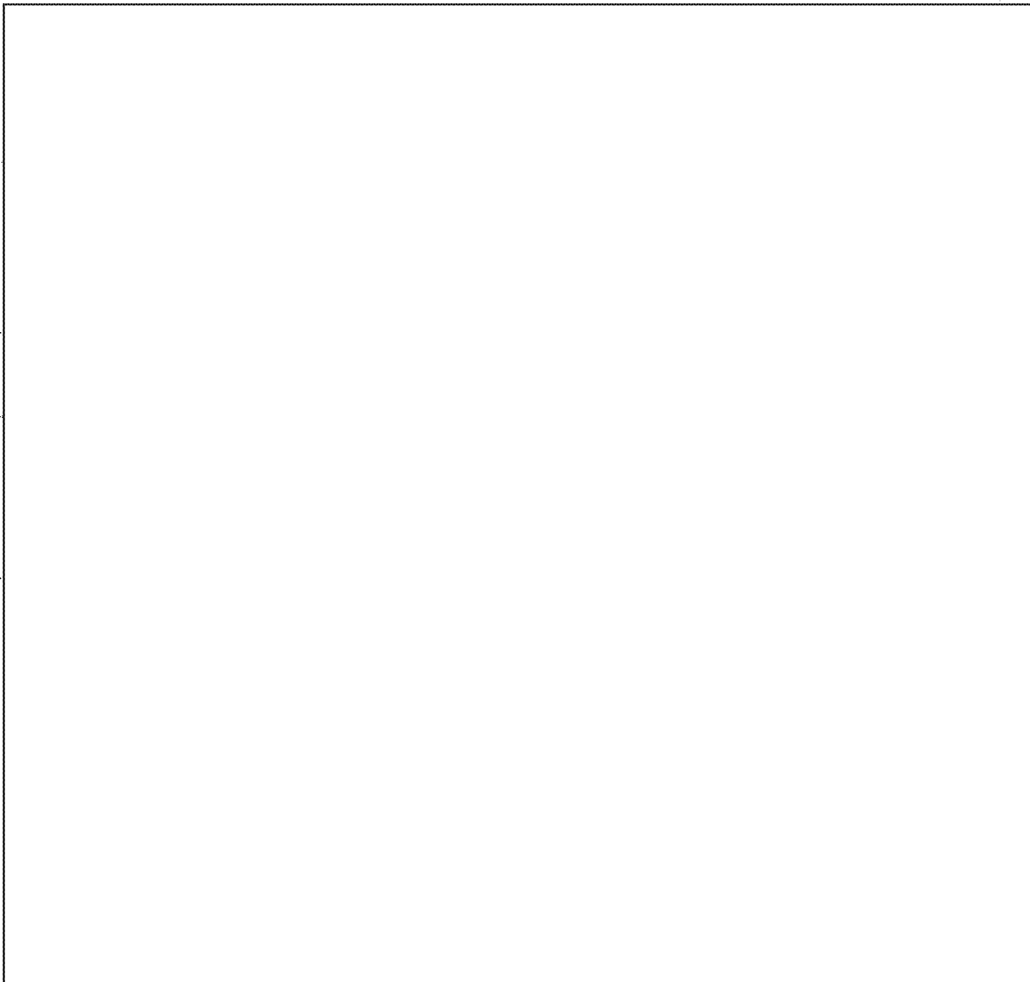
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14-00000

ADDENDUM, Form 45 (Fitness Report), for period March 67-March 68.

Section D

As the individual being rated, I would like to add some remarks to those prepared by the rating officer.

A large, empty rectangular box with a thin black border, intended for the individual being rated to add their own remarks to the report. The box is currently blank.

S E C R E T

3. It is difficult to place in the proper perspective the contribution of this senior [ ] to [ ] Station operations. On the one hand, Subject has established superb [ ] in the scientific and technical field which should have afforded him virtually unlimited access to persons of interest to us, both Soviet and potential access agents. In evaluating the manner in which the employee set up and managed [ ], I would tend to agree with his comments to the fitness report on the managerial demands on him, although these comments are somewhat overdrawn.

The principal difficulty has been the time it has taken to relate the [ ] to the specific operational requirements of the Station. We have not received from CASASIN as many leads and assessment reports to persons of operational interest in the S&T field as we think he could have produced. It may be that the earlier listing of the project (viewed as a regional undertaking) contributed to this.

Recently we have noted significant improvement in that we have received responses to requests we have made for assessment and development of potential access agents [ ]. We hope, therefore, that this last year of CASASIN's stay will be the most productive ever. It is unfortunate that the [ ] must end because of the [ ] decisions over which we had no control.

/s/ David E. Murphy

S E C R E T



**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A				GENERAL	
1. NAME (Last)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
██████████		20 Jan 24	M	GS-15	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION
Ops Officer			DDP/EUR/██████████		██████████
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 April 1966 - 31 March 1967		
SECTION B PERFORMANCE EVALUATION					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
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
Establishes and maintains a ██████████ for the purpose of developing natural access to Soviet S&T personnel.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Develops ██████████ pretexts to meet, assess, and recommend as agent candidates WOLADY and Third Nationals in the HBFAIRY S&T community.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Contacts and develops local Soviet Bloc personnel.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Develops ██████████ pretexts to attend selected scientific conferences.					S
SPECIFIC DUTY NO. 5					RATING LETTER
Responds to local Station adhoc operational requirements.					S
SPECIFIC DUTY NO. 6					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

31 AUG 1967

██████████

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 or provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>		
<p>Subject continues to maintain a secure effective [redacted]</p> <p>In this reporting period the whole thrust and objectives of this [redacted] have been changed from pursuit of targets designated by Headquarters at international conferences to pursuit of the local Soviet presence. This has caused a major readjustment and Subject is now beginning to produce the type of leads that help the Station achieve its local operational objectives.</p> <p>Subject continues to show a well organized methodical approach to his [redacted] operational tasks.</p> <p>Subject is cost conscience.</p>		
<p>HQRS.NOTE: Subject has no supervisory responsibilities.</p> <p>[redacted]</p> <p>Chief, E/F</p>		
SECTION D		
CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Employee is on h/l. Report will be shown to him upon his return.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
9 August 1967	Ops Officer	/s/ [redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I rarely see the written product of this employee's efforts and know little of his work except as I am informed of it by his supervisor in the Station. I have the impression, however, that the employee is responding to his supervisor's guidance and is not by any means simply drifting along paths indicated by his [redacted] which can be a temptation when an employee has, as is true in this case, rather limited contact with his colleagues who work [redacted] on the same target. I thus concur in the evaluation on the basis of limited knowledge.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
9 August 1967	Ops Officer	/s/Robert E. Owen

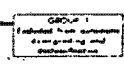
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(When Filled In)

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1/10

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A				GENERAL	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
6. OFFICIAL POSITION TITLE Ons Officer		20 Jan. 1924	M	GS-15	D
9. CHECK (X) TYPE OF APPOINTMENT		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL SPECIAL (Specify):		REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE	
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
		3 June 1965 - 31 March 1966			
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 probation, to reassignment or to separation. Describe action.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory or excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are obtained.</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>					
<p>List up to six of the most important specific manner in which employee performs EACH specific duty. Consider only those duties in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). Insert rating letter which best describes the</p>					
SPECIFIC DUTY NO. 1					RATING LETTER
Establishes and maintains [redacted] for the purpose of developing natural access to Soviet S&T personnel					O
SPECIFIC DUTY NO. 2					RATING LETTER
Develops [redacted] pretexts to attend selected scientific conferences where targeted Soviet S&T personnel are expected					S
SPECIFIC DUTY NO. 3					RATING LETTER
Contacts, develops and assesses Soviet S&T personalities at international conferences.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Participates as an inside spotter, manager, and key team member in recruitment operations against Soviet S&T personnel					S
SPECIFIC DUTY NO. 5					RATING LETTER
Spots, develops and assesses Soviet, third national and PRRIME agent candidates in HBFARIY					S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					S

POSTED ON  
JUN 10 1965



**SECRET**  
(When Filled In)

SECTION C			NARRATIVE COMMENTS		
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>					
<p>Subject has done an outstanding job in creating [redacted] which enables direct access to an important target group. This job was performed efficiently, securely, intelligently and imaginatively. Subject is an experienced, highly capable senior professional officer in every sense of the term. He is a thoroughly organized self-disciplined person who can operate effectively [redacted]. He has the supple mind required to learn highly technical [redacted] tasks and perform these in a skilled manner. He organizes the performance of these [redacted] duties in such a manner as to extract the most operational mileage. Subject has spotted, assessed, developed, and in special cases recruited. He is extremely articulate, and an excellent writer. Despite his [redacted] status, he submits timely finished operational and information reports. His management, administration, and record keeping of both [redacted] and operational duties is excellent.</p>					
<p>Although Subject has had long experience in supervisory capacities, his present [redacted] status does not require supervisory 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	SIGNATURE				
4 May 1966	[redacted]		[redacted]		
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				
4 May 1966	Ops Officer		/s/ [redacted]		
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
[redacted]					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE			
4 May 1966	Ops Officer	/s/Robert E. Owen			

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				006102	
<b>SECTION A</b>			<b>GENERAL</b>		
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
[REDACTED]		20 Jan. 1924	M	15	D
8. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION	
Ops Officer			DDP/WE/		
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 type="checkbox"/> REASSIGNMENT SUPERVISOR
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> SPECIAL (Specify):	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 April 1964 - 2 June 1965		
<b>SECTION B PERFORMANCE EVALUATION</b>					
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Contact, cultivation and assessment of, and collection of biographic and operational intelligence on Soviet scientific and technical targets, and on other Soviets and other nationalities to whom he has access					RATING LETTER
					O
SPECIFIC DUTY NO. 2 Spotting and assessment of potential operational assets to be used against the targets specified under Specific Duty No. 1.					RATING LETTER
					S
SPECIFIC DUTY NO. 3 Execution of operational assignments as directed by Hqs and field stations concerned, whether of a KUTUBE, KUWOLF or KUDESK nature.					RATING LETTER
					O
SPECIFIC DUTY NO. 4 Preparation or acquisition of [ ] written material as operational information to increase his access and flexibility in furtherance of Specific Duties Nos. 1 through 3.					RATING LETTER
					O
SPECIFIC DUTY NO. 5					RATING LETTER
					O
SPECIFIC DUTY NO. 6					RATING LETTER
					O
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
30 JUN 1965					O*

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SECTION C continued

approaches to operational problems and personalities, and expends considerable effort in maintaining a level of specialized knowledge sufficient to [redacted] ensure the maximum exploitation of his contacts with target organizations and individuals. His command of spoken, written, and technical [redacted] is excellent.

From the point of view of supervision, this employee in his present position requires guidance only insofar as to identify specific targets and for him to protect himself in situations where he does not have, by virtue of his not having access to [redacted] specialized information. Otherwise, he requires no supervision other than the periodic provision of policy and operational directives.

This employee has always been conscious and punctilious in his preparation of operational and administrative reports, including financial accountings, and his reporting in general, despite the burdens imposed by the necessity for minimizing the risks [redacted] leaves nothing to be desired.

Other than the funds for operational activities, this employee currently has no responsibility for the programming and use of personnel, space, equipment, and funds.

[redacted] His dedication to and enthusiasm for accepting the challenge of this assignment, and his willingness to continue on in it, deserve particular mention, particularly since he would perhaps justifiably feel that his present assignment may leave him outside the mainstream of competitive organization progression.

This employee's health and family situations leave nothing to be desired, as his proven mobility in the execution of operational assignments attests.

\*(Section B) - No special recognition of Subject's "Outstanding" overall performance is being requested at this time.

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(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX		4. GRADE	
[REDACTED]		20 Jan 1924		M		GS-15	
5. OFFICIAL POSITION TITLE		7. OFF. DIV. OR OF ASSIGNMENT		8. CURRENT STATION			
Ops. Officer		DDP/NE/					
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
CAREER		RESERVE		TEMPORARY		REASSIGNMENT SUPERVISOR	
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
CAREER-PROVISIONAL (See Instructions - Section C)				INITIAL		REASSIGNMENT EMPLOYEE	
<input type="checkbox"/>				ANNUAL		<input type="checkbox"/>	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From- to)			
31 May 1964				1 April 1962 - 31 March 1964			
SECTION B PERFORMANCE EVALUATION							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
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	
Finding, cultivating unwittingly and assessing new target personalities among Soviet scientists, engineers and other technical specialists.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Continuing the assessment and unwitting development of established targets in the same category.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Development of similar leads on target personalities from other denied areas; making recruitments outside base country.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Development and assessment of technical personalities of interest to Station's internal (domestic) programs.						S	
SPECIFIC DUTY NO. 5						RATING LETTER	
[REDACTED]						0	
[REDACTED]						0	
[REDACTED]						0	
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	
26 JUN 1964						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 retaining. 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.

This employee combines the relatively rare combination of a senior and broadly experienced intelligence officer under [redacted] providing both long-term status in his country of residence (and in Europe in general) and access for a variety of operational functions, including spotting, assessing, contact with Soviet bloc nationals of specific interest, investigative measures, assessment in depth of [redacted] persons, and attendance at a broad range of national and international specialized meetings. Development of the capability operationally to exploit [redacted] has been the achievement of the employee himself. In so doing he has at the same time achieved genuine acceptance by his [redacted] associates [redacted] his colleagues [redacted] and related professions.

In undertaking operational tasks this employee has consistently shown initiative, imagination, security consciousness, and application of both operational and substantive background to the problem at hand. He has put a conscious effort into improving his already excellent command of the [redacted] language, and his grasp of a variety of specialized scientific and technical fields has been achieved basically as a result of his own efforts.

His management of operational reporting, finances, and the administrative problems [redacted] has been exemplary.

It should be noted that during the reporting period, this employee has not had the benefit at all times of specific pinpointed operational direction. As of the end of the reporting period, Headquarters assumed control of his activities against

SECTION D CERTIFICATION AND COMMENTS specific Soviet targets on a

1. BY EMPLOYEE Europe-wide basis.

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

DATE 25 May 1964 SIGNATURE OF EMPLOYEE /s/ [redacted]

2. BY SUPERVISOR

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

Eighteen

DATE 25 May 1964 OFFICIAL TITLE OF SUPERVISOR Ops. Officer TYPED OR PRINTED NAME AND SIGNATURE /s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE 25 May 1964 OFFICIAL TITLE OF REVIEWING OFFICIAL Cps. Officer TYPED OR PRINTED NAME AND SIGNATURE /s/ Robert S. Owen



SECRET

**SECRET**  
(When Filled In)

<b>FITNESS REPORT</b>				EMPLOYEE SERIAL NUMBER 037367 016102			
<b>GENERAL</b>							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT	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"/> 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 G.P. 31 May 1963			12. REPORTING PERIOD (From - to) 10 September 1962 - 31 March 1963				
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1							RATING LETTER
[Redacted]							O
SPECIFIC DUTY NO. 2							RATING LETTER
Spotting and assessing persons of operational interest to [Redacted] Station and to other stations.							S
SPECIFIC DUTY NO. 3							RATING LETTER
Investigating of organizations and phenomena of operational interest to the Station.							S
SPECIFIC DUTY NO. 4							RATING LETTER
Collection of positive and operational information [Redacted]							S
SPECIFIC DUTY NO. 5							RATING LETTER
[Redacted]							
SPECIFIC DUTY NO. 6							RATING LETTER
[Redacted]							
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
15 JUL 1963							S

POSTED ON  
16 JUL 63

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>Manner of performance of managerial or supervisory duties must be described, if applicable.</u></p>			
<p>See attached sheet.</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 May 1963	 /s/		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
6½ months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
15 May 1963	Ops Officer	/s/ 	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>See attached sheet.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
20 May 1963	OPS Officer	/s/ Edward Ryan	

SECRET

[Redacted]

SECRET

NAHRATIVE COMMENTS

SECTION C

[Redacted]

During the reporting period he has developed a wide circle of contacts in the scientific and journalistic fields and applies a long background in a variety of assignments in KUDOVE to the determination and assessment of operational potential among these contacts. At the same time his [Redacted]

[Redacted]

This employee requires a minimum of detailed operational supervision; it is necessary in specific cases only to indicate the operational or informational objectives.

From the point of view of administrative support, his attention to detail and meticulousness reduce the problems of his support by the Station to a minimum.

This employee uses the [Redacted] language continuously, and his facility is such as to permit him to handle himself excellently in a broad range of complex technical subjects. He has in addition undertaken specialized [Redacted] language training to develop this capability further. His operational reporting is excellent both with regard to clarity and pertinence.

In the immediate future he will be assigned case work, for the most part in fields where it will complement, and be complemented by, his independent operational activities [Redacted]

SECRET

SECRET

JUN  
1962  
*MW*

6167

6 August 1962

[REDACTED]

Memorandum in Lieu of Fitness Report [REDACTED]

Subject: [REDACTED]

My last statements concerning the performance of [REDACTED] should be extended to cover the remainder of his service as Chief of SR/6. He departed headquarters for a field assignment 31 July 1962.

[REDACTED]

Chief of Operations and Plans  
SR Division

CONCUR:

*Howard J. Osborn*  
HOWARD J. OSBORN  
Chief, SR Division

JEG  
1961.

**SECRET**  
(When Filled In)

Recorded by  
CSPB

**FITNESS REPORT**

EMPLOYEE SERIAL NUMBER

**SECTION A** GENERAL

1. NAME: [REDACTED] (Middle)

2. DATE OF BIRTH: 20 January 1924

3. SEX: M

4. GRADE: GS-14

5. SERVICE DESIGNATION: D

6. OFFICIAL POSITION TITLE: Branch Chief

7. OFF/DIV/BR OF ASSIGNMENT: OC/SR/6

8. CAREER STAFF STATUS: NOT ELIGIBLE, MEMBER, DEFERRED, PENDING, DECLINED, DENIED

9. TYPE OF REPORT: INITIAL, REASSIGNMENT/SUPERVISOR, X ANNUAL, REASSIGNMENT/EMPLOYEE

10. DATE REPORT DUE IN O.P.

11. REPORTING PERIOD: From July 1960 to October 61

**SECTION B** EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
SPECIFIC DUTY NO. 1 Supervises large functional branch of [REDACTED] staff and [REDACTED] contract personnel.				5		
SPECIFIC DUTY NO. 2 Plans and programs for operations support, including initiation of new support activities.				5		
SPECIFIC DUTY NO. 3 Supervises preparation of, and sometimes personally prepares, special studies both on own initiative and on request.				5		
SPECIFIC DUTY NO. 4 Conducts liaison with various components of the Agency and with other agencies.						6
SPECIFIC DUTY NO. 5 Prepares and presents briefings.						6
SPECIFIC DUTY NO. 6 Supervises maintenance of SR Division records on Soviet defectors, supports exploitation of defectors and participates in their resettlement.						5

**SECTION C** EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

<ul style="list-style-type: none"> <li>1 - Performance in many important respects fails to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>6 - Performance in every respect is outstanding.</li> </ul>	<b>RATING NO.</b> 5
--	------------------------

**SECTION D** DESCRIPTION OF THE EMPLOYEE

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

CHARACTERISTICS	NOT APPLI-CABLE	NOT OB-SERVED	RATING					
			1	2	3	4	5	
GETS THINGS DONE								X
RESOURCEFUL								X
ACCEPTS RESPONSIBILITIES							X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							X	
DOES HIS JOB WITHOUT STRONG SUPPORT							X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE							X	
WRITES EFFECTIVELY								X
SECURITY CONSCIOUS							X	
THINKS CLEARLY							X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							X	
OTHER (Specify):								

SEE SECTION "E" ON REVERSE SIDE

SECRET  
(When Filled In)

OFFICE OF PERSONNEL  
NOV 25 AM '61

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

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

Mr. [redacted] has a good knowledge of Soviet matters and generally is very well informed. He continually demonstrates much initiative and a high degree of productivity. He is stimulating to his associates, businesslike and delegates work easily. He appears very self-confident and he is dynamic. Mr. [redacted] supervises a very large and key branch engaged in a wide variety of activities, a difficult job which he does well.

MAIL ROOM

**SECTION F CERTIFICATION AND COMMENTS**

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

DATE: 9 November 1961  
SIGNATURE OF EMPLOYEE: [redacted] b1

2. BY SUPERVISOR

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

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

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

DATE: 9 November 1961  
OFFICIAL TITLE OF SUPERVISOR: SR/Chief of Plans and Operations  
TYPED OR PRINTED NAME AND SIGNATURE: [redacted]

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

COMMENTS OF REVIEWING OFFICIAL

DATE: 21 NOV 1961  
OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief, SR Division  
TYPED OR PRINTED NAME AND SIGNATURE: JOHN M. MAURY

SECRET

SECRET  
(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER

SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE	
			20 Jan 1924		M	GS-14	
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT			
DI				FE/ VSR			
8. CAREER STAFF STATUS				9. TYPE OF REPORT			
NOT-ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR			
PENDING	DECLINED	DENIED	<input checked="" type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT/EMPLOYEE			
10. DATE REPORT DUE IN O.P.			11. REPORTING PERIOD		SPECIAL (Specify)		
			From 1 Apr 59 - 24 June 60				

SECTION B								EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).															
1 - Unsatisfactory		2 - Barely adequate		3 - Acceptable		4 - Competent		5 - Excellent		6 - Superior		7 - Outstanding			
SPECIFIC DUTY NO. 1				RATING NO.		SPECIFIC DUTY NO. 4				RATING NO.					
Chief, Soviet Branch, responsible for activities of staff and contract employees				6		Case officer				5/6					
SPECIFIC DUTY NO. 2				RATING NO.		SPECIFIC DUTY NO. 5				RATING NO.					
Responsible for station SR planning, budgeting, and operating activities				6											
SPECIFIC DUTY NO. 3				RATING NO.		SPECIFIC DUTY NO. 6				RATING NO.					
Representing the station at varied levels in all SR matters				6											

SECTION C																EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION															
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.																															
<ul style="list-style-type: none"> <li>1 - Performance in many important respects fails to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>6 - Performance in every respect is outstanding.</li> </ul>																												RATING NO. <b>5</b>			

SECTION D																DESCRIPTION OF THE EMPLOYEE															
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee																															
1 - Least possible degree				2 - Limited degree				3 - Normal degree				4 - Above average degree				5 - Outstanding degree															
CHARACTERISTICS												NOT APPLICABLE		NOT OBSERVED		RATING															
																1 2 3 4 5															
GETS THINGS DONE																					X										
RESOURCEFUL																					X										
ACCEPTS RESPONSIBILITIES																					X										
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES																					X										
DOES HIS JOB WITHOUT STRONG SUPPORT																					X										
FACILITATES SMOOTH OPERATION OF HIS OFFICE																					X										
WRITES EFFECTIVELY																					X										
SECURITY CONSCIOUS																					X										
THINKS CLEARLY																					X										
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS																					X										
OTHER (Specify):																															
SEE SECTION "E" ON REVERSE SIDE																															



SECRET

(When Filled In)

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

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

In most respects, this officer is one of the best I have known in this agency. He has a broad and deep knowledge of his target area, as well as of his "host" country; an excellent and proven degree of operational "know-how"; the ability to write and speak lucidly and effectively and with apparent ease; and a very high degree of motivation and devotion to duty. He can be expected to continue his dynamic and imaginative pursuit of a most difficult target. It is my opinion that this officer has great potential and is ready for increased responsibilities which would involve the promotion for which he has been recommended. As for training, a good managerial course might help to bring into even sharper focus his many talents.

This report has been prepared in accordance with FE Division standards which recognize the principle of rating the individual against the group. Thus an 'average' rating reflects an entirely satisfactory performance.

**SECTION F CERTIFICATION AND COMMENTS**

**1. BY EMPLOYEE**

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

DATE: 23 June 1960 SIGNATURE OF EMPLOYEE: [redacted] /s/ on transmittal

**2. BY SUPERVISOR**

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

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

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

DATE: 23 June 1960 OFFICIAL TITLE OF SUPERVISOR: TYPED OR PRINTED NAME AND SIGNATURE: signed on Adam Erindle(F) transmittal

**3. BY REVIEWING OFFICIAL**

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

COMMENTS OF REVIEWING OFFICIAL

DATE: OFFICIAL TITLE OF REVIEWING OFFICIAL: COS, Tokyo TYPED OR PRINTED NAME AND SIGNATURE: John Baker/s/ on transmittal

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER			
<b>SECTION A GENERAL</b>									
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE				
			20 January 1921	M	SS-11				
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT					
				SR, [ ]					
8. CAREER STAFF STATUS			9. TYPE OF REPORT						
<input type="checkbox"/> NOT ELIGIBLE	<input checked="" type="checkbox"/> MEMBER	<input type="checkbox"/> DEFERRED	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT/SUPERVISOR					
<input type="checkbox"/> PENDING	<input type="checkbox"/> DECLINED	<input type="checkbox"/> DENIED	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD		SPECIAL (Specify)					
31 May 1959		10 Apr 58 - 31 Mar 59							
<b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>									
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).									
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding			
SPECIFIC DUTY NO. 1		RATING NO.	SPECIFIC DUTY NO. 4		RATING NO.				
Supervises and directs operational branch of some [ ] persons		5	Case officer		6				
SPECIFIC DUTY NO. 2		RATING NO.	SPECIFIC DUTY NO. 5		RATING NO.				
Conducts operational liaison with local intelligence and security services.		7							
SPECIFIC DUTY NO. 3		RATING NO.	SPECIFIC DUTY NO. 6		RATING NO.				
Conducts liaison with U.S. military and civilian intelligence services		6							
<b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>									
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.									
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. <div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto; display: flex; align-items: center; justify-content: center;">5</div>				
<b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>									
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee									
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree					
CHARACTERISTICS			NOT APPLI-CABLE	NOT OB-SERVED	RATING				
					1	2	3	4	5
GETS THINGS DONE									X
RESOURCEFUL									X
ACCEPTS RESPONSIBILITIES								X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X	
DOES HIS JOB WITHOUT STRONG SUPPORT								X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE								X	
WRITES EFFECTIVELY								X	
SECURITY CONSCIOUS								X	
THINKS CLEARLY								X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								X	
OTHER (Specify):								X	
SEE SECTION "E" ON REVERSE SIDE									

SECRET

(When Filled In)

<b>SECTION E</b>		<b>NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</b>	
<p>Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.</p>			
<p>422 JUN 22 11:19 AM '59</p>			
<p>Subject continues as one of the most capable, professional and hard working of the branch chiefs in the Station. Working against a tough denied area problem, he demonstrates imagination, drive, excellent area background and knowledge, and a high degree of productivity. He definitely has the potential for an even more responsible position.</p>			

<b>SECTION F</b>		<b>CERTIFICATION AND COMMENTS</b>	
<b>1. BY EMPLOYEE</b>			
I certify that I have seen Sections A, B, C, D and E of this Report.			
DATE	SIGNATURE OF EMPLOYEE		
27 April 1959	signed on transmittal		
<b>2. BY SUPERVISOR</b>			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
22			
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.			
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS		REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify):			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
27 April 1959	DC [ ]	William Nelson signed on transmittal	
<b>3. BY REVIEWING OFFICIAL</b>			
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.			
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.			
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.			
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.			
COMMENTS OF REVIEWING OFFICIAL			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
27 April 1959	[ ]	John E. Baker signed on transmittal	

SECRET

SECRET  
(When Filled In)

SK 8

### FITNESS REPORT (Part I) PERFORMANCE

#### INSTRUCTIONS

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

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

SECTION A. GENERAL			
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SER	4. SERVICE DESIGNATION
	20 Jan 1924	M	DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
FE, TOKYO,		Area Ops Officer	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-14		1 October 1957 - 9 April 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	Promotion

SECTION B. CERTIFICATION			
1. FOR THE RATER: THIS REPORT <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:			
A. CHECK (X) APPROPRIATE STATEMENTS:			
<input checked="" type="checkbox"/>	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "E" IN C1 OR D, A WARNING LETTER HAS BEEN SENT TO HIM OR A COPY ATTACHED TO THIS REPORT.	
<input type="checkbox"/>	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):	
<input type="checkbox"/>	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.		
B. THIS DATE	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	D. SUPERVISOR'S OFFICIAL TITLE	
27 May 1958	William E. Nelson		

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

BY DATE  
 Posted Pos. Control: [Signature] 1958  
 Renewed by FWD: [Signature] 7/24/58

THIS REPORT HAS BEEN REVIEWED UNDER CRITERIA...  
 IN CONFORMANCE WITH...  
 AS OF...

CONTINUED ON ATTACHED SHEET

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

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
27 May 1958	John E. Baker	

#### SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

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

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

5/6  
 INSERT RATING NUMBER

COMMENTS:

**SECRET**  
(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p><b>DIRECTIONS:</b></p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 33%;">ORAL BRIEFING</td> <td style="width: 33%;">HAS AND USES AREA KNOWLEDGE</td> <td style="width: 33%;">MAIL ROOM INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	MAIL ROOM INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	MAIL ROOM INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES																									
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>DESCRIPTIVE RATING NUMBER</p>	<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p>	<p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>																									
<p>SPECIFIC DUTY NO. 1 As branch chief directs and plans operations of denied area branch.</p>	<p>RATING NUMBER</p> <p>5/5</p>	<p>SPECIFIC DUTY NO. 4 Conducts liaison with other U.S. agencies</p>	<p>RATING NUMBER</p> <p>6</p>																								
<p>SPECIFIC DUTY NO. 2 Conducts operational liaison with local security services.</p>	<p>RATING NUMBER</p> <p>6</p>	<p>SPECIFIC DUTY NO. 5</p>	<p>RATING NUMBER</p>																								
<p>SPECIFIC DUTY NO. 3 Develops and handles agents</p>	<p>RATING NUMBER</p> <p>6</p>	<p>SPECIFIC DUTY NO. 6</p>	<p>RATING NUMBER</p>																								
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p><b>DIRECTIONS:</b> Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Subject is an exceedingly well-equipped operations officer. He is mature, intelligent, has a thorough background in operations in his area and the ability to grow in his job. His operational planning and execution is usually impeccable. He has the loyalty of his subordinates and the respect of his equals and supervisors. He is particularly effective in dealing in the liaison field where his good sense and disinterest in "fighting the problem" produces a maximum of cooperation and good will. If he has any minor fault as a supervisor, it is not in impatience with his subordinates, as reflected in previous evaluations, but in an occasional unwillingness to say no to them.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p><b>DIRECTIONS:</b> Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p>																											
<p>6</p>	<p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																										
<p>RATING NUMBER</p>	<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p>																										

**SECRET**

(When Filled In)

**FITNESS REPORT (Part II) POTENTIAL**

**INSTRUCTIONS**

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

**FOR THE SUPERVISOR:** This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision **FOR AT LEAST 90 DAYS**. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the **INITIAL RATING** on the employee, however, it **MUST** be completed and forwarded to the US no later than 30 days after the due date indicated in item 3 of Section "F" below.

**SECTION E.**

**GENERAL**

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
	20 Jan 1924	M	DI
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
FB,	Area Ops Officer		
7. GRADE	8. DATE REPORT DUE IN OP.	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-11		1 October 1957 - 2 April 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	X Promotion

**SECTION F.**

**CERTIFICATION**

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

4. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
27 May 1958	William E. Nelson	

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

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
27 May 1958	John E. Baker	

**SECTION G.**

**ESTIMATE OF POTENTIAL**

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

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

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

2. SUPERVISORY POTENTIAL

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

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
1	BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	
2	BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
3	BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (Such drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisors)
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	3	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
3		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		OTHER (Specify)

**SECRET**  
(When Filled In)

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

4. COMMENTS CONCERNING POTENTIAL  
His potential for advancement is excellent. He has the right blend of operational know-how and supervisory talent to undertake positions of higher scope than he now holds. Although his advancement has been rapid for his age, his security, poise and common sense almost completely eliminate age as a factor in his potential for a more senior job.

**SECTION II. FUTURE PLANS**

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL  
Subject deserves at sometime within the next year or two the opportunity to broaden his experience either by command of a small station or advancement to a more responsible job in a large one.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS  
None

**SECTION I. DESCRIPTION OF INDIVIDUAL**

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

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

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

SECRET

(When Filled In)

U.S. PERS.

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.
FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
7. GRADE 8. DATE REPORT DUE IN OF 9. PERIOD COVERED BY THIS REPORT
10. TYPE OF REPORT (Check one)

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT, EXPLAIN WHY.
A. CHECK (X) APPROPRIATE STATEMENTS:
THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.
THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.

B. THIS DATE 16 Oct 1957 C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Edward Marchis D. SUPERVISOR'S OFFICIAL TITLE Chief SOV Branch

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

Posted Per [Signature] DATE NOV 7 1957
Reviewed by [Signature] 11/1/57

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

A. THIS DATE 23 Oct 57 B. TYPED OR PRINTED NAME OF REVIEWING OFFICIAL Lloyd George C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES
DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period.
6. INSERT RATING NUMBER
1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
2 - BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.

COMMENTS:



**SECRET**  
(When Filled In)

7. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES						
<p><b>DIRECTIONS:</b></p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;">                 ORAL BRIEFING                  GIVING LECTURES                  CONDUCTING SEMINARS                  WRITING TECHNICAL REPORTS                  CONDUCTING EXTERNAL LIAISON                  TYPING                  TAKING DICTATION                  SUPERVISING             </td> <td style="width: 33%; vertical-align: top;">                 HAS AND USES AREA KNOWLEDGE                  DEVELOPS NEW PROGRAMS                  ANALYZES INDUSTRIAL REPORTS                  MANAGES FILES                  OPERATES RADIO                  COORDINATES WITH OTHER OFFICES                  WRITES REGULATIONS                  PREPARES CORRESPONDENCE             </td> <td style="width: 33%; vertical-align: top;">                 CONDUCTS INTERROGATIONS                  PREPARES SUMMARIES                  TRANSLATES GERMAN                  DEBRIEFING SOURCES                  KEEPS BOOKS                  DRIVES TRUCK                  MAINTAINS AIR CONDITIONING                  EVALUATES SIGNIFICANCE OF DATA             </td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING GIVING LECTURES CONDUCTING SEMINARS WRITING TECHNICAL REPORTS CONDUCTING EXTERNAL LIAISON TYPING TAKING DICTATION SUPERVISING	HAS AND USES AREA KNOWLEDGE DEVELOPS NEW PROGRAMS ANALYZES INDUSTRIAL REPORTS MANAGES FILES OPERATES RADIO COORDINATES WITH OTHER OFFICES WRITES REGULATIONS PREPARES CORRESPONDENCE	CONDUCTS INTERROGATIONS PREPARES SUMMARIES TRANSLATES GERMAN DEBRIEFING SOURCES KEEPS BOOKS DRIVES TRUCK MAINTAINS AIR CONDITIONING EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING GIVING LECTURES CONDUCTING SEMINARS WRITING TECHNICAL REPORTS CONDUCTING EXTERNAL LIAISON TYPING TAKING DICTATION SUPERVISING	HAS AND USES AREA KNOWLEDGE DEVELOPS NEW PROGRAMS ANALYZES INDUSTRIAL REPORTS MANAGES FILES OPERATES RADIO COORDINATES WITH OTHER OFFICES WRITES REGULATIONS PREPARES CORRESPONDENCE	CONDUCTS INTERROGATIONS PREPARES SUMMARIES TRANSLATES GERMAN DEBRIEFING SOURCES KEEPS BOOKS DRIVES TRUCK MAINTAINS AIR CONDITIONING EVALUATES SIGNIFICANCE OF DATA				
<p align="right" style="margin-right: 50px;">OFFICE OF PERSONNEL Oct 30 1 50 PM '57</p>						
<table style="width:100%; border: none;"> <tr> <td style="width: 25%; vertical-align: top;">                 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY                  2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY                  3 - PERFORMS THIS DUTY ACCEPTABLY                  4 - PERFORMS THIS DUTY IN A COMPETENT MANNER                  5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB             </td> <td style="width: 25%; vertical-align: top;">                 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS                  7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY             </td> </tr> </table>				1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY 3 - PERFORMS THIS DUTY ACCEPTABLY 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY	
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SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER			
Deputy to Branch Chief	5	Supervising	4			
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER			
Conducts Foreign Liaison	6	Prepares correspondence and reports and handles administrative routine	5			
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER			
Prepares and Manages Projects	4	Developes and handles Agents	5			
<p><b>3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE</b></p> <p><b>DIRECTIONS:</b> Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Subject has excellent natural equipment for employment in this organization in terms of his intelligence and natural aptitudes. Additionally, he brings a great deal of area knowledge and language ability to his present assignment. During the period covered by this report he has displayed great industry and devotion to duty in a variety of circumstances and achieved notable results in production and in the creation of both short and long-term assets for his unit. On the debit side I would say that he is somewhat too businesslike in many personal situations to the point of being almost humourless. This, however, is a quality which he does not permit to intrude upon the necessities of his operational work although it often shows in office relationships.</p>						
<p align="center"><b>SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION</b></p> <p><b>DIRECTIONS:</b> Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <table style="width:100%; border: none;"> <tr> <td style="width: 20px; text-align: center; vertical-align: middle;"><b>7</b></td> <td style="padding-left: 10px;">                 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED                  2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW                  3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION                  4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION                  5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS                  6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION                  7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION             </td> </tr> </table> <p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p>				<b>7</b>	1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED 2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW 3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION	
<b>7</b>	1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED 2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW 3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION					

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

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

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CP no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

Form with fields for Name (Last, First, Middle), Date of Birth (20 Jan. 1924), Sex (M), Service Designation (DI), Office/Division/Branch of Assignment (REDWOOD), Official Position Title (Area Operations Officer), Grade (GS-14), Date Report Due in Oct, Period Covered by this Report (1 October 1956 to 30 September 1957), and Type of Report (Annual).

SECTION F.

CERTIFICATION

Certification section with fields for Date (23 Oct 57), Supervisor Name and Signature (Lloyd GEORGE), Supervisor's Title, Date (16 Oct 1957), Reviewing Official Name and Signature (Edward M. ...), and Reviewing Official Title (Chief SOV Branch).

SECTION G.

ESTIMATE OF POTENTIAL

Section G containing a list of 7 potential levels and a rating number of 7. Includes directions for rating potential.

2. SUPERVISORY POTENTIAL. DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING.

Table with columns: ACTUAL, POTENTIAL, and DESCRIPTIVE SITUATION. Rows describe various supervisory scenarios like 'A GROUP DOING THE BASIC JOB', 'A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB', etc.

**SECRET**  
(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION OF PERSONNEL  
 15

4. COMMENTS CONCERNING POTENTIAL  
 Subject is well suited for this business and the business should progress steadily to positions of great responsibility.  
 Oct 20 11:50 PM '57  
 MAIL ROOM

**SECTION M. FUTURE PLANS**

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Normal refresher a/o preparatory training as required.

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

No limiting factors or personal circumstances known to the rater

**SECTION I. DESCRIPTION OF INDIVIDUAL**

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

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL  
 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE  
 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE  
 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE  
 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE  
 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

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

**SECRET**

SECRET

(When Filled In)

### FITNESS REPORT (Part I) PERFORMANCE

#### INSTRUCTIONS

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

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

#### SECTION A.

#### GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
	10 Jan. 1924	M	DI
5. OFFICE DIVISION BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
(REDWOOD)	Area Operations Officer		
7. GRADE	8. DATE REPORT DUE IN DP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-14		1 October 1955 to 30 September 1956	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> ANNUAL			

#### SECTION B.

#### CERTIFICATION

1. FOR THE RATER: THIS REPORT  HAS  HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

#### A. CHECK (X) APPROPRIATE STATEMENTS:

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

B. THIS DATE	C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	D. SUPERVISOR'S OFFICIAL TITLE
15 November 1956	E. Edward M. Arlino	Chief, Soviet Branch

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

BY: *R* DNE 18 1956  
*Jan 1-22-57*

CONTINUED ON ATTACHED SHEET

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

A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
21 November 1956	<i>W. David George</i>	Chief of Operations

#### SECTION C.

#### JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES  
DIFFICULTIES: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

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

COMMENTS:

**SECRET**

(When Filled In)

**2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES**

**DIRECTIONS:**

a. State in the spaces below up to six of the more important SPECIFIC duties performed during the rating period. Place the most important first. Do not include minor or unimportant duties.

b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.

c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).

d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.

e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.

f. Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	MAIL ROOM
GIVING LECTURES	DEVELOPS NEW PROGRAMS	CONDUCTS INTERVIEWS
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	PREPARES SUMMARIES
WRITING TECHNICAL REPORTS	MANAGES FILES	TRANSLATES GERMAN
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	DEBRIEFING SOURCES
TYPING	COORDINATES WITH OTHER OFFICES	KEEPS BOOKS
TAKING DICTATION	WRITES REGULATIONS	DRIVES TRUCK
SUPERVISING	PREPARES CORRESPONDENCE	MAINTAINS AIR CONDITIONING
		EVALUATES SIGNIFICANCE OF DATA

g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

- |   |  |
|---|--|
| 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY                                     | 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS |
| 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY                                 | 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY   |
| 3 - PERFORMS THIS DUTY ACCEPTABLY   |  |
| 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER  |  |
| 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB |  |

SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER
Deputy to Branch Chief	5	Supervising	4
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER
Conducts Foreign Liaison	6	Prepares correspondence and reports	6
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER
Prepares and manages projects	4	Handles admin routine	4

**3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

**DIRECTIONS:** Stress strengths and weaknesses, particularly those which affect development on present job.

Subject has really superb natural equipment for work in this Organization in terms of mental capacity, psychological bent and affinity for the things and people he comes against. He tops this off with industry and language ability among other natural aptitudes. On the debit side and measured against the best, he is a bit shy of humor and personal understanding in some situations, qualities which mitigate more against acceptability than job competence.

**SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION**

**DIRECTIONS:** Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

7	1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
	2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
	3 - A BARELY-ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
	4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
	5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
	6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
	7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION?  YES  NO. IF YES, EXPLAIN FULLY:

Subject is an all around performer capable of a primary, in place of his present secondary, responsibility.

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

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

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OF no later than 30 days after the due date indicated in item 8 of Section "F" below.

SECTION E. GENERAL
1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
7. GRADE 8. DATE REPORT DUE IN OP 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
10. TYPE OF REPORT (Check one) INITIAL REASSIGNMENT-SUPERVISOR SPECIAL (Specify) ANNUAL REASSIGNMENT-EMPLOYEE

SECTION F. CERTIFICATION
1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.

SECTION G. ESTIMATE OF POTENTIAL
1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.
RATING NUMBER 7

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

Table with columns: ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Rows describe various supervisory levels and situations for rating.

SECRET

(When Filled In)

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

OFFICE OF PERSONNEL

4. COMMENTS CONCERNING INDIVIDUAL  
Subject has a high all around potential. With respect to subordinates, he tends to support subordinates from his own energy rather than to bring them along the hard way, and a normal tendency to avoid the categorical "no" - both tendencies easily correctable.  
MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL  
Routine refresher training as appropriate.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS  
All normal. No limiting factors.

SECTION I. DESCRIPTION OF INDIVIDUAL

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

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL  
1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE  
2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE  
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE  
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE  
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

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

SECRET

SECRET  
(When Filled In)

FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:  
1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and  
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors. The report is accurate and complete. Primarily, the report rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that you know where he stands.

FIELD REPORT

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE INDIVIDUAL BEING RATED.

Posted Pos. Control PAS 29 NOV 1955

Reviewed By PUD ARR 12/7/55

SECTION I

1. DATE OF BIRTH	2. SEX	3. SERVICE DESIGNATION
20 Jan 1924	M	(1) FI, (2) PP
4. GRADE	5. STATION DESIGNATION (Current)	
GS-7	USSR Base, <u>SR 839</u>	
6. DUE DATE OF THIS REPORT	7. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
30 September 1955	17 February - 30 September 1955	

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Chief, USSR Base, <u>0136.01</u>	17 February 1955

3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)

1. As Chief of Operating Base:
  1. Manage and direct all operations against target area, and monitor products.
  2. Supervise system of development and exploitation of operational leads.
  3. Supervise proper administration and support of operations, including finances.
  4. Conduct or supervise effective liaison with other KUBARK elements, with other Government agencies abroad and, when appropriate, with representatives of other governments.
2. As Senior SR Division Officer in Area:
  1. Consult with or advise other KUBARK and non-KUBARK units on target area, government, and IS characteristics.
  2. Make available to other KUBARK and non-KUBARK units area specialists, as required.

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES	
1. I, <u>W. Lloyd Jones</u>	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
3. THIS REPORT <input checked="" type="checkbox"/> WAS <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.	4. DATE REPORT AUTHENTICATED AT HQS. <u>7 Nov. 1955</u>
5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE FITNESS REPORT AND SIGNATURES	

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY



**SECRET**  
(When Filled In)

**SECTION IV - RECORD OF PERSONNEL**

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that ~~are~~ <sup>may</sup> not describe most people. On the right hand side of the page are four major categories of descriptions. The ~~best~~ <sup>best</sup> category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how such the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means ~~that~~ <sup>that</sup> the definite opinion that the description is not at all suited to the individual.

STATEMENTS	CATEGORIES	NOT	DOES	APPLIES TO A	APPLIES TO A	APPLIES TO AN	APPLIES TO AN	
		OB- SERVED	NOT APPLY	LIMITED DEGREE	REASONABLE DEGREE	ABOVE AVERAGE DEGREE	OUTSTANDING DEGREE	
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES			X				
B. PRACTICAL.						X		
1. A GOOD REPORTER OF EVENTS.							X	
2. CAN MADE DECISIONS ON HIS OWN WHEN NEED ARISES.							X	
3. CAUTIOUS IN ACTION.						X		
4. HAS INITIATIVE.							X	
5. UNEMOTIONAL.							X	
6. ANALYTIC IN HIS THINKING.								X
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.							X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.							X	
9. HAS SENSE OF HUMOR.							X	
10. KNOWS WHEN TO SEEK ASSISTANCE.							X	
11. CALM.								X
12. CAN GET ALONG WITH PEOPLE.							X	
13. MEMORY FOR FACTS.							X	
14. GETS THINGS DONE.								X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.								X
16. CAN COPE WITH EMERGENCIES.							X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.								X
18. HAS STAMINAL CAN KEEP GOING A LONG TIME.							X	
19. HAS WIDE RANGE OF INFORMATION.								X
20. SHOWS ORIGINALITY.							X	
21. ACCEPTS RESPONSIBILITIES.								X
22. ADMITS HIS ERRORS.							X	
23. RESPONDS WELL TO SUPERVISION.								X
24. EVEN DISPOSITION.						X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.							X	



SECRET  
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS:  
OFFICE OF PERSONNEL

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION?  NO  YES. IF YES, <sup>4/11/55</sup> <sub>11 07 AM '55</sub>

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL  
MAIL ROOM

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI.

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

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

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA?  NO  YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION... IRKED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION... ANNOYED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION... THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET

SECRET  
SECURITY INFORMATION

BY 7 DATE

PERSONNEL EVALUATION REPORT

*McKeefee 8/1/54*  
*R.T. 8/1/54*

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. NAME (Last)	(First)	(Middle)	2. GRADE GS-13	3. POSITION TITLE Area Ops. Officer CD-FI
4. OFFICE DDP	STAFF OR DIVISION SR	BRANCH SR/5	<input type="checkbox"/> DEPT'L. <input type="checkbox"/> FIELD	IF FIELD, SPECIFY STATION
5. PERIOD COVERED BY REPORT From 18 July 1953 To 17 July 1954		6. TYPE OF REPORT <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

18 July 53 - 31 Jan 54  
a. Manage and direct the activities of an overseas operating branch.  
b. Assist the division chief of operations in the planning of new and continued oper'ns.  
c. Assist the division chief in personnel programming in support of branch and field station activities.

1 Feb 54 - 17 Jul 54  
a. Establish new domestic activities branch.  
b. Develop and manage operational program of this branch, insuring (1) continuity of treatment by qualified personnel, (2) processing of intelligence requirements, and (3) expeditious movement of finished intelligence.  
c. ~~Multilateral liaison with other elements of CIA, the Government, and foreign IS.~~

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
Counterespionage (OTR)	Washington	3 weeks	22 January 1954

(In addition to the duties indicated in §7 above, I also give a 3-hour lecture at the CE course (advanced phase) approximately every six weeks.)

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED? I am primarily interested in a foreign assignment where I could apply the various espionage and CE techniques it has been my responsibility to manage and plan for in recent years.  
IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).  
My work at headquarters has become somewhat narrowing in that I am losing language abilities and opportunity for direct contact with foreigners.

10.

3 July 1954 DATE	<i>[Signature]</i> SIGNATURE
---------------------	---------------------------------

Items 11 through 18 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

                     is a superior officer in the performance of his duties. He is efficient, precise, and energetic, and brings considerable imagination and foresight to the operational problems confronting him. His concept of staff organization and responsibility is of a high caliber. In handling personnel, he is perceptive and serious, and his judgment and motivation are of the highest quality.

SECRET  
SECURITY INFORMATION

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING? This officer has been outstanding as a staff officer. He is unusually talented in his balancing of jurisdictional equities. This ability reflects a broad competence, however, and should not be construed so as to limit his future duties.
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT? This officer's devotion to his duties and professional convictions sometimes inclines him toward inflexible declarations of position. This fault, a minor one in officers of considerable potential, will be corrected by increased responsibility and experience.
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE. This officer is prepared for promotion and for increased responsibilities in command or staff duties.
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.) <input type="checkbox"/> is presently well placed. See below.
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON? Tradecraft training and a field assignment. Both are planned in the next six months. <i>FI/Training</i>
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.
<u>29 July 54</u> DATE <u><i>P. de S.</i></u> SIGNATURE OF SUPERVISOR
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in item 20.) <u>21 July '54</u> DATE <u><input type="checkbox"/></u> SIGNATURE OF REVIEWING OFFICIAL
20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)

SECRET

**SECRET**  
SECURITY INFORMATION

CLL

**PERSONNEL EVALUATION REPORT**

*Items 1 through 6 will be completed by Administrative or Personnel Officer*

1. NAME (Last)	(First)	(Middle)	2. GRADE	3. POSITION TITLE
		B G.	GS-13	Dep. Intell. Off. (Chief) CD F1
4. OFFICE	STAFF OR DIVISION	BRANCH	<input checked="" type="checkbox"/> DEPT'L.	IF FIELD, SPECIFY STATION
DDP	SR	SR 5 FE Br.	<input type="checkbox"/> FIELD	
5. PERIOD COVERED BY REPORT		6. TYPE OF REPORT		
From	To	<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Annual	<input type="checkbox"/> Special
2-18-53	7-18-53	<input type="checkbox"/> Reassignment	<input type="checkbox"/> Reassignment of Supervisor	

*Items 7 through 10 will be completed by the person evaluated*

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

a. Supervise and manage a foreign geographic branch; this includes a total of  authorized personnel at Hq and in the field stations. b. Direct and coordinate all project development. c. Detect and explore potential operational leads. d. Coordinate intra-division activities with appropriate branches, inter-division activities with appropriate divisions, senior staffs, and elements outside DD/P and CIA. e. Determine the suitability of new personnel, continued employment and rotation of incumbent personnel, and make available incumbent personnel on loan basis to other divisions, etc. f. Apportion the operational and administrative workloads within the branch sections and desks, and their personnel. g. Adapt changing field situations and problems to the organization and operation of the branch, making the branch best serve the needs of the field stations. h. Review continuously all requirements imposed on the branch, and transmit them clearly to

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
None (I was overseas part of the time covered by this report).			

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED? I am principally interested in the building and successful operation of American intelligence abroad, both in theory and in practice.

IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS). The only remark/can make here is the one I stated in the previous report: the administrative responsibilities of a branch chief do not enable him to be a purely operational individual. If it were possible to carry less of an administrative load, I would enjoy devoting all of my time to the refinement of the intelligence process and its techniques in my area of concern.

10.

22 October 1953

DATE

SIGNATURE



*Items 11 through 18 will be completed by Supervisor*

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

During this period [redacted] was promoted from Deputy Branch Chief to Branch Chief, in recognition of his extremely good performance. Not enough time has elapsed to be able to evaluate him fully on all aspects of his new position. However, his handling of the Branch has been unusually good from a management point of view and there is every reason to believe that in the planning and direction of operational activities the same high standard will prevail.

JPH

SECRET  
SECURITY INFORMATION

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING? He is a good organizer and a good leader. He is methodical and thorough in his planning and supervision of substantive activities, while at the same time he maintains close and sympathetic relations with his subordinates. His knowledge of them and of their personalities and problems is outstanding.	
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT? He should continue to develop his knowledge of operations and operational procedures.	
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE. He is well equipped to advance through increasing levels of responsibility.	
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.) Well placed at present.	
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON? Assignment to a field position in the not-too-distant future.	
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.	
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.	
26 October 1953 DATE	 SIGNATURE OF SUPERVISOR
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in item 20.) 26 October 1953 DATE	 SIGNATURE OF REVIEWING OFFICIAL
20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)	

**SECRET**  
SECURITY INFORMATION

**PERSONNEL EVALUATION REPORT**

*Items 1 through 6 will be completed by Administrative or Personnel Officer*

1. NAME (Last) (First) (Middle)		2. GRADE	3. POSITION TITLE	
G.		GS-12	I.O. (Dep. Chief)	
4. OFFICE	STAFF OR DIVISION	BRANCH	<input checked="" type="checkbox"/> DEPT'L.	IF FIELD, SPECIFY STATION
DDP	SR	SR-5 Far East	<input type="checkbox"/> FIELD	
5. PERIOD COVERED BY REPORT From 2-18-52 To 2-18-53		6. TYPE OF REPORT		
		<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Annual	<input type="checkbox"/> Special
		<input type="checkbox"/> Reassignment	<input type="checkbox"/> Reassignment of Supervisor	

*Items 7 through 10 will be completed by the person evaluated*

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES. Assist the Branch Chief in management of the Branch and its overseas stations (3); at present, I act as Branch Chief about 25%-30% of the year. Supervise the planning and preparation for approval of all basic plans, programs, and projects. This involves thorough discussion with each of [ ] desk chiefs of the purposes and procedures for accomplishing any single mission under any given project, including target analysis (whether FI or PP), preparation of intelligence annexes, logistic and fiscal requirements, specific personnel needs, etc. Am responsible for working directly with the Division's Intelligence Branch for control of requirements, ops intelligence, and reports. Am responsible for maintaining liaison with appropriate staffs and other Divisions who must coordinate any action or document. Assist or direct, as required, specific mission planning at overseas stations on TDY. Supervise preparation of all periodic reports; interview candidate empl.

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
International Politics, 102	Graduate School Georgetown University, Washington.	4 months: 3 hours' credit	5 June 1952

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

I am primarily interested in the conception, planning, and operational management of FI and PP activities and ops policy and control. IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS). This differs from my present assignment essentially in that a Branch Chief or his Deputy becomes so involved in administrative detail that he cannot always give his undivided attention to project management and agent handling problems. Otherwise, I feel that my background and experience qualify me for the functions I aspire to perform.

10.

7 February 1953

DATE

SIGNATURE

*Items 11 through 18 will be completed by Supervisor*

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE. As Deputy Branch Chief, [ ] has performed his duties, taken as a whole, in a superior manner. His timely and efficient preparation of intelligence annexes, logistic and fiscal requirements and reports has been particularly outstanding. During three to four months of the past year, [ ] has acted as Branch Chief. The review of Branch operations under [ ]'s direction, during the writer's absence, indicated his complete competence in supervising Branch activities. His supervision of the planning and preparation for approval of basic plans and projects of the [ ] desk chiefs has been superior. Mr. [ ] also participated in the planning and dispatch of a difficult operational mission, acting in the capacity of Senior Case Officer. On this mission his liaison with representatives of one of the Military Services was conducted in a manner which enhanced cooperation between that Service and this Agency.



SECRET  
SECURITY INFORMATION

12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING? [redacted] performance was noticeably outstanding with respect to his thorough know- ledge of every activity of the Branch. He was in position to assume direction of Branch activities at any time. He also kept himself thoroughly briefed on Division policies and planning in order to give timely instruction and guidance to the Branch overseas stations.
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT? [redacted] has a very thorough background in two (2) languages, [redacted] He would benefit substantially by learning the Russian language. He is meticulous with res- pect to his attention to details, sometimes to the point of concealing the broader picture from his view. It would be well for [redacted] to direct his attention to the broad scope of Branch activities rather than to concentrate on its details.
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE. [redacted] is fully qualified to assume the duties of the chief SR Division representa- tive at a field station. In order to assume this responsibility in the most efficient manner, it is recommended that [redacted] serve a minimum period of time of approximat- ely six (6) months as the assistant to the present chief of the field station.
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.) [redacted] could serve effectively in a staff function for either FI or PP activities. This does not mean, however, that his present duties are not better suited to his quali- fications.
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON? [redacted] has already been recommended for overseas assignment in the Far East during the past year. He has area knowledge and command of the [redacted] language, having served [redacted] previously with the United States Army. His duties at Headquarters have been so pressing that his departure for overseas assignment is being delayed until an adequate replacement may be trained.
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.
<p><u>March 31 1953</u> DATE</p> <p><u>George J. Kiser</u> SIGNATURE OF SUPERVISOR</p>
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in Item 20.) <p><u>11 March 30 1953</u> DATE</p> <p>[redacted] SIGNATURE OF REVIEWING OFFICIAL</p>
20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)

SECRET

WARNING—Do not fill out this form until you have read all instructions.

### DESIGNATION OF BENEFICIARY CIVIL SERVICE RETIREMENT SYSTEM

STANDARD FORM NO. 2808 JUNE 1966  
U.S. Civil Service Commission  
PFM Supplement 831-1 2808-104

#### A. INFORMATION CONCERNING THE DESIGNATOR

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH (Month) (Day) (Year) 3. SOCIAL SECURITY NUMBER  
Jan 20 1924

4. DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU OR DIVISION 5. CLAIM NUMBER IF RETIRED  
CSA—

I, the employee or former employee identified above, canceling any and all previous designations of beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any lump-sum benefit which may become payable under the Civil Service Retirement Act after my death. I understand that this designation of beneficiary will not affect the rights of any survivors who may qualify for annuity benefits after my death, and that this designation will remain in full force and effect unless or until canceled by me in writing.

#### B. INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES

TYPE OR PRINT FIRST NAME, MIDDLE INITIAL, AND LAST NAME OF EACH BENEFICIARY	TYPE OR PRINT ADDRESS (Including ZIP Code) OF EACH BENEFICIARY	RELATIONSHIP	SHARE TO BE PAID TO EACH BENEFICIARY (See Example)
Pamela	5 villa Madrid,	Dau	One half
Michelle	5 villa Madrid	Dau	One half

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary or beneficiaries who may die before a lump-sum benefit becomes payable shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. If none of the beneficiaries are alive when the lump-sum benefit becomes payable, this designation shall be void.

January 12, 1972

DATE OF THIS DESIGNATION  
(MONTH) (DAY) (YEAR)

(SIGNATURE OF DESIGNATOR—DO NOT PRINT)

#### C. WITNESSES (1 witness is ineligible to receive payment as a beneficiary)

W THIS INSTRUMENT WAS SIGNED IN OUR PRESENCE.  
13219 Alantown Ave. Rockville, Md.  
(SIGNATURE OF WITNESS—DO NOT PRINT) (NUMBER AND STREET) (CITY, STATE, AND ZIP CODE)  
(SIGNATURE OF WITNESS—DO NOT PRINT) (NUMBER AND STREET) (CITY, STATE, AND ZIP CODE)

PRINT OR TYPE YOUR NAME AND ADDRESS (Including ZIP Code) TO INSURE RETURN OF COPY

722 South Royal Street  
Alexandria VA 22134

(Reserved for Receiving Stamp of U. S. Civil Service Commission)

MAN 2 JUN 23 AM '72

PERSONAL AFFAIRS

THIS DUPLICATE WILL BE RETURNED TO YOU

Standard Form No. 1152  
Form prescribed by  
Comptroller General, U. S.  
October 23, 1950  
(Gen. Reg. No. 104, Supp. No. 1)

**DESIGNATION OF BENEFICIARY**  
**UNPAID COMPENSATION OF**  
**DECEASED CIVILIAN EMPLOYEE**

**IMPORTANT**  
Read instructions  
on back of duplicate  
before filling in this form

**INFORMATION CONCERNING THE EMPLOYEE:**

NAME— (Last)	(First)	(Middle)	DATE OF BIRTH (Month, day, year)
<input type="text"/>			Jan 20 1924

**DEPARTMENT OR AGENCY IN WHICH EMPLOYED**

(Department or agency)	(Bureau)	(Division)
------------------------	----------	------------

I, the employee identified above, canceling any and all previous Designations of Beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any UNPAID COMPENSATION due and payable under existing law after my death. I understand that this Designation of Beneficiary relates solely to Unpaid Compensation as defined in section 2 of the act of August 3, 1950, Public Law 656, and in no wise will affect the disposition of any benefit which may become payable under the Retirement Act applicable to my Government service. I further understand that this Designation of Beneficiary will remain in full force and effect, unless or until canceled by me in writing, so long as I am continuously employed in the above department or agency.

**INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:**

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Pamela <input type="text"/>	<input type="text"/>	Dau	One half
Michelle <input type="text"/>		Dau	One half

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change any designation of beneficiary at any time in the manner and form prescribed by the Comptroller General of the United States, and without knowledge or consent of the beneficiary.

January 12 1972

(Date of execution—month, day, year)

(Signature of employee)

**WITNESSES TO SIGNATURE:**

<input type="text"/>	13219 Montross Ave.	Leesville N.C.
(Signature of witness)	(Number and street)	(City, zone number, and State)
(Signature of witness)	(Number and street)	(City, zone number, and State)

**PRINT OR TYPE NAME AND ADDRESS OF EMPLOYEE**

722 South Royal Street  
Alexandria VA 22314

**THIS SPACE RESERVED FOR RECEIVING DATA**  
**FROM EMPLOYING AGENCY**

20 11 10  
20 11 10  
PERSONNEL AFFAIRS  
(Indicate date and by whom received)

DELIVER BOTH COPIES TO THE PROPER OFFICER OF YOUR AGENCY—DUPLICATE WILL BE NOTED AND RETURNED

**DUPLICATE**

Standard Form No. 64  
January 1948  
U.S. Civil Service Commission  
FPM Supplement 990-1  
54-106

## DESIGNATION OF BENEFICIARY FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT**  
Read instructions  
on back of duplicate  
before filling in this form

**INFORMATION CONCERNING THE INSURED:**

NAME (Last) (First) (Middle) DATE OF BIRTH (Month, day, year)

PLACE AN "X" IN THE APPROPRIATE BOX BELOW TO SHOW WHETHER YOU ARE:

AN EMPLOYEE    
  RETIRED OR AN APPLICANT FOR RETIREMENT    
  RECEIVING FEDERAL EMPLOYEES' COMPENSATION BENEFITS OR AN APPLICANT FOR SUCH BENEFITS

IF YOU ARE RETIRED OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION BENEFITS, GIVE YOUR "CSA," "CSL," "A," or "X" NUMBER

(CSA, CSL, A, or X number)

DEPARTMENT OR AGENCY IN WHICH PRESENTLY EMPLOYED (if retired, former department or agency):

(Department or agency) (Bureau) (Division) (Location—City, State, and ZIP Code)

I, the individual identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees Group Life Insurance Program heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of LIFE INSURANCE and ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as it is automatically canceled (see regulation "f" on reverse side of duplicate copy).

**INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES (SEE EXAMPLES OF DESIGNATIONS):**

Type or print first name, middle initial, and last name of each beneficiary	Type or print address (including ZIP Code) of each beneficiary	Relationship	Share to be paid to each beneficiary

For each type of insurance (regular and optional): (1) I hereby direct, unless otherwise indicated above, that if more than one beneficiary is named, the share of any beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. (2) I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change this Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

(Date of execution—month, day, year)

(Signature of insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

(Signature of witness)    
 13219 Monticello (Number and street)    
 Rockville, Md. (City, State, and ZIP Code)

PRINT OR TYPE NAME AND ADDRESS (including ZIP Code) OF INSURED

THIS SPACE RESERVED FOR RECEIVING AGENCY

[ ]  
 [ ]  
 [ ]  
 [ ]

22 JAN 27 1974  
 58...

(Indicate date and by whom received)

SEE REVERSE SIDE OF DUPLICATE COPY FOR INSTRUCTIONS ON WHERE TO FILE THESE FORMS.  
DO NOT FILE WITH THE OFFICE OF FEDERAL EMPLOYEES' GROUP LIFE INSURANCE

**DUPLICATE**

<b>DISPATCH</b>		CLASSIFICATION	PROCESSING ACTION
		<b>S E C R E T</b>	MARKED FOR INDEXING
TO	Chief, European Division		NO INDEXING REQUIRED
INFO.			ONLY QUALIFIED DESK CAN JUDGE INDEXING
FROM	Chief of Station, <input type="text"/>	<i>APL</i>	MICROFILM
SUBJECT	ADMIN/Personnel <del>XXXXXXXXXX</del> - Change of Beneficiary Forms <i>SIA</i>		
ACTION REQUIRED - REFERENCES			
<p style="text-align: center;">Forwarded herewith and under separate cover are change of beneficiary forms completed by <del>XXXXXXXXXX</del>. Since <del>XXXXXXXXXX</del> will be at Headquarters during home leave towards the end of February, it is suggested that he be contacted during his TDY if additional information is required.</p> <p style="text-align: right;"><i>Carolyn A. Tanzola</i> Carolyn A. TANZOLA</p> <p>Attachments:  1. Flight &amp; Accident Plan, h/w <del>XXXXXXXXXX</del> <i>to be reviewed by 281 PNC</i>  2. SF-2808, U/S/C via TNP  3. SF-54, U/S/C via TNP  4. SF-1152, U/S/C via TNP</p> <p>Distribution:  3-Chief, Eur-Div w/att #1-h/w; #2,3,4-usc-tnp</p> <p style="text-align: right;"><b>CABLE BOARD</b> 24 FEB 1972</p> <p style="text-align: right;"><i>Dick</i></p>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE	
<input type="text"/>	<input type="text"/> -17469	10 February 1972	
<b>GROUP 1</b> EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION	CLASSIFICATION	HQS FILE NUMBER	
	<b>S E C R E T</b>		

52 74-57

**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)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
[REDACTED]	20 Jan 1924	
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 insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here if you **WANT NEITHER** regular nor optional insurance  **(C)** **WAIVER OF LIFE INSURANCE COVERAGE**  
I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

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

SIGNATURE (do not print) [REDACTED]

DATE  
1 March 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

9112  
731100  
89. 113 07 3 61 1117

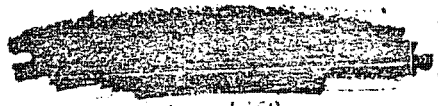
See Table of Effective Dates on back of Original

S. 1000000000

31 July 1962

Date

THIS IS TO CERTIFY THAT THE ABOVE IS A TRUE COPY OF THE PROVISIONS  
OF REGULATION 10(1) OF THE EMPLOYMENT OF OVERSEAS EMPLOYEES  
ACT 1959 CONCERNING  
THE PERSONAL CREDIT OF OVERSEAS EMPLOYEES OVERSEAS.



S. 1000000000

S. 1000000000

CABLE SECRETARIAT DISSEMINATION		CLASSIFIED MESSAGE	TOTAL COPIES 17	ROUTING AND/OR INITIAL SET BY	
PERSON UNIT NOTIFIED		<b>SECRET</b> (When Filled In)	REPRODUCTION OF THIS COPY PROHIBITED	GROUP 1	5
ADVANCE COPY <input type="checkbox"/> ISSUED <input type="checkbox"/> SLOTTED				2	6
BY _____ AT _____				3	7
DISSEM BY <u>ss</u> PER _____				4	8
ACTION UNIT	FILE. VR	<i>of/secret</i>			
ACTION NO. <u>071</u>		<i>of/secret</i>			

TRB

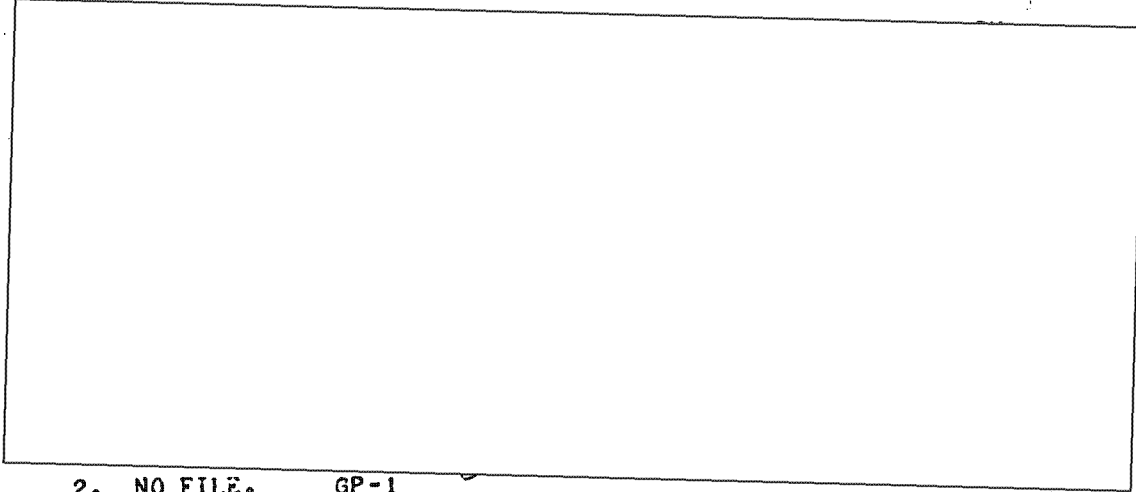
SECRET 011654Z JUN 72 CITE [ ] (RILANDER ACTING)

DIRECTOR

1 JUN IN 625469

RYBAT ADMIN PERS TOPSY WODEEP WOGAME

REF: DIRECTOR 271979



2. NO FILE. GP-1

SECRET

SECRET



SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use <i>code</i> only if SA)		DATE (from item 5-2)	NAME OF SUPERVISOR ( <i>code</i> )	DATE (from item 5-2)
[REDACTED]		3 Feb. 1969	David Murphy	3 Feb. 1969
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
20 February 1969		TM-798947		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
20 J 1924	CS	S&T project manager, Area Ops Off, GS 15	[REDACTED]	LPCOVER
6A. DATE OF PCS ARRIVAL IN FIELD	6B. REQUESTED DATE OF DEPARTURE	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
5 Sep 1967	Please see 11B	Summer 1970	o/a 15 August 1970	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
3: (at that time) 42, 19 and 16				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
<p>My younger daughter should graduate from high school in Europe in June, 1970. Because she should not be transferred at that critical scholastic juncture, I would like to remain in the field another nine months to see her through her senior year.</p> <p>In my next assignment, I would like to use my fluent [REDACTED] from time to time, if possible.</p>				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)				
<ul style="list-style-type: none"> <li>• I planned, established and operated a long-range S&amp;T spotting-assessment activity against sensitive targets, and a shorter-range similar local activity in an adverse political climate.</li> <li>• I planned, developed and exploited an adapted [REDACTED] to mask the operational activity, incorporated into the further-ranging overall activities of a major Station.</li> </ul>				
<ul style="list-style-type: none"> <li>• I assisted other Stations and Bases, at their request, in spotting-assessment activities, in local search and surveillance activities, and in recruitment.</li> </ul>				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
<p>I would like to take (a) the seniormost management course offered by or through the Organization as well as (b) a review course of activities within the CS and the Organization as a whole.</p> <p>In addition, I would also like to (c) audit, at least, the S&amp;T course, if that is still being offered.</p> <p>If (a) is possible through a civil school away from Headquarters, I would have no objection to the displacement involved.</p>				

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.

First choice: to manage a large-scale [redacted] project in another [redacted]-speaking, technically advanced area (such as metro-politan [redacted] or [redacted]).

Second choice: chief of station or base [redacted] in an appropriate area.

Third choice: to be assigned to Staff training, preferably training (a) senior unit or project managers or (b) JOTs.

Fourth choice: to be assigned to Staff personnel work -- above the Division level -- where new personnel are screened, tested and evaluated, then assigned.

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 nine MONTHS AT CURRENT STATION TO 15 June 1970 (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, with different responsibilities.

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:

We are anxious to have this employee remain in his present assignment until 1970. You will note his first choice in para 11-A, to manage a large scale [redacted] project. It is possible we will have such a requirement here by 1970, but cannot yet be definite. If this develops positively, we will discuss with the employee.

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.

EUR Division recommends that ~~request~~ request for an extension of his current tour until June 1970 be approved.

DATE 3/11/69 TITLE C/E/PERS SIGNATURE \_\_\_\_\_

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

Extended to June 1970

15. EMPLOYEE NOTIFIED BY DISPATCH NO. CFPS-11748 DATED: 11 July 69

CABLE NO. \_\_\_\_\_ DATED: \_\_\_\_\_

CAREER SERVICE REPRESENTATIVE: \_\_\_\_\_

(SIGNATURE)

7/16/69

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:

DO NOT COMPLETE

DO NOT COMPLETE

DATE (from item 5-2)	NAME OF SUPERVISOR (temp)	DATE (from item 5-2)
9 Dec 1963	[redacted]	27 Dec 1963

NAME OF AUTHORITY AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE	7A. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
10 Jan 1924	GS-15	Operations Officer, GS-15	10 September 1962
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE	7B. EXPECTED DATE OF DEPARTURE FROM FIELD	7C. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
	[redacted]	September 1965	
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			
None			

8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):

Staff agent assigned to a major overseas station, exploiting the

I take my instructions from a section chief within the station, and report in writing on the progress of my [redacted] development and its operational exploitation.

For operational reasons, I develop and assess operational leads in the FI, CI and CA areas, principally against denied area targets. I also handle local investigations and such cases as the station determines will fit [redacted] or which I can otherwise handle in alias. I travel to other field stations to handle such tasks as they request or Hq directs. I handle all [redacted] tasks as they appear.

9. PREFERENCE FOR NEXT ASSIGNMENT:

A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8. ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.

I would like to continue to serve essentially in the same capacity as described above, although I would like eventually to add more supervisory and managerial functions to my responsibilities. I would like to expand the operating base [redacted] by taking on several journeymen case officers to work with me against both denied area and host country targets, and to make [redacted] of more versatile use to both the station and to KUDOVE as a whole.

My second choice would be to return to Hq, and use the knowledge and experience I have gained in my present job to (1) select staff personnel who will be placed in [redacted] (2) select the [redacted] proper, (3) train our personnel for the proper discharge of their total responsibilities [redacted]

B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO IMPROVE YOUR PERFORMANCE IN YOUR PRESENT ASSIGNMENT (refer to catalog of courses, if available):

The completion of work toward a master's or doctor's degree in the physical or life sciences, or in the management/administration of the sciences and their personnel.

SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:	
<input type="checkbox"/> RETURN TO MY CURRENT STATION, after a one-year extension of my present tour	
<input checked="" type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY, WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS. INDICATE CHOICE OF COMPONENT:	
1ST. CHOICE <u>OTR</u> 2ND. CHOICE <u>Cover Group</u> 3RD. CHOICE <u>Office/Personnel</u>	
<input checked="" type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION, WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:	
1ST. CHOICE _____ 2ND. CHOICE _____ 3RD. CHOICE _____	
10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? INDICATE NUMBER OF WORK DAYS <u>25</u>	
11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:	
Wife, will be 37 in 1965; two daughters, 15 and 12 in 1965	
11A. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT	
Next post should have high school facilities teaching in French or in English.	
12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION	
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:	
Chief, External concurs in subject's wish for one year extension and return for second tour after home leave in the fall of 1965. However, subject's wish as expressed in 9.A. of having case officers working under him is not feasible at this time.	
14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS	
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:	
Recommend Home Leave and return for another tour. SR Concurs. <i>A. B...</i> 2-20-64	
16. NAME OF CAREER SERVICE OFFICER OR PERSONNEL OFFICER	SIGNATURE
DATE <u>6 February 1964</u>	<u>(S.D.)</u>
FOR USE OF CAREER SERVICE	
17. EMPLOYEE <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE DISPATCH NO. <u>OFPS-7995</u> CABLE NO. _____
19. <u>PRINTED NAME</u>	20. SIGNATURE
<u>SECRETARY, CS AGENT PANEL</u>	<u>SECRETARY, CS AGENT PANEL</u>
21. TITLE	22. DATE
<u>Secretary, CS Agent Panel</u>	<u>26 February 1964</u>
23. COMMENTS	
Approved extension of present tour to September 1965, followed by home leave, and then second tour.	

SECRET

CONTRACT INFORMATION AND CHECK LIST		CASE OFFICER X6356	DIVISION SR
<small>INSTRUCTIONS: Use SF 20-10.2 and SF 20-100.1 for guidance. Complete all items. Inserting "NA" when items are not applicable. Forward original and TWO copies for preparation of contract.</small>		TELEPHONE EXTENSION For contract info	DATE 9 July 1962
SECTION I GENERAL CALL BY JO. NEON X6356			
1. NAME <input type="checkbox"/> PERSON <input checked="" type="checkbox"/> TRUE	2A. PROJECT NA	3. ALLOTMENT NO. 3234-1008-1000	4. SLOT NO. 240
	2B. PERMANENT STATION	3A. FUNDS <input type="checkbox"/> F <input checked="" type="checkbox"/> X <input type="checkbox"/> US	
5. PREVIOUS CIA PSEUDONYM OR ALIASES	6. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) Staff Employee since 1949		
7. SECURITY CLEARANCE (Type and date) SI	7A. MEDICAL CLEARANCE <input type="checkbox"/> CONTAINED <input checked="" type="checkbox"/> INITIATED <input type="checkbox"/> NOT REQ'D	8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) ██████████	
SECTION II PERSONAL DATA			
11. CITIZENSHIP U.S.	12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO	13. AGE 33	14. DATE OF BIRTH (Month, day, year) January 20, 1924
15. LEGAL RESIDENCE (City and state or country) Alexandria, Virginia		16. CURRENT RESIDENCE (City and state or country) Alexandria, Virginia	
17. MARITAL STATUS (Check as appropriate) <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED			
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE:  Three - Wife, age 34 Daughter, age 8 Daughter, Age 11		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP:	
SECTION III U.S. MILITARY STATUS			
20. RESERVE NA	21. VETERAN Yes	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
23. BRANCH OF SERVICE U. S. Army	24. RANK OR GRADE	25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input type="checkbox"/> NO
SECTION IV COMPENSATION			
27. BASIC SALARY Pay entitlements equating to GS-14 (step 6) including premium pay \$13,570	28. POST DIFFERENTIAL	29. COVER (Breakdown, if any)	30. FEDERAL TAX WITHHOLDING COVER: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CIA: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)			
31. QUARTERS In accordance with regulations	32. POST	33. OTHER	
34. COVER (Breakdown, if any)			
SECTION VI TRAVEL			
35. TYPES <input checked="" type="checkbox"/> XPCB <input type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL			36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
37. HME TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	37A. HME TO BE STORED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	38. PERSONAL VEHICLE TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH Wife, U. S. Citizen, age 34, DOB 19 June 1928 Daughter, U. S. Citizen, age 8, DOB 5 September 1953 Daughter, U. S. Citizen, age 11, DOB September 1950			
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input checked="" type="checkbox"/> COVER POLICIES AND PROCEDURES			
SECTION VII OPERATIONAL EXPENSES			
42. PURCHASE OF INFORMATION As authorized	43. ENTERTAINMENT As authorized	44. OTHER As authorized	
45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES			

SECRET

<b>CONTRACT INFORMATION AND CHECK LIST (CONTINUED)</b>				CASE OFFICER <b>X6358</b>		DIVISION <b>SR</b>								
NOTE: SEE INSTRUCTIONS ON FIRST SHEET.				TELEPHONE EXTENSION		DATE <b>9 July 1962</b>								
				For contract info										
SECTION VIII OTHER BENEFITS call by Johnson X5423														
88. BENEFITS (See R 20-615, R 20-620, R 20-670, R 20-1000, and HB 20-620-1, HB 20-1000-1 and/or successor regulations for benefits applicable to various categories of contract personnel.)														
<b>All Staff Employee benefits</b>														
SECTION IX COVER ACTIVITY														
87. STATUS (Check)		PROPOSED		88. TYPE (Check)		PROPRIETARY								
		<input checked="" type="checkbox"/> ESTABLISHED				<input checked="" type="checkbox"/> CULTURAL								
						<input checked="" type="checkbox"/> COMMERCIAL								
						<input type="checkbox"/> TOURIST								
						<input type="checkbox"/> EDUCATIONAL								
						<input type="checkbox"/> MILITARY								
						<input type="checkbox"/> OTHER								
89. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS														
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL														
SECTION X OFFSET OF INCOME														
90. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.)														
<input checked="" type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input type="checkbox"/> NONE														
SECTION XI TERM														
91. DURATION				92. EFFECTIVE DATE		93. RENEWABLE								
DAYS MONTHS YEARS						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
94. TERMINATION NOTICE (Number of days)				95. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION										
				<input type="checkbox"/> YES <input type="checkbox"/> NO										
SECTION XII FUNCTION														
96. PRIMARY FUNCTION (CI, FI, PP, other)														
<b>FI and CA</b>														
SECTION XIII DUTIES														
97. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED														
Handling and supervision of field agents already recruited. Spotting, assessment and development of agent candidates or projects. Recruitment of agent candidates outside [ ] when necessary. Clandestine support of own and other station operations.														
SECTION XIV QUALIFICATIONS														
98. EXPERIENCE														
Photographic equipment salesman Newspaper assistant <del>XXXX</del> editor Assistant to planning division of housing authority of a major city Operations Officer for past 12 years														
99. EDUCATION														
(Check Highest Level Attained)		GRADE SCHOOL		HIGH SCHOOL GRADUATE		TRADE SCHOOL GRADUATE								
		BUSINESS SCHOOL GRADUATE		COMMERCIAL SCHOOL GRADUATE										
		COLLEGE (No degree)		<input checked="" type="checkbox"/> COLLEGE DEGREE		POST GRADUATE								
						MA								
						PHD								
10. LANGUAGE COMPETENCY														
(Check Appropriate Degree Competency)		LANGUAGE		SPEAK			WRITE			READ			91. INDIVIDUAL'S COUNTRY OF ORIGIN	
				FLUENT AVERAGE POOR			FLUENT AVERAGE POOR			FLUENT AVERAGE POOR				
		<b>French</b>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
		<b>Japanese</b>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>				
		<b>Russian</b>		<input type="checkbox"/>			<input type="checkbox"/>			<input checked="" type="checkbox"/>				
11. AREA KNOWLEDGE														
Canada, Japan, Western Europe thru residence, study and travel														
SECTION XV EMPLOYMENT PRIOR TO CIA														
93. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING														
Newspaper assistant editor - \$2,100 Assistant to planning division of housing authority \$3,100														
SECTION XVI ADDITIONAL INFORMATION														
94. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)														

OVER

APPROVAL

DATE	THIRD NAME & SIGNATURE OF REQUESTING OFFICER	DATE	FOURTH NAME
------	--	------	-------------

SECRET

9 December 1958

MEMORANDUM FOR: Secretary, CS/CSB

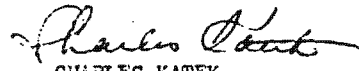
SUBJECT : Recommendation for Promotion to Grade GS-15 -  
[redacted]

REFERENCE : Your memorandum dated 8 October 1958

1. The SR Division and the Chief of Station [redacted] attached) recommend the promotion of [redacted] to GS-15.

2. [redacted] was last promoted 16 January 1955. On 17 February 1955 he arrived in [redacted] to serve as the senior SR officer in the FE field area, his present assignment. In this position he has continued to display qualities of leadership, initiative, imagination and thoroughness which resulted in his rapid rise in the Agency.

3. The very facts of [redacted]'s youth in relation to his responsibilities and the fact that promotion to his present level has been rapid, caused the Division and the Chief of Station, [redacted] to hold until this time a recommendation for his promotion which was submitted in June 1957. Most careful consideration has convinced us that not only is [redacted] deserving of the recommended promotion, but his elevation to the higher grade will be in the best interest of the Career Service and meet definite Division requirements for a senior officer at the GS-15 level.



CHARLES KATER  
Acting Chief, SR Division

Distribution:  
Orig & 6 - Addr

SECRET

OFFICIAL

CLASSIFICATION

DISPATCH

TO Chief, SR		INFORMATION ADDRESSEE Chief, FE	
FROM Chief of Station, [redacted]			
SUBJECT REDWOOD/ADMINISTRATIVE Promotion of [redacted]		HEADQUARTERS FILE NO.	DISPATCH SYMBOL AND NO. FJTT-1950
			DATE

REFERENCE(S)

FJTW-11531 (RYBAT), dated 11 October 1957  
 ACTION REQUIRED: See paragraph 2

[redacted] - 1  
 Baker - 2  
 Mandy - 3  
 Nelson - 4

1. In line with paragraph 2 of Reference, after a period of six months we submitted an additional promotion fitness report on [redacted] under cover of [redacted] dated 28 May 1958. Inasmuch as [redacted] was then at Headquarters on TDY, we requested that he review this fitness report and assured that in doing so he would also discuss with [redacted]'s promotion, which both he and [redacted] felt was to be strongly recommended.

2. [redacted] was, however, not shown this fitness report at Headquarters, nor did he have the opportunity to discuss [redacted]'s promotion with [redacted]. In reviewing our records we are now concerned at the possibility of some administrative slip-up and would appreciate a word of advice as to how this promotion action is proceeding. We would like to reiterate that we now have not the slightest hesitation in recommending [redacted] for promotion and find that the fitness report submitted with [redacted] still reflects our current high appreciation of his abilities and progress.

20 November 1958

Distributions:  
 2 - Chief, SR  
 2 - Chief, FE

✓ Pauls/Pear  
 Pear

CONTINUED →

OFFICIAL DISPATCH



SECRET

COPY  
Attachment to  
FJTA-19609

MEMORANDUM No. 360

18 June 1957

TO : Chief of Station

FROM : Chief, Soviet Branch

SUBJECT: [REDACTED] - Recommendation for Promotion

1. [REDACTED] has been under my supervision as Deputy and Case Officer for approximately fifteen months. Based on the knowledge of [REDACTED] as an individual gained during this period and upon his actual performance, I recommend that he be entered for consideration on the SR Division GS-14 to GS-15 promotion list at this time - June 1957. The slot and job which he now occupies, Chief, Soviet Branch, is, of course, adequate to accommodate such a promotion.

2. [REDACTED] operational performance has been outstanding and notably versatile during this period. He has engaged primarily in liaison and has been personally effective in terms of results achieved almost daily, in terms of reports, operational data, and joint enterprises; while, overall, he has established enduring professional relationships from which the organization as a whole should benefit for some time to come. In addition, owing in large part to unique personal talents, linguistic and otherwise, [REDACTED] has handled a number of unilateral cases most effectively. In the office, too, as well as in face-to-face operational situations, [REDACTED] has been outstanding. He has a flair for and a facility with the written word as evidenced by the amount of general and particular correspondence which he has initiated, and he knows the organizational "drill" intimately and from way back. Thus, I feel that he is qualified for the recommended promotion by ability and experience in both the internal and external aspects of the profession.

3. Relative to the more personal characteristics involved in the term managerial ability, judgments are necessarily more subjective but here, too, I consider [REDACTED] to be qualified in maturity, in judgment, and in experience. He would most certainly be a supervisor who could perform all the chores or handle all the situations which he would be calling upon subordinates to take care of, in itself, the beginning of any good supervisory relationship. In actual fact, he has had considerable experience in this regard already and the principal shortcoming I have noticed is a tendency to "carry" others by an extension of his own industry. [REDACTED] is not without his difficulties in the area of personal relationships. He is a purist at times and manifestly impatient in certain human situations where a shrug of the shoulders would be the

SECRET

**SECRET**

best reply. These characteristics do not always make for the best personal relations but are frequently obviated by intellect and above all are correctable and are being corrected.

4. In sum, ~~his~~ qualifications, broad experience and proven abilities dominate his age, the only factor militating against a promotion at this time. It is therefore my sincere recommendation that a promotion recommendation be forwarded to Headquarters for consideration in the current mid-year lists.

Edward MARFLISS ~~\_\_\_\_\_~~

**SECRET**

9 December 1958

MEMORANDUM FOR: Secretary, CI/CSS

SUBJECT: Recommendation for Promotion to Grade GS-15 -

REFERENCE: Two memoranda dated 8 October 1958

1. The CI Division and the Chief of Station, [redacted] attached) recommend the promotion of [redacted] to GS-15.

2. [redacted] was last promoted 16 January 1955. On 17 February 1955 he arrived in [redacted] to serve as the senior CI officer in the FE field area, his present assignment. In this position he has continued to display qualities of leadership, initiative, imagination and thoroughness which resulted in his rapid rise in the Agency.

3. The very facts of Mr. [redacted] youth in relation to his responsibilities and the fact that promotion to his present level has been rapid, caused the Division and the Chief of Station, [redacted] to hold until this time a recommendation for his promotion which was submitted in June 1957. Most careful consideration has convinced us that not only is Mr. [redacted] deserving of the recommended promotion, but his elevation to the higher grade will be in the best interest of the Career Service and meet definite Division requirements for a senior officer at the GS-15 level.

[redacted]  
Acting Chief, CI Division

Distribution:  
Orig & 6 - Misc

C O P Y

FJTT-1950

TO: Chief, SR

25 November 1958

FROM: Chief of Station, [redacted]

SUBJECT: Promotion of [redacted]

REFERENCE: FJTW-11531 (RYBAT) dated 11 Oct 1957

1. In line with paragraph 2 of Reference, after a period of six months we submitted an additional promotion fitness report on [redacted] under cover of [redacted] dated 28 May 1958. Inasmuch as Baker was then at Headquarters on TDY, we requested that he review this fitness report and assumed that in doing so he would also discuss with Maury [redacted] promotion, which both he and Nelson felt was to be strongly recommended.

2. Baker was, however, not shown this fitness report at Headquarters, nor did he have the opportunity to discuss [redacted] promotion with Maury. In reviewing our records we are now concerned at the possibility of some administrative slip-up and would appreciate a word of advice as to how this promotion action is proceeding. We would like to reiterate that we now have not the slightest hesitation in recommending [redacted] for promotion and find that the fitness report submitted with [redacted] still reflects our current high appreciation of his abilities and progress.

WILLIAM E. NELSON

SECRET

COPY  
Attachment to  
[redacted]

MEMORANDUM No. 360

18 June 1957

TO: Chief of Station  
FROM: Chief, Soviet Branch  
SUBJECT: [redacted] - Recommendation for Promotion

1. [redacted] has been under my supervision as Deputy and Case Officer for approximately fifteen months. Based on the knowledge of [redacted] as an individual gained during this period and upon his actual performance, I recommend that he be entered for consideration on the SR Division GS-14 to GS-15 promotion list at this time - June 1957. The slot and job which he now occupies, Chief, Soviet Branch, is, of course, adequate to accommodate such a promotion.

2. [redacted] operational performance has been outstanding and notably versatile during this period. He has engaged primarily in liaison and has been personally effective in terms of results achieved almost daily, in terms of reports, operational data, and joint enterprise; while, overall, he has established enduring professional relationships from which the organization as a whole should benefit for some time to come. In addition, owing in large part to unique personal talents, linguistic and otherwise, [redacted] has handled a number of unilateral cases most effectively. In the office, too, as well as in face-to-face operational situations, [redacted] has been outstanding. He has a flair for and a facility with the written word as evidenced by the amount of general and particular correspondence which he has initiated, and he knows the organizational "drill" intimately and from way back. Thus, I feel that he is qualified for the recommended promotion by ability and experience in both the internal and external aspects of the profession.

3. Relative to the more personal characteristics involved in the term managerial ability, judgments are necessarily more subjective but here, too, I consider [redacted] to be qualified in maturity, in judgment, and in experience. He would most certainly be a supervisor who could perform all the chores or handle all the situations which he would be calling upon subordinates to take care of, in itself, the beginning of any good supervisory relationship. In actual fact, he has had considerable experience in this regard already and the principal shortcoming I have noticed is a tendency to "carry" others by an extension of his own industry. [redacted] is not without his difficulties in the area of personal relationships. He is a purist at times and manifestly impatient in certain human situations where a shrug of the shoulders would be the best reply. These characteristics do not always make for the best personal relationships but are frequently obviated by intellect and above all are correctable and are being corrected.

E. In sum, [redacted] qualifications, broad experience and proven abilities dominate his age, the only factor militating against a promotion at this time. It is therefore my sincere recommendation that a promotion recommendation be forwarded to Headquarters for consideration in the current mid-year lists.

EDWARD MARELIUS

[redacted]

1 June 1959


MEMORANDUM FOR: Chairman, CS Career Service Board

SUBJECT : Nominations for Promotion to GS-15

REFERENCE : Memorandum dated 14 May 1958 from  
Secretary, CS Career Service Board

1. After reviewing GS-14 employees assigned to the SR Division, I wish to again recommend the promotion of [redacted] Chief, Soviet Branch, [redacted] to GS-15. I concur also in the attached recommendation for the promotion of [redacted] prepared by the Chief of Base, Berlin.

2. The Chief of Station, [redacted] and I recommended [redacted]'s promotion in December 1958. This earlier recommendation presented the personal qualities of Mr. [redacted]. I wish simply to point out at this time that since early 1954, [redacted] has more than fully discharged responsibilities at the GS-15 level. I believe that it is definitely time to elevate him to the level at which he has been performing more than satisfactorily for over 5½ years.

  
CHARLES KATEK  
Acting Chief, SR Division

Distribution:  
Orig & 6 Addressee w/att

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

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

PART I—EMPLOYEE'S STATEMENT

PART II—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial)

2. DATE OF BIRTH

[Redacted]

20 January 1924

3. RETENTION GROUP

10. CSC STATUS (For permanent employees only)

YES  NO

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service.)

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
None CIA	1947	11	20				

11. SERVICE

YEAR	MONTH	DAY
5	8	12

4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."

BRANCH	FROM—			TO—			DISCHARGE (Hon. or dishon.?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
United States Army	18	Feb	15	1947	Oct	27	Yes; honorable

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, Mer Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

12. TOTAL SERVICE  
5 8 12

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

17. EXPIRATION DATE OF RETENTION RIGHTS

7. ARE YOU:

- A. THE WIFE OF A DISABLED VETERAN?  YES  NO
- B. THE MOTHER OF A DECEASED OR DISABLED VETERAN?  YES  NO
- C. THE UNREMARKED WIDOW OF A VETERAN?  YES  NO

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS.

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

1 August 57

[Redacted Signature]

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_ 1957 at \_\_\_\_\_ (MONTH) \_\_\_\_\_ (CITY) \_\_\_\_\_ (STATE)

SEAL

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



CONFIDENTIAL  
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT  
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 24 months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

[Redacted Signature]

Office of Personnel

[Redacted Signature]

[Redacted Signature]

(Employee)

[Redacted Signature]

9 August 1957

126 Xerox Hall  
10-1

INSURANCE QUESTIONNAIRE

1. NAME (Last) \_\_\_\_\_ (Middle) \_\_\_\_\_ 2. THIS DATE 28 Dec 54

3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME:  
 WAR AGENCIES EMPLOYEES PROTECTIVE ASSOCIATION (WAEPA)  MUTUAL BENEFIT OF OMAHA  
 GROUP HOSPITALIZATION INCORPORATED  AIR TRIP INSURANCE

4. ITINERARY (To be completed only for individuals making application for Air Trip Insurance):

5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE FOLLOWING INSURANCE PROGRAMS:

TYPE OF POLICY	DESIRED	NOW HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID
GEHA - Health	HT	✓			
Fed. Emp. Ben.		✓			

\_\_\_\_\_  
SIGNATURE

6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS:  
 \_\_\_\_\_  
 SIGNATURE

7. EMPLOYEE INTERVIEWED BY:  
 CPB: \_\_\_\_\_ IACB: \_\_\_\_\_  
 SIGNATURE SIGNATURE

8. REMARKS:  
 These forms were returned to me 17 Feb 55 in envelope. The forms have not been signed by the Insurance office indicating that individual did not report to that office. Please  
 For phone info from insurance office 21 Feb 55 P/R  
 Deductions are to start eff. 26 Feb 55 RWZ

When completed, the original of this form should be forwarded to T&RB for incorporation in the employee's official personnel folder. The copy should be forwarded to CPB for retention in CPB file



DEPARTMENT OF THE ARMY  
OFFICE OF THE ASSISTANT CHIEF OF STAFF, G-2, INTELLIGENCE  
WASHINGTON 25, D. C.

1-3688

G2-AP

3 DEC 1954

SUBJECT: Letter of Appreciation

TO: Director of Central Intelligence  
Washington 25, D. C.  
ATTN: Deputy Director of Plans

1. I have received a letter from Major General Boniface Campbell, Commanding General, Army Intelligence Center, expressing appreciation for a presentation by Mr. ██████████ at Fort Holabird in October 1954. Mr. ██████████ also arranged for presentations by two other speakers at the Army Intelligence Center. A copy of General Campbell's letter is attached.

2. The remarks contained in this letter are a source of real satisfaction to me, and I take this opportunity to add my appreciation to that expressed by General Campbell.

*Arthur G. Trudeau*

ARTHUR G. TRUDEAU  
Major General  
A. C. of S.

1 Incl  
Cy ltr fr Gen  
Campbell dtd  
12 Nov 54

RECEIVED  
DEC 10 1954

### APPOINTMENT AFFIDAVITS

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

----- CIA ----- CPC ----- WASHINGTON, D. C. -----  
(Department or agency) (Bureau or division) (Place of employment)

I, \_\_\_\_\_, do solemnly swear (or affirm) that—

**A. OATH OF OFFICE**

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

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

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

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

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

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

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

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

The answers contained in my Application for Federal Employment, Form No. SF-57\_\_\_\_\_, dated \_\_\_\_\_, 19\_\_\_\_\_, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

\_\_\_\_\_  
(Signature of appointee)

Subscribed and sworn before me this 13th day of July, A. D. 1950.

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

[SEAL]

Frank G. Jarema  
(Signature of officer)

\_\_\_\_\_  
(Title)

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

## DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Question 5 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State) Rd Silver Spring Md.

2. (A) DATE OF BIRTH 20 Jan 1924 (B) PLACE OF BIRTH (city or town and State or country) Baltimore Md.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY \_\_\_\_\_ (B) RELATIONSHIP WIFE (C) STREET AND NUMBER, CITY AND STATE 5601 Old Lee Hwy Md-SS-Md (D) TELEPHONE NO. SL-3783

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS?  YES  NO  
If so, for each such relative fill in the blanks below. If additional space is necessary, continue under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR. REG. (Check one)	SINGLE

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X			
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in Item 10.</i>		X		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.</i>		X		
8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.</i>		X		
9. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED, OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO PLEAD GUILTY OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION, OR ORDINANCE (INCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$5 OR LESS WAS IMPOSED)? <i>If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.</i>		X		

### INSTRUCTIONS TO APPOINTING OFFICERS

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) **Identity of appointee.**—The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

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

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

(4) **Members of Family.**—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members of family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

## ESPIONAGE

1. Unlawfully obtaining or permitting to be obtained information affecting national defense.—That (a) Whoever, for the purpose of obtaining information respecting the national defense with intent or reason to believe that the information to be obtained is to be used to the injury of the United States, or to the advantage of any foreign nation, goes upon, enters, flies over, or otherwise obtains information concerning any vessel, aircraft, work of defence, navy yard, naval station, submarine base, coaling station, fort, battery, torpedo station dockyard, canal, railroad, arsenal, camp, factory, mine, telegraph, telephone, wireless, or signal station, building, office, or other place connected with the national defense, owned or constructed, or in progress of construction by the United States or under the control of the United States, or of any of its officers or agents, or within the exclusive jurisdiction of the United States, or any place in which any vessel, aircraft, arms, munitions, or other materials or instruments for use in time of war are being made, prepared, repaired, or stored, under any contract or agreement with the United States, or with any person on behalf of the United States, or otherwise on behalf of the United States, or any prohibited place within the meaning of section 6 of this title; or (b) whoever for the purpose aforesaid, and with like intent or reason to believe, copies, takes, makes, or obtains, or attempts, or induces or aids another to copy, take, make, or obtain, any sketch, photograph, photographic negative, blueprint, plan, map, model, instrument, appliance, document, writing, or note of anything connected with the national defense; or (c) whoever, for the purpose aforesaid, receives or obtains or agrees or attempts or induces or aids another to receive or obtain from any person, or from any source whatever, any document, writing, code book, signal book, sketch, photograph, photographic negative, blueprint, plan, map, model, instrument, appliance, or note, of anything connected with the national defense, knowing or having reason to believe, at the time he receives or obtains, or agrees or attempts or induces or aids another to receive or obtain it, that it has been or will be obtained, taken, made or disposed of by any person contrary to the provisions of this title; or (d) whoever, lawfully or unlawfully having possession of, access to, control over, or being intrusted with any document, writing, code book, signal, book, sketch, photograph, photographic negative, blueprint, plan, map, model, instrument, appliance, or note relating to the national defense, willfully communicates or transmits or attempts to communicate or transmit the same to any person not entitled to receive it, or willfully retains the same and fails to deliver it on demand to the officer or employee of the United States entitled to receive it; or (e) whoever, being intrusted with or having lawful possession or control of any document, writing, code book, signal book, sketch, photograph, photographic negative, blueprint, plan, map, model, note, or information, relating to the national defense, through gross negligence permits the same to be removed from its proper place of custody or delivered to anyone in violation of his trust, or to be lost, stolen, abstracted, or destroyed, shall be punished by imprisonment for not more than ten years and may,

(2145)

in the discretion of the court, be fined not more than \$10,000. (Sec. 1, Title I, act 15 June 1917 (40 Stat. 217), as amended by sec. 1, act 23 March 1940 ( 54 Stat. 79; 50 U.S.C. 31)).

2. Unlawfully disclosing information affecting national defense.—

(a) Whoever, with intent or reason to believe that it is to be used to the injury of the United States or to the advantage of a foreign nation, communicates, delivers, or transmits, or attempts to, or aids or induces another to, communicate, deliver, or transmit, to any foreign government, or to any faction or party or military or naval force within a foreign country, whether recognized or unrecognized by the United States, or to any representative, officer, agent, employee, subject, or citizen thereof, either directly or indirectly, any document, writing, code book, signal book, sketch, photograph, photographic negative, blueprint, plan, map, model, note, instrument, appliance, or information relating to the national defense, shall be punished by imprisonment for not more than twenty years: Provided, That whoever shall violate the provisions of subsection (a) of this section in time of war shall be punished by death or by imprisonment for not more than thirty years; and (b) whoever, in time of war, with intent that the same shall be communicated to the enemy, shall collect, record, publish, or communicate, or attempt to elicit any information with respect to the movement, numbers, description, condition, or disposition of any of the armed forces, ships, aircraft, or war materials of the United States, or with respect to the plans or conduct, or supposed plans or conduct of any naval or military operations, or with respect to any works or measures undertaken for or connected with, or intended for the fortification or defense of any place, or any other information relating to the public defense, which might be useful to the enemy, shall be punished by death or by imprisonment for not more than thirty years. (Sec. 2, act 15 June 1917 (40 Stat. 218; 50 U.S.C. 32)).

*I have read and understand the provisions of the above:*

*[Redacted signature]*

*Witness:*

*[Redacted witness name]*

*21 November 1949*

## APPOINTMENT AFFIDAVITS

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

CIA

OPC

WASHINGTON, D. C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, [REDACTED], do solemnly swear (or affirm) that—

### A. OATH OF OFFICE

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

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

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

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

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

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

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

### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. SP-57, dated 1 October, 1948, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

Subscribed and sworn before me this 21st day of November, A. D. 1949,

at Washington, D. C.  
(City)

[SEAL]

[REDACTED]  
(Signature of officer)

Chief Clerk  
(Title)

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



## DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

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

2. (A) DATE OF BIRTH

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

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY

(B) RELATIONSHIP

(C) STREET AND NUMBER CITY AND STATE

(D) TELEPHONE NO.

HARRIENE D.

WIFE

722 S. LOYAL ST.

TE 8506

ALLANOKIA, VA.

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS?  YES  NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	POSITION		RELATIONSHIP	MARRIED (Check one)	SINGLE
		(1) PERMANENT OR (2) TEMPORARY	(3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED			
		1				
		2				
		3				
		1				
		2				
		3				
		1				
		2				
		3				

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

YES NO

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

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

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

YES NO

NONE

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

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

7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY REGION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?

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

8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?

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

9. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION, OR HAVE YOU EVEN BEEN ORDERED TO POST BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION, OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FINE/FURE OF \$25 OR LESS WAS IMPOSED)?

If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.

### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) **Identity of appointee.**—The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

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

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

(4) **Members of Family.**—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members-of-family provisions do not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

SECRET

(When Filled In)

1604 Curie

526102

PERIODIC SUPPLEMENT  
PERSONAL HISTORY STATEMENT

QAB

THIS DATE

7 August 1957

NOV

INSTRUCTIONS

This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.

SECTION I GENERAL

1. FULL NAME (Last-First-Middle)

2. CURRENT ADDRESS (No., Street, City, Zone, State)  
Box 888 APO 500  
San Francisco, California

3. PERMANENT ADDRESS (No., Street, City, Zone, State)  
Street  
Alexandria, Virginia

4. HOME TELEPHONE NUMBER  
2636-3928

5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE  
Virginia

SECTION II PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S.

2. RELATIONSHIP  
Father-in-law

3. HOME ADDRESS (No., Street, City, Zone, State, Country)  
Street, Alexandria, Virginia

4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE  
Council of State Governments, 1025 Connecticut Avenue, Washington, D.C.

5. HOME TELEPHONE NUMBER  
Temple 6-8506

6. BUSINESS TELEPHONE NUMBER  
Executive 3-6715

7. BUSINESS TELEPHONE EXTENSION

8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.  
(Brother), Street NW, Washington, D.C. (WH-3-6093)

SECTION III MARITAL STATUS

1. CHECK (X) ONE:  SINGLE  MARRIED  WIDOWED  SEPARATED  DIVORCED  ANNULLED

2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiance.

3. NAME (First) (Middle) (Maiden) (Last)

4. DATE OF MARRIAGE

5. PLACE OF MARRIAGE (City, State, Country)

6. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country)

7. LIVING  YES  NO

8. DATE OF DEATH

9. CAUSE OF DEATH

10. CURRENT ADDRESS (Give last address, if deceased)

11. DATE OF BIRTH

12. PLACE OF BIRTH (City, State, Country)

13. IF BORN OUTSIDE U.S.-DATE OF ENTRY

14. PLACE OF ENTRY

15. CITIZENSHIP (Country)

16. DATE ACQUIRED

17. WHERE ACQUIRED (City, State, Country)

18. OCCUPATION

19. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers)

20. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)

COPIED  
18 DEC 1957

SECTION III CONTINUED TO PAGE 2

SECRET

FORM 104 (Rev. 1-1-51)

SECTION III CONTINUED FROM PAGE 1		
21. DATES OF MILITARY SERVICE OF SPOUSE (From and To) MONTH AND YEAR		
22. BRANCH OF SERVICE	23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED	
24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN		
SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS		
1. FULL NAME (Last-First-Middle) Mr Henry	2. RELATIONSHIP Mother's aunt	3. AGE 65?
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES Edith Cavell, Nice, Alpes Maritimes, France		
5. CITIZENSHIP (Country) France	6. FREQUENCY OF CONTACT About 3 times a year, by mail	7. DATE OF LAST CONTACT May 1957
1. FULL NAME (Last-First-Middle) M.	2. RELATIONSHIP Mother's 2d cousin	3. AGE 70?
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES Greneta, Paris XII <sup>e</sup> , France		
5. CITIZENSHIP (Country) France	6. FREQUENCY OF CONTACT Once a year, by mail	7. DATE OF LAST CONTACT Christmas, 1956
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES I have met each of the above relatives only once in my life.		
SECTION V FINANCIAL STATUS		
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.		
3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.		
5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS. Annual dividends on modest investments in stocks, credit union, and cooperative.		
SECTION V CONTINUED TO PAGE 3		

SECRET

2

SECTION V CONTINUED FROM PAGE 2

6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
Clarendon Trust Company,	Arlington 10, Virginia

7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY?      YES       NO

8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)

**SECTION VI      CITIZENSHIP**

1. COUNTRY OF CURRENT CITIZENSHIP <p style="text-align: center;">USA</p>	2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE <input checked="" type="checkbox"/> BIRTH <input type="checkbox"/> MARRIAGE <input type="checkbox"/> OTHER (Specify):
3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	4. GIVE PARTICULARS
5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (File Papers, etc.)	

**SECTION VII      EDUCATION**

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED

LESS THAN HIGH SCHOOL GRADUATE	OVER TEN YEARS OF COLLEGE - NO DEGREE
HIGH SCHOOL GRADUATE	BACHELOR'S DEGREE
TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE	<input checked="" type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE
TWO YEAR COLLEGE OR LESS	MASTER'S DEGREE      DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/ QTR HRS. COMPLETED (Specify)
	MAJOR	MINOR	FROM	TO			
Graduate School, Georgetown University	Int'l Rel's		Jun 51	May 52	None		24 hours

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS
		FROM	TO	

4. MILITARY TRAINING (Full time duty in specialized schools, such as Ordnance, Intelligence, Communications, etc.)

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS
		FROM	TO	

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET

(When Filled In)

SECTION X CONTINUED FROM PAGE 4

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

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

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

As an experienced intelligence briefer.

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

Member, British Interplanetary Society, London.  
Associate member, American Astronautical Association, New York.

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

1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Nov 1949 - Oct 1951	7 - 11	OSC/FE/3 - Desk intelligence officer
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
	Soviet desk officer	
6. DESCRIPTION OF DUTIES		
Prepared, conjointly with OSC/FE/FE, operational plans against Soviet Far Eastern targets.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Oct 1951 - Dec 1953	12- 13	DDF/SR/5; deputy chief, then chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
	Branch deputy chief, then Branch chief	
6. DESCRIPTION OF DUTIES		
Supervised and directed SR plans and projects targeted against Soviet Far East.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Jan 1954 - Dec 1954	13	DDF/SR/COFS/DR - Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
	Chief of special defector [ ] project	
6. DESCRIPTION OF DUTIES		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Feb 1955 - Mar 1956	14	DDF/SR - MA/SR [ ] - Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
	Chief of Base	
6. DESCRIPTION OF DUTIES		
Direct and supervise field plans and projects based in [ ] targeted against Soviet Far Eastern targets.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Mar 1956 - Jun 1957	14	DDF/SR - [ ] Soviet Branch Deputy Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
	Deputy chief of branch	
6. DESCRIPTION OF DUTIES		
Assist Branch Chief in development and management of all [ ]-based operations against USSR and Soviet Embassy, [ ]		

(Use additional pages if required)

SECRET



PERSONAL HISTORY STATEMENT

37833

- Instructions:
1. Answer all questions completely. If question does not apply write "not applicable." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.
  2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? YES

SEC. 1. PERSONAL BACKGROUND

Telephone: \_\_\_\_\_

A. FULL NAME Mr. \_\_\_\_\_ Office: NOT  
(Use No Initials) First Middle Last Ext. APPLICABLE  
 Home: NO-7983

PRESENT ADDRESS \_\_\_\_\_ ST- BALTIMORE, MD, USA  
St. & No. City State Country

PERMANENT ADDRESS \_\_\_\_\_ ST- BALTIMORE, MD, USA  
St. & No. City State Country

B. NICKNAME \_\_\_\_\_ WHAT OTHER NAMES HAVE YOU USED? NONE

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? NOT APPLICABLE

HOW LONG? \_\_\_\_\_ IF A LEGAL CHANGE, GIVE PARTICULARS \_\_\_\_\_

C. DATE OF BIRTH 20 JAN 1914 WHERE? \_\_\_\_\_ BY WHOM AUTHORITY \_\_\_\_\_  
Where? City State Country PLACE OF BIRTH BALTIMORE, MD, USA  
City State Country

D. PRESENT CITIZENSHIP USA BY BIRTH? YES BY MARRIAGE? \_\_\_\_\_  
Country

BY NATURALIZATION CERTIFICATE? NOT APPLICABLE ISSUED \_\_\_\_\_ BY \_\_\_\_\_  
Date Country

AT \_\_\_\_\_  
City State Country

HAVE YOU HAD A PREVIOUS NATIONALITY? NO  
Yes or No Country

HELD BETWEEN WHAT DATES? \_\_\_\_\_ TO \_\_\_\_\_ ANY OTHER NATIONALITY? \_\_\_\_\_  
Country

GIVE PARTICULARS NOT APPLICABLE

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? NO GIVE PARTICULARS \_\_\_\_\_

2  
E. IF BORN OUTSIDE U.S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? NIA

PORT OF ENTRY? \_\_\_\_\_ ON PASSPORT OF WHAT COUNTRY? \_\_\_\_\_

LAST U.S. VISA \_\_\_\_\_  
Number Type Place of Issue Date of Issue

SEC. 2. PHYSICAL DESCRIPTION

AGE 24 SEX MALE HEIGHT 5'9 1/2" WEIGHT 140  
EYES BROWN HAIR BROWN COMPLEXION DARK SCARS FOREHEAD  
BUILD SLENDER OTHER DISTINGUISHING FEATURES NONE

SEC. 3. MARITAL STATUS

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

STATE DATE, PLACE, AND REASON FOR SEPARATION, DIVORCE OR ANNULMENT? \_\_\_\_\_

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

NAME OF SPOUSE NOT APPLICABLE  
First Middle Maiden Last

PLACE AND DATE OF MARRIAGE \_\_\_\_\_

HIS (OR HER) ADDRESS BEFORE MARRIAGE \_\_\_\_\_  
St. & No. City State Country

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

PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
City State Country

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

CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHEREB? \_\_\_\_\_  
City State Country

OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

EMPLOYER'S OR BUSINESS ADDRESS \_\_\_\_\_  
St. & No. City State Country

MILITARY SERVICE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_  
Date Day

COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T. SERVICE, U.S. OR FOREIGN \_\_\_\_\_



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

1. NAME NOT APPLICABLE RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

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

FULL NAME \_\_\_\_\_  
First Middle Last

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

PRESENT, OR, LAST, ADDRESS \_\_\_\_\_ ST. BALTIMORE-18-MD-USA  
St. & No. City State Country

DATE OF BIRTH 21 NOV 1893 PLACE OF BIRTH CENTREVILLE, MARYLAND, USA  
City State Country

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

CITIZENSHIP USA WHEN ACQUIRED? BIRTH WHERE? \_\_\_\_\_  
City State Country

OCCUPATION AUTO DEALER LAST EMPLOYER EAST END AUTO CO-BALTIMORE

EMPLOYER'S OR OWN BUSINESS ADDRESS 6505 PULASKI HWY, BALTIMORE, MD, USA  
St. & No. City State Country

MILITARY SERVICE FROM 1915 TO 1919 BRANCH OF SERVICE ARMY AVIATION  
Date Date

COUNTRY USA, GT. BRITAIN DETAILS OF OTHER GOVT SERVICE, U.S. OR FOREIGN.  
NONE

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

FULL NAME \_\_\_\_\_  
First Middle Last

LIVING OR DECEASED DECEASED DATE OF DECEASE 5 DEC 1947 CAUSE CANCER

PRESENT, OR, LAST, ADDRESS \_\_\_\_\_ AV, BALTIMORE, MD, USA  
St. & No. City State Country

DATE OF BIRTH 14 AUG 1900 PLACE OF BIRTH ROMANS, DROME, FRANCE

CITIZENSHIP USA WHEN ACQUIRED? 1921 (?) WHERE? BALTO, MD, USA  
City State Country

IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY NOV. 1919 - NEW YORK

OCCUPATION MILLINERY LAST EMPLOYER EMPORIUM WORLD HILLY CO.  
BUYER

EMPLOYER'S OR OWN BUSINESS ADDRESS UNKNOWN, CHICAGO, ILL, USA  
St. & No. City State Country

MILITARY SERVICE FROM NONE TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_

COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T SERVICE, U.S. OR FOREIGN.  
NONE

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

DL  
73452

1. FULL NAME [Redacted] AGE 23  
First Middle Last

PRESENT ADDRESS [Redacted] AV, BALTIMORE, MD, USA-USA  
St. & No. City State Country Citizenship

2. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last

PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

3. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last

PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

4. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last

PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

5. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last

PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

SEC. 8. FATHER-IN-LAW

FULL NAME NOT APPLICABLE  
First Middle Last

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

PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

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

CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country

OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_



SEC. 9. MOTHER-IN-LAW

FULL NAME NOT APPLICABLE  
First Middle Last

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

PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

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

CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country

OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

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

1. NAME HENRY RELATIONSHIP GREAT-UNCLE AGE 65(?)  
CITIZENSHIP FRENCH ADDRESS CAVELL, NICE, FRANCE  
St. & No. City State Country

2. NAME CHARLES RELATIONSHIP \_\_\_\_\_ AGE 55(?)  
CITIZENSHIP USA ADDRESS 70 OTIS ELEVATORS, BUENOS AIRES ARGENTINA  
St. & No. City State Country

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

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

1. NAME CMR RELATIONSHIP COUSIN AGE 30  
CITIZENSHIP USA ADDRESS N.O.B. NORFOLK, VIRGINIA  
St. & No. City State

TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State

TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State

TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

SEC. 12. EDUCATION

DS #63 BALTIMORE, MD, USA  
 ELEMENTARY SCHOOL Mc DONOUGH SCH. ADDRESS PIKESVILLE, MD, USA  
City State Country

DATES ATTENDED 1930-34-37 GRADUATE? YES

HIGH SCHOOL LYONS HIGH MONTREAL, ADDRESS MONTREAL QUE, CANADA  
City State Country

DATES ATTENDED 1937-1940 GRADUATE? YES

COLLEGE SIR GEORGE WILLIAMS COLL. ADDRESS MONTREAL, QUE, CANADA  
City State Country

DATES ATTENDED 1940-1942 DEGREE NONE

COLLEGE U OF MICHIGAN ADDRESS ANN ARBOR, MICH, USA  
City State Country

DATES ATTENDED 1945 (see P 13) DEGREE B.A.

SEC. 13. MILITARY, NAVAL OR OTHER GOV'T SERVICE — U.S. OR FOREIGN

USA ARMY 1/LT FEB 1943-OCT 1945  
Country Service Rank Date of Service

GHC FEC- [ ] 0-937200 HONORABLE  
Last Station Serial No. Type of Discharge

REMARKS: WHILE ENLISTED, SERIAL WAS [ ]

SELECTIVE SERVICE BOARD NUMBER 5-A ADDRESS HARTFORD, CONN.

IF REFERRED GIVE REASON

SEC. 14. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST.

FROM 15 AUG 48 TO 30 SEP 48

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS CCD-GHC-FEC APO 500 POSTMASTER SAN FRANCISCO, USA  
St. & No. City Base Country

KIND OF BUSINESS CIVIL CENSORSHIP NAME OF SUPERVISOR KUBT SPAULDING

TITLE OF JOB LIAISON OFFICER SALARY \$ 257 PER MONTH

YOUR DUTIES INTELLIGENCE ANALYST; REPORTS COORDINATOR & WRITER

REASONS FOR LEAVING RETURN TO USA FOR SEPARATION FROM ARMY

(MILITARY)

FROM 1 APR 48 TO 15 AUG 48

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS CCD-GRQ-FEC APO 500 POSTMASTER, SAN FRANCISCO, USA  
St. & No. City State Country

(MILITARY)

KIND OF BUSINESS CIVIL CENSORSHIP NAME OF SUPERVISOR VINCENT MERCOLA

TITLE OF JOB DEPUTY CHIEF, NEWS AGENCY SALARY \$ 25.1 PER MONTH

YOUR DUTIES Asst chief of principal Allied press censorship bureau

REASONS FOR LEAVING CENSORSHIP SECTION ELIMINATED in Japan.

FROM 1 NOV 46 TO 31 MAR 49

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS CCD-GRQ-FEC APO 309 POSTMASTER SAN FRANCISCO, USA  
St. & No. City State Country

(MILITARY)

KIND OF BUSINESS CIVIL CENSORSHIP NAME OF SUPERVISOR KURT SPALDING

TITLE OF JOB CHIEF CENSORSHIP SUB-STA SALARY \$ 22.1 PER MONTH

YOUR DUTIES Operated field censorship surveillance detachment

REASONS FOR LEAVING TRANSFERRED TO HQ IN TOKYO

FROM 15 MAR 46 TO 15 AUG 46

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS ARMY LANGUAGE SCHOOL PRESIDIO DE MONTE REY, CALIF, USA  
St. & No. City State Country

(MILITARY)

KIND OF BUSINESS CIVIL AFFAIRS TRNG NAME OF SUPERVISOR YUTAKA MUNAKATA

TITLE OF JOB RESEARCH EDITOR SALARY \$ Army PER Sgt.

YOUR DUTIES REVISED ARMY MANUALS, PREPARED CIVIL AFFAIRS COURSES

REASONS FOR LEAVING COMMISSIONED; TRANSFERRED TO JAPAN

FROM NOV 1941 TO JUL 1947

EMPLOYING FIRM OR AGENCY T. EATON CO, LTD.

ADDRESS ST. CATHERINE ST, MONTREAL, QUE, CANADA  
St. & No. City State Country

KIND OF BUSINESS DEPT. STORE NAME OF SUPERVISOR E.T. CLAYDON

TITLE OF JOB PHOTOGRAPHIC SALESMAN SALARY \$ 30. PER WEEK

YOUR DUTIES SOLD CAMERAS AND PHOTO SUPPLIES

REASONS FOR LEAVING WAS PART-TIME JOB ACCEPTED WHILE IN COLLEGE

SEC. 15. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

NOT APPLICABLE

SEC. 16. GIVE FIVE CHARACTER REFERENCES -- IN THE U.S. -- WHO KNOW YOU INTIMATELY -- (GIVE RESIDENCE AND BUSINESS ADDRESSES WHERE POSSIBLE.)

		Street and Number	City	State
✓ 1.	<u>CAPT. GORDON WALLACE</u>	BUS. ADD. A15-PRESIDIO	MUNTEREY	CAL.
		RES. ADD. 2160 COOLEY	PALO ALTO	CAL.
✓ 2.	<u>MR. GEORGE MOORE</u>	BUS. ADD. 1/CALIFORNIA	BERKELEY	CAL.
		RES. ADD. 571 NORTH	OAKLAND	CAL.
✓ 3.	<u>MRS. JOHN CHEATHAM</u>	BUS. ADD. 111 E. PATRICK	FREDERICK	MD.
		RES. ADD. 191 E. CHURCH	FREDERICK	MD.
✓ 4.	<u>MR. T. G. DRISCOLL</u>	BUS. ADD. 1131 K ST. N.W.	WASH.	DC.
		RES. ADD. 705 S. ROYAL	ALEXANDRIA	VA.
✓ 5.	<u>MR. R. H. KUNZMAN</u>	BUS. ADD. UP BUREAU	DES MOINES	IOWA
		RES. ADD.	UNK	

SEC. 17. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES -- NOT REFERENCES, SUPERVISORS OR EMPLOYERS -- (Give residence and business addresses where possible.)

		Street and Number	City	State
✓ 1.	<u>MR. GEORGE FINNEY</u>	BUS. ADD. DEPT IAF	WASHINGTON	DC.
		RES. ADD. 2310 VALLEY DR.	ALEXANDRIA	VA.
✓ 2.	<u>DR. MORRIS CRANE</u>	BUS. ADD. BALTIMORE AV	PHILADELPHIA	PA.
		RES. ADD.		
✓ 3.	<u>MS. BRADFORD COOLIDGE</u>	BUS. ADD. DEPT/STATE	WASHINGTON	DC.
		RES. ADD.		
✓ 4.	<u>MRS. FLORENCE MIDWINTER</u>	BUS. ADD.	NONE	
		RES. ADD. 71 MARSDALE	WHAVERESS	CONN.
✓ 5.	<u>MR. ANTHONY SAZ</u>	BUS. ADD.	UNK	
		RES. ADD. 323 E. 211A	BALTIMORE	MD.

SEC. 18. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U.S. — (Give residence and business addresses where possible.)

	Street and Number	City	State
1. MR. FRANK DUCHARME	BUS. ADD. TRAVELERS' INN	HARTFORD	CONN.
	RES. ADD. 76 LILLEY	W. HARTFORD	CONN.
2. MR. JAMES KNOX	BUS. ADD. G. FOX CO.	HARTFORD	CONN.
	RES. ADD.	UNK	
3. MRS. LOUIS FRANKLIN	BUS. ADD. ALBERT SIEGEL	HARTFORD	CONN.
	RES. ADD.	UNK	

SEC. 19. FINANCIAL BACKGROUND

A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES IF NOT, STATE SOURCES OF OTHER INCOME \_\_\_\_\_

B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS BALTIMORE NATIONAL BANK, HIGHLANDTOWN BRANCH, BALTIMORE, MD.

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

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

1. NAME	ADDRESS	City	State
LEE'S INC	3421 EASTERN AV.	BALTIMORE	MD.
2. NAME MONTGOMERY WARD	ADDRESS 2417 N. OAKLAND	CITY 16	STATE CAL.
3. NAME _____	ADDRESS _____	City _____	State _____

SEC. 20. RESIDENCES FOR THE PAST 15 YEARS

FROM	TO	St. No.	City	State	Country
1933	1937	3110	PRESSTMAN SE	BALTIMORE-MD	USA
1937	1939	4561	HARVARD AV.	MONTREAL-QUE	CANADA
1939	1942	1461	MOUNTAIN ST.	MONTREAL-QUE	CANADA
1942	1942	26	LILLEY RD.	W. HARTFORD	CONN. USA
1942	1942		MILITARY SERVICE		
1942	PRESENT	2905	ST. PAUL ST.	BALTIMORE, MD.	USA
FROM	TO	St. No.	City	State	Country
FROM	TO	St. No.	City	State	Country

SEC. 21. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM	TO	CITY OR SECTION	COUNTRY	PURPOSE
JUN 1937	SEP 1937	PARIS	FRANCE	VISIT
JUL 1937	JUL 1937	NIGARA PENINSULA	CANADA	VISIT
SEP 1937	JUL 1942	MONTREAL	CANADA	RESIDENCE

FROM OCT 1944 TO JAN 1945 NORTHERN EUROPE WAR SERVICE

FROM SEP 1946 TO OCT 1948 [Redacted]

FROM \_\_\_\_\_ TO \_\_\_\_\_ City or Section Country Purpose

B. LAST U.S. PASSPORT — NUMBER, DATE, AND PLACE OF ISSUE: UNKNOWN

HOW MANY OTHER U.S. PASSPORTS HAVE YOU HAD? NONE GIVE APPROXIMATE

DATES: \_\_\_\_\_

PASSPORTS OF OTHER NATIONS: \_\_\_\_\_

SEC. 22. CLUBS, SOCIETIES AND OTHER ORGANIZATIONS

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

1. AMERICAN VETERANS COMMITTEE (MEMBER AT LARGE)

NAME AND CHAPTER ST. & NO. CITY STATE COUNTRY DATES OF MEMBERSHIP: NOV 1945 - JAN 1948

2. RESERVE OFFICERS ASS'N WASHINGTON DC USA

NAME AND CHAPTER ST. & NO. CITY STATE COUNTRY DATES OF MEMBERSHIP: OCT 1948 - PRESENT

3. Name and Chapter St. & No. City State Country

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

4. Name and Chapter St. & No. City State Country

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

5. Name and Chapter St. & No. City State Country

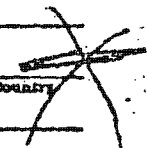
DATES OF MEMBERSHIP: \_\_\_\_\_

6. Name and Chapter St. & No. City State Country

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

7. Name and Chapter St. & No. City State Country

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





SEC. 23. GENERAL QUALIFICATIONS

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

LANGUAGE	<input type="checkbox"/>	SPEAK	<u>FLUENT</u>	READ	<u>FAIR</u>	WRITE	<u>FAIR</u>
LANGUAGE	<input type="checkbox"/>	SPEAK	<u>FLUENT</u>	READ	<u>FLUENT</u>	WRITE	<u>FLUENT</u>
LANGUAGE	<input type="checkbox"/>	SPEAK	_____	READ	_____	WRITE	_____

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

SWIMMING, SKIING, HORSEMANSHIP, FOOTBALL - GOOD.  
BASEBALL, ICE HOCKEY, LACROSSE, VOLLEYBALL, BADMINTON - FAIR.  
PHOTOGRAPHIC PROCESSES - STRONG AMATEUR INTEREST.

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

HAVE AN ABILITY TO WRITE, EITHER REPORTORIAL OR EDITORIAL, WHICH MIGHT BE SUITABLE FOR RESEARCH OR SPECIAL REPORTS WRITING.

D. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1939:

NONE OTHER THAN DEPT OF ARMY FOR COMMISSION AS OFFICER.

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

MILITARY INTELLIGENCE DIV, WAR DEPT, + FBI  
CONDUCTED LOYALTY CHECK SOMETIME BETWEEN  
FEB 1947 AND JUN 1947.

SEC. 24. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OR, OR HAVE YOU SUPPORTED ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES? NO

IF "YES", EXPLAIN: \_\_\_\_\_

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? YES IF SO, TO WHAT EXTENT? OCCASIONAL WINES AND LIQUOR

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE: NO

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

NO

SEC. 25. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME \_\_\_\_\_ RELATIONSHIP FATHER

ADDRESS \_\_\_\_\_ ST. BALTIMORE MD USA  
St. & No. City State Country

SEC. 26. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

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

NO

SEC. 27. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT ALEXANDRIA, VIRGINIA DATE 25 NOV 1948  
*W. C. Dinsell*  
Witness Signature of Applicant

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

14. - I HAVE NEVER HELD A FULL-TIME CIVILIAN JOB, SINCE I ENTERED THE ARMY DIRECTLY FROM COLLEGE.

19. - I HAVE NEVER BOUGHT ANYTHING ON CREDIT. THEREFORE, I HAVE LISTED THREE CONCERNS WITH WHICH I HAVE TRANSACTED NORMAL BUSINESS.

12. - I ACQUIRED SUFFICIENT CREDITS FROM THE [REDACTED] SCHOOL AT THE U OF MICHIGAN TO RECEIVE A B.A. DEGREE, IN ABSENTIA, WHILE STILL ON ACTIVE SERVICE.

FROM SEP 1942 TO DEC 1942 I COMPLETED ONE SEMESTER AT TRINITY COLLEGE, HARTFORD, CONN.

[REDACTED]

Note: information contained herein is supplemental.

PERSONAL HISTORY STATEMENT

- Instructions: 1. Answer all questions completely. If question does not apply write "not applicable." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.  
2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.

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

SEC. 1. PERSONAL BACKGROUND

A. FULL NAME Mr. \_\_\_\_\_ Telephone: \_\_\_\_\_  
Office: VE-4810  
Mrs. \_\_\_\_\_ Ext. 13  
Home: \_\_\_\_\_  
First Middle Last

PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country

PERMANENT ADDRESS \_\_\_\_\_  
St. & No. City State Country

B. NICKNAME \_\_\_\_\_ WHAT OTHER NAMES HAVE YOU USED? \_\_\_\_\_

\_\_\_\_\_ UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? \_\_\_\_\_

HOW LONG? \_\_\_\_\_ IF A LEGAL CHANGE, GIVE PARTICULARS \_\_\_\_\_

Where? \_\_\_\_\_ By What Authority \_\_\_\_\_

C. DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
City State Country

D. PRESENT CITIZENSHIP \_\_\_\_\_ BY BIRTH? \_\_\_\_\_ BY MARRIAGE? \_\_\_\_\_  
Country

BY NATURALIZATION CERTIFICATE # \_\_\_\_\_ ISSUED \_\_\_\_\_ BY \_\_\_\_\_  
Date Court

AT \_\_\_\_\_  
City State Country

HAVE YOU HAD A PREVIOUS NATIONALITY? \_\_\_\_\_  
Yes or No Country

HELD BETWEEN WHAT DATES? \_\_\_\_\_ TO \_\_\_\_\_ ANY OTHER NATIONALITY? \_\_\_\_\_  
Country

GIVE PARTICULARS \_\_\_\_\_

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? \_\_\_\_\_ GIVE PARTICULARS: \_\_\_\_\_

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

PORT OF ENTRY? \_\_\_\_\_ ON PASSPORT OF WHAT COUNTRY? \_\_\_\_\_

LAST U.S. VISA \_\_\_\_\_  
Number Type Place of Issue Date of Issue

SEC. 2. PHYSICAL DESCRIPTION

AGE \_\_\_\_\_ SEX \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

EYES \_\_\_\_\_ HAIR \_\_\_\_\_ COMPLEXION \_\_\_\_\_ SCARS \_\_\_\_\_

BUILD \_\_\_\_\_ OTHER DISTINGUISHING FEATURES \_\_\_\_\_

XSEC. 3. MARITAL STATUS

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

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

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

NAME OF SPOUSE \_\_\_\_\_  
First Middle Maiden Last

PLACE AND DATE OF MARRIAGE ALEXANDRIA, VA; 25 JUN 1949

HIS (OR HER) ADDRESS BEFORE MARRIAGE 705 S. ROYAL ST., ALEXANDRIA, VA.  
St. & No. City State Country

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

PRESENT, OR LAST, ADDRESS 1619 DOOLITTLE RD., ESSEX, MD.  
St. & No. City State Country

DATE OF BIRTH 19 JUN 28 PLACE OF BIRTH MINNEAPOLIS, MINN.  
City State Country

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

CITIZENSHIP U.S. WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country

OCCUPATION HOUSEWIFE LAST EMPLOYER \_\_\_\_\_

EMPLOYER'S OR BUSINESS ADDRESS \_\_\_\_\_  
St. & No. City State Country

MILITARY SERVICE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_  
Date Date

COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T. SERVICE, U.S. OR FOREIGN \_\_\_\_\_

OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_  
EMPLOYER'S OR OWN BUSINESS ADDRESS \_\_\_\_\_  
St. & No. City State Country  
MILITARY SERVICE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_  
COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T SERVICE, U.S. OR FOREIGN. \_\_\_\_\_

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

1. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

2. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

3. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

4. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

5. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

X SEC. 8. FATHER-IN-LAW

FULL NAME \_\_\_\_\_  
First Middle Last  
LIVING OR DECEASED LIVING DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_  
PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country ST. ALEXANDRIA, VA.  
DATE OF BIRTH 14 OCT 92 PLACE OF BIRTH ST. PAUL, MINN.  
IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY \_\_\_\_\_  
CITIZENSHIP US WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country  
OCCUPATION PUBLIC ADMINISTRATOR LAST EMPLOYER COUNCIL OF STATE GOVTS,  
1737 "K" ST, NW,  
WASH DC.



12

SEC. 24. MISCELLANEOUS

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

IF "YES", EXPLAIN: \_\_\_\_\_  
\_\_\_\_\_

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? \_\_\_\_\_ IF SO, TO WHAT EXTENT? \_\_\_\_\_

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

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

X SEC. 25. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME  RELATIONSHIP WIFE  
ADDRESS 1619  ROAD, ESSEX, MD.  
St. & No. City State Country

SEC. 26. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



X SEC. 27. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Baltimore, Maryland DATE Oct 18 49  
City and State

James F. Chaitow  
Witness

[Signature]  
Signature of Applicant

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

14. Since August 29, 1949, I have been employed as Administrative Assistant to the Director of Planning, Housing Authority, of Baltimore City, at the salary range of \$3,100 - \$3,900.

MILITARY RECORD AND REPORT OF SEPARATION  
CERTIFICATE OF SERVICE

0 937 000 1ST LT INF ORC	
GENERAL HEADQUARTERS, FAR EAST COMMAND, MILITARY INTELLIGENCE	27 OCT 48 SEPARATION CENTER, FORT LAYTON, WASHINGTON
7008 NORTH ST., PAUL STREET, BALTIMORE 18, MARYLAND	20 JAN 26 BALTIMORE, MARYLAND
SEX M	BROWN BROWN 5'10" 145 0
STUDENT, COLLEGE R-02	

HARTFORD CONNECTICUT 1625 RICKENBACKER ROAD, ESSEX 21, MARYLAND	
27 JAN 46	(PRESS) CENSORSHIP OFFICER 9335
NONE	
NONE	
MILITARY INTELLIGENCE SERVICE LANGUAGE SCHOOL, FT DUELLING, MINN. 12 SEP 46 JAPAN 25 SEP 46	
9 OCT 48 USA 23 OCT 48	

31 OCT 48	30 NOV 48	6.50	X
-----------	-----------	------	---

SECTION, GENERAL STAFF  
LAPEL BUTTON ISSUED

ALVIN R BARNETT  
CAPT USAF

*Alvin R Barnett*



*Army of the United States*  
CERTIFICATE OF SERVICE

*This is to certify that*  
0 937 000 1ST LT  
GENERAL HEADQUARTERS, FAR EAST COMMAND,  
MILITARY INTELLIGENCE SECTION, GENERAL STAFF  
*honorably served in active Federal Service*  
*in the Army of the United States from*  
27 JAN 46 to 27 OCT 48

*Given at* SEPARATION CENTER, FORT LAYTON, WASHINGTON  
*on the* 27 *day of* OCTOBER 1948

*Thomas B Hammond*  
THOMAS B HAMMOND  
MAJOR ACD

ENLISTED RECORD AND REPORT OF DEPARTION  
 HONORABLE DISCHARGE

NAME (Last, First, Middle)		SERIAL NUMBER	
REGIMENT		COMPANY	
GRADE		DATE OF ENLISTMENT	
DATE OF DISCHARGE		PLACE OF DISCHARGE	
REASON FOR DISCHARGE			
REMARKS			
SIGNATURE OF COMMANDING OFFICER			
DATE			
SIGNATURE OF ENLISTED MAN			
DATE			



Honorable Discharge

*This is to certify that*

Army of the United States

*is hereby Honorably Discharged from the military service of the United States of America.*

*This certificate is awarded as a testimonial of Honest and Faithful Service to this country.*

Given at \_\_\_\_\_

Date \_\_\_\_\_

*K. H. Redman*

copy

copy

STANDARD FORM 57-NOV. 1947  
U. S. CIVIL SERVICE COMMISSION

## APPLICATION FOR FEDERAL EMPLOYMENT

**INSTRUCTIONS:** In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. Be sure to mail to the same office and other forms required by the announcement. Notify the office with which you file this application of any change in your address.

**1 NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR**  
CIG

**2 OPTIONS: (if mentioned in examination announcement)**

**3 PLACE OF EMPLOYMENT APPLIED FOR (City and State)**  
As provided

**4 DATE OF THIS APPLICATION**

**5 NAME (First name) (Middle) (Maiden, if any) (Last)**  
[Redacted]

**6 (A) STREET AND NUMBER OR R. D. NUMBER**  
[Redacted]

**(B) CITY OR POST OFFICE (including postal zone) AND STATE**  
Hickenbacker Road, Wars Est.  
[Redacted]

**7 LEGAL OR VOTING RESIDENCE (State)**  
Maryland

**8 (A) OFFICE PHONE (B) HOME PHONE**

**9 DATE OF BIRTH (month, day, year)**  
January 20, 1921

**10  MARRIED  SINGLE**

**11 PLACE OF BIRTH (city and State; if born outside U. S., name city and country)**  
Baltimore, Maryland

**12  MALE  FEMALE**

**13 (A) HEIGHT WITHOUT SHOES: 5 FEET 10 INCHES (B) WEIGHT: 145 POUNDS**

**14 (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT?  YES  NO**  
(B) IF NO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE  
Second Lt., 16 July 1916

**15 (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ 3,750 PER YEAR**  
You will not be considered for any position with a lower entrance salary.

**(B) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR:**  
 1 TO 3 MONTHS  3 TO 6 MONTHS  6 TO 12 MONTHS

**NOTE:** Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.

**(C) IF YOU ARE WILLING TO TRAVEL, SPECIFY:**  
 OCCASIONALLY  FREQUENTLY  CONSTANTLY

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

**(E) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS:**

**16 EXPERIENCE:** It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.

(a) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

**PRESENT POSITION**

DATES OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR PRESENT POSITION	CLASSIFICATION GRADE (if in Federal Service)	SALARY OR EARNINGS: STARTING \$ PER PRESENT \$ PER
FROM TO PRESENT TIME			
PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR		
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)	KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)		
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	REASON FOR DESIRING TO CHANGE EMPLOYMENT		
DESCRIPTION OF YOUR WORK			
WAR DEPARTMENT			



(5) FROM	DATE OF EMPLOYMENT (month, year)	TO	LAST TITLE OR POSITION	CLASSIFICATION GRADE (if Federal service)	SALARY OR EARNINGS: STARTING \$ PER FINAL \$ PER
PLACE OF EMPLOYMENT (city and State)			NAME AND TITLE OF IMMEDIATE SUPERVISOR		
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)			KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)		
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU			REASON FOR LEAVING		
DESCRIPTION OF YOUR WORK					
<p>If more space is required, use a continuation sheet (Standard Form No. 54) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.</p>					
<p>17. MILITARY TRAINING: In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service schools you attended is especially important. (Extra pages may be used to give full descriptions.)</p>					
DATES		LOCATION		DESCRIPTION OF TRAINING	
FROM	TO				
Jan. 45	Dec. 45	Ann Arbor, Michigan AIJEC, U. of Michigan		language, customs, sociology, how and why of history and economic aggression. Written: _____ (Continued)	
18. EDUCATION. (Circle highest grade completed):				(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED	
1 2 3 4 5 6 7 8 9 10 11 (12)				High School of Montreal	
<input type="checkbox"/> ELEMENTARY SCHOOL <input type="checkbox"/> JUNIOR HIGH SCHOOL <input checked="" type="checkbox"/> SENIOR HIGH SCHOOL				(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED	
(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY				English, French, physics, history.	
		MAJOR AND SPECIALTY		DATES ATTENDED	
Sir Geo. Williams College		Fren		FROM TO DAY NIGHT	
Trinity College, Conn.		Fren		Sep 42 May 42 2	
U. Michigan, Ann Arbor		Jap		Sep 42 Dec 42 1	
				Jan 45 Dec 45 2	
				Feb 47 15	
(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS				LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS	
		15			
English		12			
		24			
(E) OTHER TRAINING, SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED FORCES INSTITUTE (show name and location of school) OR "IN-SERVICE TRAINING" IN PUBLIC OR PRIVATE EMPLOYMENT				SUBJECTS STUDIED	
USAPI				Journalism	
				DATES ATTENDED	
				FROM TO DAY NIGHT	
				Apr 47 Pres	
19. INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES				22. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)?	
		READING		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO GIVE KIND OF LICENSE AND STATE:	
		SPEAKING		FIRST LICENSE OR CERTIFICATE (YEAR):	
		UNDERSTANDING		LATEST LICENSE OR CERTIFICATE (YEAR):	
				23. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:	
				(A) YOUR MORE IMPORTANT PUBLICATIONS (do not submit copies unless requested)	
				(B) YOUR PATENTS OR INVENTIONS	
				(C) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE	
				(D) MEMBERSHIP IN PROFESSIONAL OR SCIENTIFIC SOCIETIES, ETC.	
				(E) HONORS AND FELLOWSHIPS RECEIVED	
20. IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRIES, INDICATE (A) NAMES OF COUNTRIES (C) DATES AND LENGTH OF TIME SPENT THERE, AND (B) REASON OR PURPOSE (e. g., military service, business, education, vacation)				Public relations as interpreter in ETO and _____ Censor and review-editor of _____ press, radio and motion-picture fields.	
Canada: 5 yrs, 1927-1932; _____ 1 yr					
21. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTITHUM, COMPUTING, ETHER, KEY-PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES					
All cine equip; teletypes; short-wave-receivers & transmitters.					
APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING _____ SHORTHAND _____					

14. FILL IN NAMES Last three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat a name of a person listed under Item 16 (EXPERIENCE).

1	FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION
1	Col. E. S. Rasmussen	(Washington 25 DC) Diplomatic Sec. Dep. Dept. of State	Mil. Attache
2	Mr. Yutaka Funakata	Academic Sec. U.S.S. Calif.	Instructor
3	Lt. L. B. McNeil	1928 McKinley Ave. Honolulu, T.H.	CIC

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
25. MAY INQUIRY BE MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?	X		35. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes," give details in Item 39.</i>		X
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X		36. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? <i>If your answer is "Yes," show in Item 39 for EACH such relative (1) full name, (2) present address, (3) relationship, (4) Department or Agency by which employed, and (5) kind of appointment.</i>		X
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY U.S.A. OR ANY COMMUNIST ORGANIZATION?		X	<b>SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE</b> A. If you are claiming preference as a PEACETIME VETERAN who has been awarded a campaign badge or service ribbon, or as a DISABLED VETERAN, or as the WIFE OF A DISABLED VETERAN, or as the WIDOW OF A WAR OR CAMPAIGN VETERAN, attach Veteran Preference Claim, CSC Form 14, together with proof specified therein. B. If you are a WAR-TIME VETERAN not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if approved, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in line of war.		
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?		X	37. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR?	X	
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR PERPETRATING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO ANY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS? <i>If your answer to question 27, 28, or 29 above is "yes," state in Item 39 the names of all such organizations, associations, movements, groups, or combinations of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein.</i>		X	(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION?		X
30. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROSECUTION, OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO FURNISH BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (INCLUDING MINOR TRAFFIC VIOLATIONS) FOR WHICH A FINE OR IMPRISONMENT OF 10 DAYS OR LESS WAS IMPOSED? <i>If your answer is "Yes," list all such cases under Item 39 below. Give in each case (1) the date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.</i>		X	(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES?	X	
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case.</i>		X	(D) DATE OF ENTRY ON SERVICE INTO SERVICE	15 Feb 1943	DATE OF SEPARATION OR SEPARATIONS
32. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR RECEIVING CIVIL SERVICE APPOINTMENTS? <i>If your answer is "Yes," give dates of and reasons for such barment in Item 39.</i>		X	BRANCH OF SERVICE (Army, Navy, Marine Corps, Coast Guard, etc.)	Army	SERIAL NO. (if none, give grade or rating at time of separation)
33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? <i>If your answer is "Yes," give complete details in Item 39 so that consideration can be given to your physical fitness for the job.</i>	X		Present		31316266; 0-937200
34. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER CONTINGENT FUND FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes," give complete details in Item 39.</i>		X	38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DID YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON?		X
			(B) ARE YOU A DISABLED VETERAN? <i>If so, and you have not listed your disability in answer to Item 33, explain in Item 39 below.</i>		X
			(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED?		
			(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE-CONNECTED DISABILITY WHICH ENTITLES HIM FOR CIVIL SERVICE APPOINTMENT?		

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

ITEM NO.	ANSWER	ITEM NO.	ANSWER
39	Hernia, inguinal - repairable.		

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

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

False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80). SIGNATURE OF APPLICANT (Sign your name in INK (last name, initial or initials, and surname). If female, use your own given name as "Mrs. Mary L. Doe".)

[REDACTED]

17. MILITARY TRAINING (continued)

Rating received at end of this training: Tec 4

Duty assignment or rating after this training: Assignment to MISIS.

Dates of duty assignment: Jan 1946 to Aug. 1946

Second Special Service School attended: MISIS, Fort Snelling, Minn.

Location: Fort Snelling, 11, Minnesota

Dates Attended: Jan 1946 To: Aug. 1946

Rating received at end of this training: Second Lieutenant

What were you taught in Second Special Service School? Order of battle, military terms of the Japanese armed forces.

Civil affairs, military administration of occupied areas, propaganda writing.

Duty assignment after this training: Student; translator; instructor.

What did you do during this duty assignment? Translated newspaper articles, ordinances, SCAP directives, etc. [REDACTED] Made instructor's guides for civil affairs courses.



SECRET

Date: 13 October 1963

MEMORANDUM FOR: Chief, Personnel Security Division/Office of Security

SUBJECT : [REDACTED] (P): Your Number 37833

1. In compliance with paragraph four (4) of your latest memorandum, subject as above, clearance to cover the following proposed change in Subject's status and/or use is hereby requested:

Ops Officer	Position Title	Ops Officer
GS-15	Grade	GS-15
DDP/SR Foreign Field Western European Area [REDACTED] [REDACTED]	Orgn Designation	DDP/WE [REDACTED] External Ops Station
	Headquarters	[REDACTED]

2. Changes other than specified above:

3. The proposed effective date of this change is: 13 October 1963.

*Joseph B. Ragan*  
JOSEPH B. RAGAN  
Chief, Contract Personnel Division

Date 18 OCT 1963

Security Approval has been granted for  
the use contemplated by this request

*[Signature]*  
Chief, Personnel Security Division

SECRET

*Dick*

SECRET  
(When filled in)

DATE: 31 July 1962

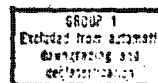
MEMORANDUM FOR: Chief, Contract Personnel Division  
ATTENTION : Staff Agents Branch  
FROM : Chief, Personnel Security Division  
SUBJECT :  #37833

1. Reference is made to your memorandum dated 24 July 1962 in which a covert security clearance was requested to permit Subject's use as a Staff Agent, GS-14, by DDP/SR in the capacity of Operations Officer at .
2. This is to advise that a covert security clearance is granted for the use of the Subject, as described in your request as set forth in paragraph 1, above.
3. If your office should desire at a later date to change the status or use of this individual, a request to cover any proposed change should be submitted to this office.
4. This clearance becomes invalid in the event that Subject's services are not utilized within six months of the date of this memorandum.

FOR THE DIRECTOR OF SECURITY:

*W. A. Osborne*  
W. A. Osborne *11-*

SECRET  
(When filled in)



PERSONAL HISTORY STATEMENT - (Appendix I)

Listed below are names of organizations identified by the Attorney General, under his responsibility pursuant to Executive Order 9835, dated 21 March 1947, to list the names of each foreign or domestic organization, association, movement, group or combination of persons which he, after appropriate investigation and determination, designates as Totalitarian, Fascist, Communist, or subversive, or as having adopted a policy of advocating or approving the commission of acts of force or violence to deny others their rights under the Constitution of the United States, or as seeking to alter the form of government of the United States by unconstitutional means.

Each applicant must review the following list of organizations for certification purposes, and signature on the last page.

Abraham Lincoln School, Chicago, Illinois  
American Association for Reconstruction in Yugoslavia, Inc.  
American Committee for Protection of Foreign Born  
American Committee for Yugoslav Relief, Inc.  
The American Council for a Democratic Greece, formerly  
known as the Greek American Council; Greek American  
Committee for National Unity  
American Croatian Congress  
American League Against War and Fascism  
American League for Peace and Democracy, successor to  
American League Against War and Fascism and predecessor  
of American Peace Mobilization  
American Patriots, Inc.  
American Peace Mobilization  
American Polish Labor Council  
American Russian Institute of San Francisco  
American Slav Congress  
American Youth Congress  
American Youth for Democracy  
Armenian Progressive League of America  
Association of German Nationals (Reichsdeutsche Vereinigung)  
Ausland-Organization der NSDAP, Overseas Branch of Nazi Party  
Black Dragon Society  
California Labor School, Inc., 215 Market Street,  
San Francisco, California  
Central Council of American Women of Croatian Descent,  
also known as Central Council of American Croatian Women,  
National Council of Croatian Women  
Central Japanese Association (Beikoku Chuo Nipponjin Kai)  
Central Japanese Association of Southern California  
The Central Organization of the German-American National  
Alliance (Deutsche-Amerikanische Einheitsfront)  
The Citizens Protective League  
Civil Rights Congress and its affiliated organizations  
and branches.

The Columbians  
Communist Party, U.S.A., formerly Communist Political  
Association, and its affiliates and committees,  
including:

Citizens Committee of the Upper West Side  
(New York City)  
Committee to Aid the Fighting South  
Dennis Defense Committee  
Labor Research Association, Inc.  
Southern Negro Youth Congress  
United May Day Committee  
United Negro and Allied Veterans of America  
Congress of American Revolutionary Writers  
Congress of American Women  
Connecticut State Youth Conference  
Council on African Affairs  
Council for Pan-American Democracy  
Dai Nippon Butoku Kai (Military Art Society of  
Japan or Military Art Society of Japan)  
Dante Alighieri Society  
Federation of Italian War Veterans in the U.S.A., Inc.  
(Associazione Nazionale Combattenti Italiani,  
Federazione degli Stati Uniti d' America)  
Friends of the New Germany (Freunde des Neuen Deutschlands)  
Friends of the Soviet Union and its successor  
American Council on Soviet Relations, both predecessors  
of the National Council of American Soviet Friendship  
George Washington Carver School, New York City  
German-American Bund (Amerikadeutscher Volksbund)  
The German-American Republican League  
German-American Vocational League (Deutsche-Amerikanische  
Berufsgemeinschaft)  
Heimata Kai, also known as Hokubei Heiki Gijusha Kai,  
Zaibei Nihonjin, Heiyaku Gijusha Kai, and Zaibei  
Heimata Kai (Japanese Residing in America Military  
Conscripts Association)  
Hinode Kai (Imperial Japanese Reservists)  
Hinomaru Kai (Rising Sun Flag Society - a group of  
Japanese War Veterans)  
Hokubei Zaigo Shoko Dan (North American Reserve Officers  
Association)  
Hollywood Writers Mobilization for Defense  
Hungarian-American Council for Democracy  
International Labor Defense  
International Workers Order, including People's Radio  
Foundation, Inc.  
Japanese Association of America  
Japanese Overseas Central Society (Kaigai Dobo Chuo Kai)

Japanese Overseas Convention, Tokyo, Japan, 1940  
 Japanese Protective Association (Recruiting Organization)  
 Jefferson School of Social Science, New York City  
 Jewish Peoples Committee  
 Jikyoku Iin Kai (Current Affairs Association)  
 Joint Anti-Fascist Refugee Committee  
 Kibei Seinen Kai (Association of U. S. Citizens of  
 Japanese Ancestry who have returned to America after  
 studying in Japan)  
 Ku Klux Klan  
 Kyffhauser, also known as Kyffhauser League  
 (Kyffhauser Bund), Kyffhauser Fellowship  
 (Kyffhauser Kameradschaft)  
 Kyffhauser War Relief (Kyffhauser Kriegshilfswerk)  
 League of American Writers  
 Lictor Society (Italian Black Shirts)  
 Macedonian-American People's League  
 Mario Morgantini Circle  
 Michigan Civil Rights Federation  
 Nanka Toikoku Ganyudan (Imperial Military Friends  
 Group or Southern California War Veterans)  
 National Committee for the Defense of Political Prisoners  
 National Committee to Win the Peace  
 National Council of American-Soviet Friendship  
 National Council of Americans of Croatian Descent  
 National Federation for Constitutional Liberties  
 National Negro Congress  
 Nature Friends of America (since 1935)  
 Negro Labor Victory Committee  
 New Committee for Publications  
 Nichibei Kogyo Kaisha (The Great Fujii Theatre)  
 Northwest Japanese Association  
 Ohio School of Social Sciences  
 The Peace Movement of Ethiopia  
 Peoples Educational Association (Incorporated under  
 name Los Angeles Educational Association, Inc.), also  
 known as Peoples Educational Center, Peoples University,  
 People's School  
 People's Institute of Applied Religion  
 Philadelphia School of Social Science and Art  
 Photo League (New York City)  
 Proletarian Party of America  
 Protestant War Veterans of the U.S., Inc.  
 Revolutionary Workers League  
 Sakura Kai (Patriotic Society, or Cherry Association -  
 composed of veterans of Russo-Japanese War)  
 Samuel Adams School, Boston, Massachusetts  
 School of Jewish Studies, New York City  
 Seattle Labor School, Seattle, Washington  
 Serbian Vidovdan Council  
 Shinto Temples



**SECRET**

SECURITY APPROVAL

~~CONFIDENTIAL~~

To : ~~CONFIDENTIAL~~ Deputy Personnel Officer Date: 10 June 1949  
 From : Chief of Inspection and Security Number: 37833  
 Subject:

1. Note "X" below:

Security approval is granted subject for access to classified information contingent upon the receipt of derogatory information at some future date.

Provisional clearance for full duty with CIA is granted under the provisions of paragraph 4, Administrative Instruction 10-2, which provides for a temporary appointment pending the completion of full security investigation.

Unless the applicant enters upon duty within 60 days from above date this approval becomes invalid.

2. Your memorandum dated 14 March 1949 stated Subject is an applicant for OPC.

*AK 17 July 50*

*[Signature]*  
 SERIAL P. CEISS

Chief, Personnel Security Division

*Branch notified  
14 June  
CD*

~~CONFIDENTIAL~~

**SECRET**