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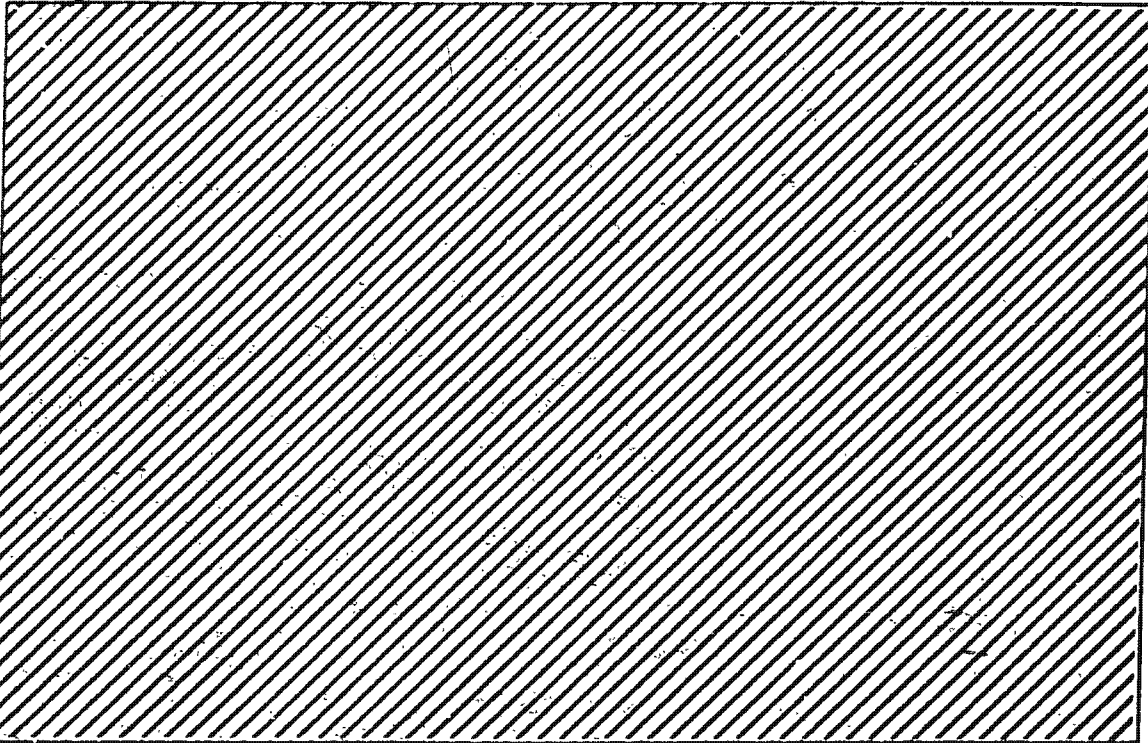
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ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)

FLORES, Daniel

NAME AND RELATIONSHIP OF DEPENDENT\*

self

CLAIM NUMBER

79 0606

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

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

DATE OF NOTICE

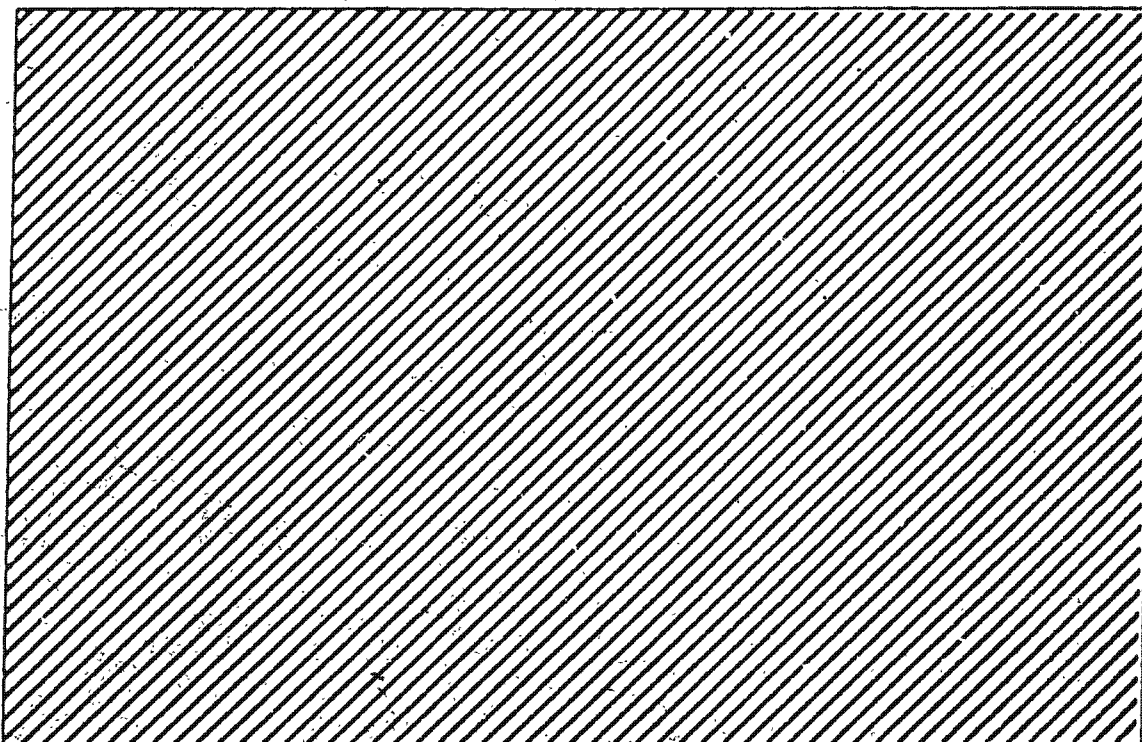
7 Jun 1979

SIGNATURE OF BIC REPRESENTATIVE



NOTICE OF OFFICIAL DISABILITY CLAIM FILE

ADMINISTRATIVE - INTERNAL USE ONLY



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

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

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

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

**NOTICE OF OFFICIAL DISABILITY CLAIM FILE**

SECRET  
(When Filled In)

81 JAN 1978

C REQUEST FOR PERSONNEL ACTION					DATE PREPARED 27 January 1978					
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) Flores, Daniel								
3 NATURE OF PERSONNEL ACTION Reassignment				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 11 78			5 CATEGORY OF EMPLOYMENT Regular			
6 FUNDS V TO V CF TO V		V TO CF CF TO CF		7. PAN AND NSCA 8035 0990 0000			8 LEGAL AUTHORITY (Completed by Office of Personnel)			
9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Foreign Field Station				10 LOCATION OF OFFICIAL STATION						
11. POSITION TITLE Operations Officer (14)				12 POSITION NUMBER GK76		13 CAREER SERVICE DESIGNATION DOG				
14 CLASSIFICATION SCHEDULE (GS, LB, IN.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 13 2		17. SALARY OR RATE 26887			
18 REMARKS Reassigned from position FS35 CMS/MSB <i>This action reflects WGT- 1/29/78</i>										
18A SIGNATURE OF REQUESTING OFFICIAL J. Halpin CLA/PERS				DATE SIGNED 1/27/78		18B SIGNATURE OF OFFICIAL CMS 13			DATE SIGNED 1/29/78	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE 37		20 EMPLOY CODE 10		21 OFFICE CODING 51620 LA		22 STATION CODE 45075		23 INTEGRITY CODE 3		
24 MONTHS CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI		28 SECURITY REG. NO		
29 SITE EMPLOY		30 SPECIAL REFERENCE		31 RETIREMENT DATA		32 SEPARATION DATA CODE		33 CORRECTION / LABELLATION DATA EOD DATA		
34 VET PREFERENCE		35 SERV COMP DATE		36 LONG COMP DATE		37 CAREER CATEGORY		38 FEDERAL HEALTH INSURANCE		
39 SOCIAL SECURITY NO		40 LEAVE CAT		41 FEDERAL TAX DATA		42 STATE TAX DATA		43 SOCIAL SECURITY NO		
44 POSITION CONTROL CERTIFICATION 1-27-78 A28		45 LEAVE CAT		46 O P APPROVAL		47 STATE TAX DATA		48 DATE APPROVED 1-31-78		

FORM 1152 USE PREVIOUS EDITION

SECRET

82. IMPDET CL. BY. 007622

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### REQUEST FOR PCS OVERSEAS EVALUATION

1 NAME (Last, First, Middle) <b>Flores, Laniel</b>	2 REQUEST DATE (DD-MON-YY) <b>12 Sept 77</b>	3 APPLICANT HAS APPLICANT SEEN BY OMS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	4 DEPENDENT(S) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	5 EMPLOYEE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
---	---	--	---	---

6 GRADE <b>13</b>	7 APPLICATION CD <b>All</b>	8 DIRECTORATE/OFFICE DIVISION <b>DDO/LA</b>	9 EMPLOYEE NO. <b>5270</b>	10 POSITION/TITLE <b>Ops Officer</b>
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19 DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)						
13 DEPENDENT NAME (L, F, MI)	14 SOCSEC NO	15 DOB (MM/YY)	16 SEX	17 RELATIONSHIP	19 DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)	

20 REQUESTED ACTION (more than one action is acceptable)

APPLICANT:	PRE EMPLOYMENT...	EOD		
ASSIGNMENTS:	<input checked="" type="checkbox"/> O/S PCS	STATION	ETO/ETA (DD-MON-YY)	NO. OF DEPENDENTS TO ACCOMPANY ON RETURN
	<input type="checkbox"/> O/S TDY		<b>14 Oct 77</b>	<b>2</b>
	<input type="checkbox"/> O/S RETURNEE	FITNESS FOR DUTY	POSITION	
	<input type="checkbox"/> O/S TDY STANDBY	RETURN TO DUTY	<b>Ops Officer</b>	OTHER (specify):
	<input type="checkbox"/> O/S PLANNING	SPECIAL TRAINING		
SEPARATION	RETIREMENT	MDR/CIARDS	MDR/CSC	
ROUTINE	REGULAR ANNUAL	EXECUTIVE ANNUAL	MPT/PHE	

21 COMMENTS

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

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

27 OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION

QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS  
 JAMES WILKS [redacted] 7 OCT 1977  
 Chairman, Overseas Candidate Review Panel

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28 IMPROVED BY

SECRET  
(When Filled In)

28 1977

REQUEST FOR PERSONNEL ACTION					DATE PREPARED							
1 SERIAL NUMBER 036130					2 NAME (Last-First-Middle) FLORES, DANIEL							
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT SYSTEM			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 10 77		5 CATEGORY OF EMPLOYMENT REGULAR							
6 FUNDS V TO V CP TO V		V TO CP X CP TO CP		7 PAY AND HQCA 7135-4534-0000		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643, Sect. 203						
9 ORGANIZATIONAL DESIGNATIONS DDO/LA				10 LOCATION OF OFFICIAL STATION WASH., D.C.								
11 POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION DQG							
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) 45		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 13		17 SALARY OR RATE 5						
18 REMARKS SUBJECT REMOVED FROM SYSTEM IN ACCORDANCE WITH HN 20-763.												
18A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTEREG CODE	24 MOBILE CODE	25 DATE OF BIRTH MO DA YR		26 DATE OF GRADE MO DA YR		27 DATE OF LSI MO DA YR	
28 NTE EXPIRES MO DA YR		29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 - CIV 2 - OPM 3 - FERS 4 - NONE		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO DA YR		33 SECURITY REQ NO		34 SEX		
35 VET PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY CAR BSL PROV TEMP		39 FEGLI HEALTH INSURANCE CODE CODE A - WAIVED 1 - DIS 2 - DIS/OPT 3 - UNAVAILABLE		40 SOCIAL SECURITY NO		
41 PERIODS 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 MO TAX EXEMPTIONS 1 - YES 2 - NO		44 STATE TAX DATA FORM EXECUTED CODE MO TAX EXEMPTIONS 1 - YES 2 - NO		45 POSITION CONTROL CERTIFICATION 3-24 77		46 O.P. APPROVAL DATE APPROVED 2 Apr 77		

FORM 1152 USE PREVIOUS EDITION

SECRET

FORM 1152 USE PREVIOUS EDITION



**SECRET**  
(When Filled In)

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

1152 USE PREVIOUS EDITION

**SECRET**

FORM 12-1 WFOPT CS BY 007A23

**SECRET**  
(When Filled In)

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

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

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODE	22 STATION CODE	23 ATTENDANCE CODE	24 REASON CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
22	10	51500	LA	75013			11-30-77	11-30-77
28 DATE EFFECTIVE	29 DATE RECEIVED	30 DATE OF REPORT DATE	31 SEPARATION DATE	32 RESIGNATION DATE	33	34	35	36
37	38	39	40	41	42	43	44	45
46	47	48	49	50	51	52	53	54
55	56	57	58	59	60	61	62	63

100 DATA →

*Handwritten initials*

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(When Filled In)

19 NOV 1976

REQUEST FOR PERSONNEL ACTION

DATE PREPARED  
10 November 1976

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

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

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

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

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

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

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

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

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES	22 STATION CODE	23 UTILITY CODE	24 ROOMS CODE	25 DATE OF BIRTH	26 DATE OF ENTRY	27 DATE OF LEAVE
37	10	51500 LA	75013					
28 SET REPORT	29 SPECIAL REFERENCE	30 DETAILMENT DATA	31 SEPARATION DATA CODE	32 LOBBY/REGISTRATION DATA	33 SECURITY	34 SEX	EOD DATA	
35 NET PREFERENCE	36 NEW COMP DATA	37 LEAVE COMP DATA	38 CAREER LABOUR	39 NEW RELATE OFFICER	40 SOCIAL SECURITY NO			
41 NEW FUNDS (FUND AND SUBFUND)	42 LEAVE LAB CODE	43 FEDERAL TAG DATA	44 STATE TAG DATA	45	46			

19C SIGNATURE OF REQUESTING OFFICER  
19D SIGNATURE OF CAREER SERVICE APPROVING OFFICER  
19E DATE APPROVED

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EYES ONLY

20 OCT 1976

MEMORANDUM FOR: Chairman, GS-12 Evaluation Board

FROM : Raymond A. Warren  
Chief, Latin America Division

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

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

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

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

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CL BY 025231

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

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

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

  
Raymond A. Warren

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EYES ONLY

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21 September 1976

MEMORANDUM FOR: Chief, OTR/LTD

FROM : Walter R. Cox  
Chief, ALT Unit

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

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

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

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

  
Walter R. Cox

Originated by:

F-2 Impdet.  
Classified by 024097.

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CTR/ALT  
Staff

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

August 1976 -

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

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

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

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

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

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

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

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

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

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

7. Any other comments you may wish to make:

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

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

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



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(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED 25 June 1976	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, Daniel			
3. NATURE OF PERSONNEL ACTION Reassignment <i>Change of Function?</i>			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 21 76		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS V TO V CF TO V		7. FAN AND NTCA 0175-3010 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDA/OTR Functional Training Division Operations Training Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Instructor-Ops			12. POSITION NUMBER BD33		13. CAREER SERVICE DESIGNATION DQB
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 1712.32		16. GRADE AND STEP 12 3	
17. SALARY OR RATE 20678		18. REMARKS CONCUR: <i>[Signature]</i> LA/PERS 20678200 Acknowledge of category <i>[illegible]</i> payroll security Concur: <i>[Signature]</i> DDO/MSB/MPC			
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> Harry E. Fitzwater, DTR		DATE SIGNED 25 June 76		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i> DDO/CMG/12	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC ALPHABETIC 17500 OTR		22. STATION CODE 75013	23. EMPLOYEE CODE
24. HIRING DATE	25. SPECIAL ASSIGNMENT	26. RETIREMENT DATA	27. SEPARATION DATA	28. POSITION CANCELLATION DATA	29. SECURITY RISK
30. NET PREFERENCE	31. DATE COMP DATE	32. LONG COMP DATE	33. MERIT CATEGORY	34. HEALTH INSURANCE	35. SOCIAL SECURITY NO.
36. PERSONNEL OFFICER'S SUPERVISORY SERVICE	37. LEAVE CAT	38. PERSONAL DATA	39. PERSONAL DATA	40. PERSONAL DATA	41. PERSONAL DATA
42. COMMENTS (Previous Comments) <i>[Handwritten notes]</i>					

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FORM 100-100-100-100



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(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED <b>10 SEPTEMBER 1974</b>	
1 SERIAL NUMBER <b>036130</b>		2 NAME (Last-First-Middle) <b>FLORES, DANIEL</b>			
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>09 15 74</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6 FUNDS V TO V CF TO V		V TO CF <b>XX</b> CF TO CF		7 PAN AND NSCA <b>5135 4534 0000</b>	
8 LEGAL AUTHORITY (Completed by Office of Personnel)			9 ORGANIZATIONAL DESIGNATIONS <b>DDO/WH DIVISION WH/COG OPS BRANCH</b>		
10 LOCATION OF OFFICIAL STATION <b>WASH D.C.</b>			11 POSITION NUMBER <b>1159</b>		12 CAREER SERVICE DESIGNATION <b>DQB</b>
13 PLANNING SCHEDULE (G, L, R, W...) <b>GS</b>		14 OCCUPATIONAL SERIES <b>0136.01</b>		15 GRADE AND STEP <b>12 1</b>	
16 SALARY OR RATE <b>17,497</b>		17 REMARKS <b>From position 1134</b>  <del>Wash, D.C.</del> <b>Wash, D.C.</b>			
18 SIGNATURE OF REQUESTING OFFICIAL <b>H.L. BEUTHOLD D/WH/PERS</b>		DATE SIGNED <b>12 SEP 74</b>		19 APPROVING OFFICER <b>Rubenstein</b>	
DATE SIGNED <b>16 Sept 74</b>		20 APPROVING OFFICER			
SPACES BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
21 OFFICE SYMBOL <b>37 10</b>	22 EMPLOY CODE <b>513500</b>	23 OFFICE CODES <b>WH</b>	24 STATION CODE <b>0136</b>	25 ATTACHED CODE <b>1</b>	26 NUMBER OF POS. <b>1</b>
27 DATE OF REF. 1	28 DATE OF REF. 2	29 DATE OF REF. 3	30 DATE OF REF. 4	31 DATE OF REF. 5	32 DATE OF REF. 6
33 MONTH	34 DAY	35 YEAR	36 MONTH	37 DAY	38 YEAR
39 MONTH			40 DAY		
41 YEAR			42 MONTH		
43 DAY			44 YEAR		
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99 MONTH					
100 DAY					
101 YEAR					

40

42

**SECRET**  
(If Not Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>11 July 74</b>						
1 SERIAL NUMBER <b>036130</b>		2 NAME (Last-First-Initial) <b>Flores, Daniel</b>										
3 NATURE OF PERSONNEL ACTION <b>Reassignment</b>			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>07 22 74</b>		5 CATEGORY OF EMPLOYMENT <b>Regular</b>							
6 FUNDS V TO V CF TO V <input checked="" type="checkbox"/> X		V TO CF CF TO CF		7 PAN AND NSCA <b>5 0135-4534 0000</b>	8 LEGAL AUTHORITY (Completed by Office of Personnel)							
9 ORGANIZATIONAL DESIGNATIONS <b>DDO/WH Division WH/COG Ops Support Branch</b>			10 LOCATION OF OFFICIAL STATION <b>Washington, D.C.</b>									
11 POSITION NUMBER <b>Ops Officer</b>		12 POSITION NUMBER <b>1134</b>	13 CAREER SERVICE DESIGNATION <b>DQB</b>									
14 CLASSIFICATION SCHEDULE (G.S., F.R., etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0136.01</b>	16 GRADE AND STEP <b>12 1</b>	17 SALARY OR RATE <b>\$ 17,497</b>								
18 REMARKS <b>From [redacted] 57085</b> <b>* [redacted]</b>												
19A SIGNATURE OF REQUESTING OFFICIAL <b>H. L. Berthold, C/WH/PERS</b>			DATE SIGNED <b>11 July 74</b>		DATE SIGNED <b>7/18/74</b>							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE <b>37 10</b>	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC <b>51500 004 75012</b>		22 STATION CODE <b>75012</b>	23 INTEGRAL CODE	24 MOBILE CODE <b>1</b>	25 DATE OF BIRTH MO DA YR		26 DATE OF GRADE MO DA YR		27 DATE OF LST MO DA YR	
28 DTI EXPRES MO DA YR		29 SPECIAL BEARINGS	30 OTHER DATA	31 SEPARATION DATA CODE	32 CONNECTION/ASSIGNATION DATA TYPE MO DA YR		<b>EOD DATA</b> →		33 SECURITY REG NO	34 SSN		
35 NET PERFORMANCE CODE		36 NET COMP DATA MO DA YR		37 LOAN COMP DATA MO DA YR		38 LABOR CATEGORY CODE	39 HEALTH INSURANCE CODE	40 SOCIAL SECURITY NO				
41 PERIODS LEAVE/COMPENSATION SERVICE CODE		42 LEAVE CAT	43 PLANS FOR LEAVE CODE	44 RESUME FOR DATA CODE	45 HEALTH INSURANCE CODE	46 SOCIAL SECURITY CODE	47 STATE FOR DATA CODE					
48 SIGNATURE OF APPROVING OFFICIAL <b>[Signature]</b>						DATE APPROVED <b>11/3/74</b>						

FORM 100

**SECRET**

FORM 100

SECRET

(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED 18 June 1974	
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES DANIEL			
3 NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 23 74		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CP TO V X CP TO CP		7 PAY AND GRADE 413570XY		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 SECT. 203	
9 ORGANIZATIONAL DESIGNATIONS DDO/WH Division			10 LOCATION OF OFFICIAL STATION		
11 POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LS, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 12	
17 SALARY OR RATE		18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
19A SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC		22 STATION CODE	23 OFFICER CODE
					24 HONORARY CODE
					25 DATE OF BIRTH MO DA YR
					26 DATE OF GRADE MO DA YR
					27 DATE OF LTI MO DA YR
28 RET. EXP. DATE MO DA YR	29 SPECIAL DEFERRANCE	30 RETIREMENT DATA - FV - OROB - FIA - POB		31 SEPARATION DATA (CODE)	32 SEPARATION CANCELLATION DATA MO DA YR
					33 SECURITY REG NO
34 RET. PREFERENCE CODE	35 SERV. COMP. DATE MO DA YR	36 LONG. COMP. DATE MO DA YR	37 LEAVE CATEG. CODE	38 LEAVE BALANCE MO DA YR	39 HEALTH INS. STATUS E-0175 E-015 E-010 E-005 E-000
					40 SOCIAL SECURITY NO
41 PERIODS (EXPIRING SOONER BY MONTH)		42 LEAVE CAT.		43 WORKER TAG DATA	
CODE		CODE		CODE	
1-00 2-00 3-00 4-00		1-00 2-00		1-00 2-00	
44 REASON FOR SEPARATION CANCELLATION		45 DATE OF SEPARATION		46 DATE APPROVED	
See memo dated 6/18/74					

453

JK out

SECRET

FORM 1152 USE PREVIOUS EDITIONS (1-71)

SECRET  
(When Filled In)

# REQUEST FOR PERSONNEL ACTION

DATE PREPARED

19 NOVEMBER 1973

1 SERIAL NUMBER 2 NAME (Last-First-Middle)

036130

FLORES DANIEL

3. NATURE OF PERSONNEL ACTION

PROMOTION

4. EFFECTIVE DATE REQUESTED

MONTH DAY YEAR  
11 25 73

5. CATEGORY OF EMPLOYMENT

REGULAR

6. FUNDS

V TO V

V TO CF

CF TO V

X CF TO CF

7. FAN AND NSCA

4135 1084 0000

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS

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

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

OPS OFFICER

(12)

12. POSITION NUMBER

0136

13. CAREER SERVICE DESIGNATION

D

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

GS

15. OCCUPATIONAL SERIES

0136.01

16. GRADE AND STEP

12 1

17. SALARY OR RATE

\$ 17497

18. REMARKS

From: GS-11.4  
HOME BASE: WII

19a

AC/WII/Pers

DATE SIGNED

19 Nov 73

19b SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE SIGNED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING	22 STATION CODE	23 INTEGREE CODE	24 MONTHS CODE	25. DATE OF BEGIN	26 DATE OF GRAD	27 DATE OF LEI
22	10	NUMERIC ALPHABETIC 51160 WII 52085			3	MO DA YR 11 25 73	MO DA YR 11 25 73	MO DA YR
28 WTS EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA	33 SECURITY REG NO.	34 SEX	EOD DATA	
MO. DA YR.								
35 WET 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				
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE	42 LEAVE CAT.	43 FEDERAL TAX DATA	44 STATE TAX DATA					
CODE	CODE	FORM EXECUTED CODE	NO. TAX EXEMPTIONS	FORM EXECUTED	CODE	NO. TAX STATE	LEAVE CODE	
0-80 PREVIOUS SERVICE 1-90 BRIG IN SERVICE 2-8000 IN SERVICE (LESS THAN 3 YEARS) 3-8000 IN SERVICE (MORE THAN 3 YEARS)		1-TTS 2-80		1-TTS 2-80				
45 POSITION CONTROL CERTIFICATION	46 O.P. APPROVAL	DATE APPROVED						
1-23-73	29 NOV 1973	2360073						

FORM 1152

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-0311

11 2

AFOS

(8)

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED 23 Nov 71	
1. SERIAL NUMBER 036130 ✓		2. NAME (Last-First-Middle) FLORES, DANIEL ✓					
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH: 11   DAY: 28   YEAR: 71		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS ▶		V TO V CP TO V		V TO CP CP TO CP		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH <i>Division</i> FOREIGN FIELD BRANCH 3 - [ ] STATION				10. LOCATION OF OFFICIAL STATION [ ]			
11. POSITION TITLE OPS OFFICER (12)				12. POSITION NUMBER 0136		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 3		17. SALARY OR RATE \$ 13,457 ✓	
18. REMARKS From GS 10. 3 * [ ]							
18A. SIGNATURE OF REQUESTING OFFICIAL [ ]			DATE SIGNED 23 Nov 71		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [ ]		DATE SIGNED 11/23/71
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 51760   ALPHABETIC: WH		22. STATION CODE 57035	23. INTEGRAL CODE [ ]	24. BOOTIES CODE 3	25. DATE OF BIRTH MO. DA. YR.: 11/25/41
26. DATE OF GRADE MO. DA. YR.: 11/25/71	27. DATE OF LEI MO. DA. YR.: 11/25/71	28. SITE EXPIRES MO. DA. YR.: [ ]	29. SPECIAL RESERVE 1-ESC 2-ORGR 3-FICA 4-None	30. RETIREMENT DATA CODE: [ ]	31. SEPARATION DATA CODE [ ]	32. CORRECTION/CANCELLATION DATA TYPE: [ ]	33. SECURITY REG. NO EOD DATA →
34. SEX [ ]	35. VET PREFERENCE CODE: [ ]	36. SERV COMP DATE MO. DA. YR.: [ ]	37. LOBS COMP DATE MO. DA. YR.: [ ]	38. CAREER CATEGORY CODE: [ ]	39. FEGLI/HEALTH INSURANCE CODE: [ ]		40. SOCIAL SECURITY NO [ ]
41. PERIODS (FEDERAL GOVERNMENT SERVICE) CODE: [ ]	42. LEAVE CAT CODE: [ ]	43. FEDERAL TAX DATA FORM EXECUTED: [ ]	44. STATE TAX DATA FORM EXECUTED: [ ]	45. POSITION CONTROL CERTIFICATION [ ]	46. O P APPROVAL [ ]		DATE APPROVED 11/23/71

FORM 1152 USE PREVIOUS EDITION

**SECRET**

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

**SECRET**  
(When Filled In)

**FILE  
PUNCHED  
BY**

**REPORT OF SERVICE ABROAD**

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

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

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 98, REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

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

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

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

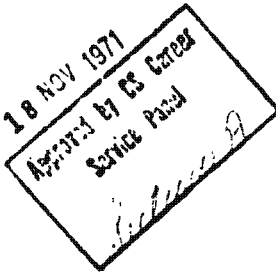
REMARKS

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

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



SECRET  
EYES ONLY



17 AUG 1971

MEMORANDUM FOR: Secretary, CSCS Panel A

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

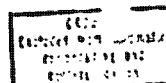
1. It is recommended that Mr. Daniel Flores be promoted from GS-10 to GS-11.

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

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

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

SECRET  
EYES ONLY



SECRET  
EYES ONLY

-2-

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

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

SECRET  
EYES ONLY

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>7 September 1971</b>					
1. SERIAL NUMBER <b>036130</b>		2. NAME (Last-First-Middle) <b>FLORES DANIEL</b>									
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>09 / 14 / 71</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>					
6. FUNDS		7. FINANCIAL ANALYSIS NO CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">V TO V</td> <td style="width:50%; text-align: center;">V TO O</td> </tr> <tr> <td style="text-align: center;">O TO V</td> <td style="text-align: center;"><b>X</b> O TO O</td> </tr> </table>		V TO V	V TO O	O TO V	<b>X</b> O TO O	<b>2135 1084</b>					
V TO V	V TO O										
O TO V	<b>X</b> O TO O										
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/WH FOREIGN FIELD BRANCH 3 [ ] STATION</b>				10. LOCATION OF OFFICIAL STATION  [ ]							
11. POSITION TITLE <b>OPS OFFICER</b>		12. POSITION NUMBER <b>0136</b>		13. CAREER SERVICE DESIGNATION <b>D</b>							
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>10 3</b>		17. SALARY OR RATE <b>\$ 12235</b>					
18. REMARKS From DDP/WH #0376 Vice [ ] Approved 259a attached.  From 259a: Mr. Flores' Spanish capabilities are native reading and high speaking which more than meet the language requirements of intermediate reading and speaking for the Station. <div style="text-align: right; border: 1px solid black; border-radius: 50%; padding: 5px; display: inline-block;">HB:WH</div>											
18A. SIGNATURE OF REQUESTING OFFICIAL <b>Henry L. Berthold, C/WH/Pers</b>			DATE SIGNED <b>9/13/71</b>		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED <b>11/2/71</b>				
<b>SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL</b>											
19. ACTION CODE <b>37</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODING NUMERIC ALPHABETIC <b>51700 6.0</b>		22. STATION CODE <b>57035</b>	23. BRIGADE CODE [ ]	24. MOBILE CODE <b>3</b>	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.		
28. BTE EXPRES MO. DA. YR. <b>XX/XX/XX</b>		29. SPECIAL REFERENCE [ ]	30. RETIREMENT DATA [ ]		31. SEPARATION DATA CODE [ ]	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REG. NO <b>EOD DATA</b>	34. SER [ ]		
35. VET PREFERENCE CODE 0-None 1-1 PT 2-10 PT	36. SERV COMP DATE MO. DA. YR.		37. LONG COMP DATE MO. DA. YR.		38. CAREER CATEGORY CODE (AS BNS) PROB TEMP	39. FICA HEALTH INSURANCE CODE CODE 1-None 2-REG/OPT 3-RELIABLE		40. SOCIAL SECURITY NO			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-DEBAR IS SERVICE 2-DEBAR IS SERVICE (LESS THAN 3 YEARS) 3-DEBAR IS SERVICE (MORE THAN 3 YEARS)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM SECURED CODE MO TAX EXEMPTIONS FORM SECURED CODE 1-YES 2-NO		44. STATE TAX DATA CODE MO TAX STATE CODE 1-YES 2-NO					
45. POSITION CONTROL CERTIFICATION <b>9-10-71</b>					46. OF APPROVAL  [ ]		DATE APPROVED <b>9/13/71</b>				

1152 USE PREVIOUS EDITION

**SECRET**

FORM 8-71  
10-1000 (USE PREVIOUS EDITIONS)  
GPO: 1971 O-370-700

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>	DATE PREPARED <b>21 JULY 1970</b>
-------------------------------------	--------------------------------------

1 SERIAL NUMBER <b>036130</b>	2 NAME (Last-First-Middle) <b>FLORES, DANIEL</b>
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3 NATURE OF PERSONNEL ACTION <b>PROMOTION</b>	4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>07 26 70</b>	5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
--	---	--

6 FUNDS V TO V CF TO V X	7 FINANCIAL ANALYSIS NO CHARGEABLE <b>1135 0884</b>	8 LEGAL AUTHORITY (Completed by Office of Personnel)
-----------------------------------	--	--

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

11 POSITION TITLE <b>OPS OFFICER</b> (09)	12 POSITION NUMBER <b>0376</b>	13 CAREER SERVICE DESIGNATION <b>D</b>
--	-----------------------------------	---

14 CLASSIFICATION SCHEDULE (G.S., F.B., IN.) <b>GS</b>	15 OCCUPATIONAL SERIES <b>0136.01</b>	16 GRADE AND STEP <b>10 2</b>	17 SALARY OR RATE <del>\$ 10539</del> // 23/
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18 REMARKS

\* PRA NTE TWO YEARS IN ACCORDANCE WITH HR 20-17d(1)(a).  
FORMERLY A GS-9-3, \$10539

\*

18A SIGNATURE OF REQUESTOR'S OFFICIAL <i>Henry L. Berthold</i> <b>HENRY L. BERTHOLD</b>	DATE SIGNED <b>21 July 70</b>	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICIAL <i>[Signature]</i>	DATE SIGNED <b>[Date]</b>
---	----------------------------------	--	------------------------------

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES FUNCTIONAL ORGANIZATIONAL	22 STATION CODE	23 10114251	24 10114251	25 10114251	26 10114251	27 DATE OF 1ST
<b>22</b>	<b>10</b>	<b>5780 LCH</b>	<b>17551</b>					
28 10114251	29 10114251	30 10114251	31 10114251	32 10114251	33 10114251	34 10114251	35 10114251	36 10114251
<b>10114251</b>	<b>10114251</b>	<b>10114251</b>	<b>10114251</b>	<b>10114251</b>	<b>10114251</b>	<b>10114251</b>	<b>10114251</b>	<b>10114251</b>

FOOD DATA →

S E C R E T  
EYES ONLY

Approved for Career  
Security Panel  
27 JUN 1970

2 JUN 1970

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

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

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

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

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

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

*William V. Broc*  
William V. Broc  
Chief  
Western Hemisphere Division

S E C R E T  
EYES ONLY

DISPATCH

CLASSIFICATION  
SECRET

FIG. 17

TO: Chief, WI Division

Z

INFO: Chief of Station, [redacted]

FROM

Chief of Base, [redacted]

SUBJECT

ADMINISTRATIVE/PERSONNEL - Promotion for [redacted]

ACTION REQUIRED - REFERENCES

ACTION REQUIRED: See Below

Approved by CS Career  
Service Panel  
17 JUL 1970

JWILL Flores

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

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

[redacted signature]  
 15/ [redacted]

DISPATCH TO

DISPATCH SYMBOL AND NUMBER

DATE

HQST-1474

26 May 1970

CLASSIFICATION

POSTAL SYMBOL

SECRET  
SECRET

SECRET  
(U.S. Gov. Property)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER <b>036130</b>				2 NAME (Last-First-Middle) <b>FLORES, DANIEL</b>	
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>04 10 69</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6 FUNDS	V TO V	V TO CP	7 FINANCIAL ANALYSIS NO CHARGEABLE <b>0135 0884</b>		8 LEGAL AUTHORITY (Completed by Office of Personnel)
	CP TO V	X CP TO CP			
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH FOREIGN FIELD BRANCH 3</b>			10 LOCATION OF OFFICIAL STATION <b>Base</b>		
11 POSITION TITLE <b>OPS OFFICER</b>			12 POSITION NUMBER <b>0376</b>		13 CAREER SERVICE DESIGNATION <b>D</b>
14 CLASSIFICATION SCHEDULE (GS, I.R., etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0138.01</b>		16 GRADE AND STEP <b>C9 2</b>	
				17 SALARY OR RATE <b>\$ 8744</b>	
18 REMARKS <b>X ALL SICK AND LEAVE HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE</b> <b>X MARITAL STATUS: MARRIED</b>					
DATE SIGNED			19 SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED
			<b>X5013.</b>		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE <b>55</b>	20 EMPLOY CODE <b>10</b>	21 OFFICE CODING NUMERIC ALPHABETIC <b>51700 10H</b>		22 STATION CODE <b>19559</b>	23 INTEGRIS CODE <b>3</b>
24 MONTHS CODE <b>3</b>	25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR	27 DATE OF LET MO DA YR	28 SECURITY REG NO	
29 RET EXPENSES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-PLC 2-ORGR 3-PLB 4-ROEL	31 SEPARATION DATA CODE	32 CONDITION CANCELLATION DATA <b>EOD DATA</b>	
33 RET PREFERENCE CODE 0-NONE 1-5 YR 2-10 YR	34 SERV COMP DATE MO DA YR	35 LONG COMP DATE MO DA YR	36 CAREER CATEGORY CODE EAM 250 PROV/TAMP	37 FICA HEALTH INSURANCE CODE 0-NONE 1-YES	38 SOCIAL SECURITY NO
39 PERIODS FULFILLED GOVERNMENT SERVICE CODE 0-NONE 1-60 MONTHS OR MORE 2-30 MONTHS OR MORE (LESS THAN 3 YEARS) 3-30 MONTHS OR MORE (MORE THAN 3 YEARS)		40 LEAVE CAT CODE	41 FEDERAL TAX DATA CODE 1-YES 2-NONE		42 STATE TAX DATA CODE 1-YES 2-NONE
43 POSITION CONTROL CERTIFICATION			44 OP APPROVAL		DATE APPROVED
			<b>C424169/11K</b>		<b>C424169</b>

FORM 1152 USE PREVIOUS EDITION

SECRET

CONTAINS PROP. RIGHTS INFORMATION  
NO. 01-1152-10

SECRET  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED <b>3 April 1969</b>	
1 SERIAL NUMBER <b>036130</b>	2 NAME (Last-First-Middle) <b>FLORES, DANIEL</b>				
3 NATURE OF PERSONNEL ACTION <b>PROMOTION, TRANSFER TO <del>NEW</del> FUNDS, AND CHANGE OF SERVICE DESIGNATION</b>			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>04 06 69</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6 FUNDS V TO V CF TO V	X V TO CF	CF TO CF	7 FINANCIAL ANALYSIS NO CHARGEABLE <b>9135 0884</b>		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS <b>DDP7WH FOREIGN FIELD BRANCH #3</b>			10 LOCATION OF OFFICIAL STATION <b>STATION BASE</b>		
11 POSITION TITLE <b>OPS OFFICER</b>		12 POSITION NUMBER <b>(07) 0376</b>	13 CAREER SERVICE DESIGNATION <b>D</b>		
14 CLASSIFICATION SCHEDULE (G.S. LB, etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0136,01</b>	16 GRADE AND STEP <b>09 2</b>	17 SALARY OR RATE <b>\$ 8744</b>	
18 REMARKS <b>APPROVED 259a ATTACHED.</b> <b>FROM: DDP/WH/Branch 4/Pos. 1441. GS-08, step 2, \$7956/annum.</b> <b>I CONCUR IN CHANGE OF SERVICE DESIGNATION FROM SJ TO D:</b> <i>(Signed on original) 3 Apr 69</i> <b>CONCUR:</b> <b>OTR/PERS</b>					
18A SIGNATURE OF REQUESTING OFFICIAL <b>HENRY L. BERTHOLD</b>		DATE SIGNED <b>3 APR 69</b>		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <b>4 APR 1969</b>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE <b>20 10</b>	20 EMPLOY CODE <b>5170</b>	21 OFFICE CODING NUMERIC ALPHABETIC <b>WH 9559</b>	22 STATION CODE <b>1559</b>	23 INTEGER CODE <b>3</b>	24 MONTHS CODE <b>3</b>
25 DATE OF BIRTH MO DA YR <b>04/06/67</b>	26 DATE OF GRADE MO DA YR <b>04/06/67</b>	27 DATE OF LET MO DA YR <b>04/06/67</b>	28 SECURITY REG NO	29 SER	EOD DATA
30 WTE EXPRES MO DA YR	31 SPECIAL REFERENCE	32 RETIREMENT DATA CODE	33 SEPARATION DATA CODE	34 CORRECTION CANCELLATION DATA TYPE MO DA YR	35 SOCIAL SECURITY NO
36 NET PREFERENCE CODE	37 SERV COMP DATE MO DA YR	38 LONG COMP DATE MO DA YR	39 CAREER CATEGORY LAB RELS PROB TEMP CODE	40 FEGLI HEALTH INSURANCE CODE CODE 0-YES/1-YES HEALTH INS. CODE	41 SOCIAL SECURITY NO
42 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE		43 LEAVY CAT CODE	44 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		45 STATE TAX DATA FORM EXECUTED CODE NO TAX STATE CODE
46 POSITION CONTROL CERTIFICATION	47 OF APPROVAL	48 DATE APPROVED			

55

6  
37



SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

23 SEPTEMBER 1968

1 SERIAL NUMBER <b>036130</b>	2 NAME (Last-First-Middle) <b>FLORES, DANIEL</b>
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3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>	4 EFFECTIVE DATE REQUESTED MONTH: <b>10</b> DAY: <b>06</b> YEAR: <b>68</b>	5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
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6 FUNDS XX V TO V CF TO V	7 FINANCIAL ANALYSIS NO CHARGEABLE <b>9235 0620</b>	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH BRANCH 4</b> SECTION	10 LOCATION OF OFFICIAL STATION <b>WASH., D. C.</b>
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11 POSITION TITLE <b>Ops Officer CAREER TRAINING</b>	12 POSITION NUMBER <b>1441</b>	13 CAREER SERVICE DESIGNATION <b>SJ</b>
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14 CLASSIFICATION SCHEDULE (GS, FS, etc.) <b>GS</b>	15 OCCUPATIONAL SERIES <b>0136.01</b>	16 GRADE AND STEP <b>08 2</b>	17 SALARY OR RATE <b>\$7,956</b>
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18. REMARKS

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

*Security [unclear] 9235/0620  
the 10/4/68*

**CONCUR: OTR/CTP**

1 - Finance  
1 - Security

18A SIGNATURE OF REQUESTOR OFFICER <b>HENRY L. BERTHOLD C/WH/PERSONNEL</b>	DATE SIGNED <b>24 Sep 68</b>	18B SIGNATURE OF APPROVING OFFICER <b>[Signature]</b>	DATE SIGNED
---	---------------------------------	--	-------------

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: <b>51450</b> ALPHABETIC: <b>WH</b>	22 STATION CODE <b>9235</b>	23 INTEGRATE CODE	24 HQ/PTS CODE <b>1</b>	25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
28 BTE EXPRES MO DA YR	29 SPECIAL REFERENCE 1-OK 2-OK 3-FILE 4-None	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA MO DA YR	33 SECURITY REG NO.	34 SER	EOD DATA →	
35 VET PREFERENCE CODE 0-None 1-1 YR 2-10 YR	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY LAW RES PROP TRIP	39 FEDERAL HEALTH INSURANCE CODE CODE 0-BAIPI 1-YES	40 SOCIAL SECURITY NO			
41 PERIODS (FEDERAL GOVERNMENT SERVICE) CODE 0-NO PERIODS SERVICE 1-NO PERIODS SERVICE 2-02/26 0 SERVICE (1/5 YEAR 3 YEARS) 3-02/26 0 SERVICE (008 YEAR 3 YEARS)	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO	44 STATE TAX DATA CODE MO TAX EXEMPTIONS FORM EXECUTED 1-YES 2-NO					
45 POSITION CONTROL CERTIFICATION <b>[Signature]</b>	46 O/P APPROVAL <b>[Signature]</b>	DATE A						

SECRET

FORM 1152 USE PREVIOUS EDITION

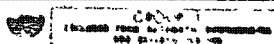
SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED		
1 SERIAL NUMBER 736130										2 NAME (Last-First-Middle) FLORES, Daniel		
3 NATURE OF PERSONNEL ACTION PROMOTION					4 EFFECTIVE DATE REQUESTED MONTH: 05 DAY: 15 YEAR: 67			5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS XX		V TO V		V TO CF		7 FINANCIAL ANALYSIS NO. CHARGEABLE 8275 2100		8 LEGAL AUTHORITY (Completed by Office of Personnel)				
9 ORGANIZATIONAL DESIGNATIONS DCG/OTR CAREER TRAINING PROGRAM					10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.							
11 POSITION TITLE CAREER TRAINEE					12 POSITION NUMBER 0748		13 CAREER SERVICE DESIGNATION SJ					
14 CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS			15 OCCUPATIONAL SERIES 0090.01		16 GRADE AND STEP 08 2		17 SALARY OR RATE \$ 7630					
18 REMARKS												
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER C/CTP				DATE SIGNED 6/13/67		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 28300 ALPHABETIC: CTP		22 STATION CODE 75013	23 INTEGRAL CODE	24 NOTES CODE	25 DATE OF BIRTH MO: DA: YR:		26 DATE OF GRADE MO: DA: YR:		27 DATE OF LEI MO: DA: YR:	
28 HRS EXP-RES MO: DA: YR:		29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE: MO: DA: YR:		EOD DATA →		33 SECURITY CODE	34 LEI	
35 HRS PREFERENCE CODE: 0-0000 1-3 PT 2-10 PT	36 SERV COMP DATE MO: DA: YR:		37 LONG COMP DATE MO: DA: YR:		38 CAREER CATEGORY JOB DES: PRO: TEMP: CODE	39 FEGLI HEALTH INSURANCE CODE: 0-WAIVE (1-W)	40 HEALTH INS CODE		41 SOCIAL SECURITY NO.			
41 PERIODS (FEDERAL GOVERNMENT SERVICE) CODE: 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)			42 LEAVE CAT CODE	43 FEDERAL TAB DATA FORM EXECUTED: CODE: NO TAB EXEMPTIONS		44 STATE TAB DATA FORM EXECUTED: CODE: NO TAB EXEMPTIONS			45 STATE CODE			
45 POSITION CONTROL CERTIFICATION RC 6/13/67					46 O P APPROVAL				DATE APPROVED 6/13/67			

Form 1152 USE PREVIOUS EDITIONS

SECRET





CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

THROUGH : Executive Secretary  
CSCT Selection Board

SUBJECT : Application for Career Training Program

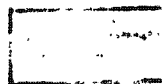
1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.

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

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

ROBERT B. FREEMAN  
Chief, CTP

CONFIDENTIAL



**SECRET**  
(When Filled In)

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

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED			
1 SERIAL NUMBER 036130						2 NAME (Last-First-Initial) FLORES DANIEL			
3 NATURE OF PERSONNEL ACTION PROMOTION + Pay Adjustment to Full Time				4 EFFECTIVE DATE REQUESTED MONTH: 07   DAY: 30   YEAR: 67					
6 FUNDS X V TO V CF TO V				7 FINANCIAL ANALYSIS NO CHARGEABLE 8235 1162					
5 CATEGORY OF EMPLOYMENT REGULAR <del>PART-TIME</del>				8 LEGAL AUTHORITY (Completed by Office of Personnel)					
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION				10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE INTELLIGENCE CLERK ASST (2)				12 POSITION NUMBER 1174	13 CAREER SERVICE DESIGNATION D				
14 CLASSIFICATION SCHEDULE (G.S. I.B. etc.) GS		15 OCCUPATIONAL SERIES 0301.28		16 GRADE AND STEP 06 3	17 SALARY OR RATE \$ 6263.				
18 REMARKS Subject is returning to full-time duty on <sup>30</sup> July 1967. Subject will graduate from Georgetown Univ. this month.									
19 SIGNATURE OF REQUESTER C/WH/Pers			DATE SIGNED 28 June		18a SIGNATURE OF CAREER SERVICE SUPERVISING OFFICER				
					DATE SIGNED 7 Jul 67				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC		22 STATION CODE	23 OFFICIAL CODE	24 MODIFIER CODE	25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
22	10	43800 414		7503		1	07 30 67	07 30 67	07 30 67
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*July 21*

MEMORANDUM FOR: Secretary CSCS Panel, Section D

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

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

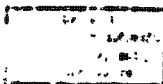
2. Throughout his career Mr. Flores has shown himself to be a strongly motivated employee, willing and capable. The calibre of his performance has been consistently good and he has shown steady improvement as he acquired the skills and knowledge of intelligence business. He is reliable and conscientious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

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

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

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

SECRET



SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION	DATE PREPARED 14 Sep 66
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1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORENZ MANTER
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3 NATURE OF PERSONNEL ACTION CHANGE EMPLOY	4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 15 66	5 CATEGORY OF EMPLOYMENT PART TIME
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6 FUNDS X	V TO V	V TO CF	CF TO V	CF TO CF	7 COST CENTER NO CHARGE 7235 1162	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS TOP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION	10 LOCATION OF OFFICIAL STATION WASH., D.C.
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11 POSITION TITLE INTELLIGENCE CLERK ✓ (S)	12 POSITION NUMBER 1176 ✓	13 CAREER SERVICE DESIGNATION d
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14 CLASSIFICATION SCHEDULE (GS, FB, etc.) GS	15 OCCUPATIONAL SERIES 0301.27 ✓	16 GRADE AND STEP GS 4	17 SALARY OR RATE \$ 5859. ✓
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18 REMARKS  
From: WH/C.Intel Br., R & R Sec.DC # 1181

19 [Redacted]	DATE SIGNED 14 Sept 66	20 SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Redacted]	DATE SIGNED 11/16/66
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGRAL CODE	24. MOBILE CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR	
37	20	51500 WH	2503						
28. HTS EXPRES MO DA YR		29. SPECIAL REFERABLE		30. RETIREMENT DATA 1-CM 2-FICA 3-BOSS		31. SEPARATION DATA CODE		32. CORRECTION CANCELLATION DATA TYPE MO DA YR	
33. VET PREFERENCE CODE 0-10		34. SERV COMP DATE MO DA YR		35. LONG COMP DATE MO DA YR		36. CAREER CATEGORY LAB SERV PROV TEMP		37. FEET HEALTH INSURANCE CODE 0-15 HEALTH INS CODE	
38. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-00 PREVIOUS SERVICE 1-00 BEGAN IN SERVICE 2-00 BEGAN IN SERVICE (LESS THAN 1 YEAR) 3-00 BEGAN IN SERVICE (MORE THAN 1 YEAR)				39. LEAVE EST CODE		40. FEDERAL TAX DATA FORM PREVIOUS CODE MO. TAX EXEMPTIONS		41. STATE TAX DATA FORM PREVIOUS CODE MO. STATE CODE	

EOD DATA →

42 POSITION CONTROL CERTIFICATION 09-19-66 A	43 LSP APPROVAL [Signature]
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SECRET  
(When Filled In)

9 September 1966

MEMORANDUM FOR: **Mr. Daniel Flores**

THROUGH : Head of ~~CS~~ Career Service

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

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

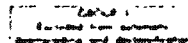
2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. This in no way affects your current status under the Civil Service Retirement System, nor does it preclude reconsideration of your eligibility to participate in the CIA System if you should meet the requirements for designation in the future.

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

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

  
Emmett D. Echols  
Director of Personnel

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**SECRET**

**CENTRAL INTELLIGENCE AGENCY**  
WASHINGTON, D.C. 20505

**17 JAN 1966**

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

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

Dear Mr. Harren:

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

Enclosed is additional information submitted by claimant.

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

Very truly yours,

/s/ B. DeFelice

B. DeFelice  
Office of Personnel

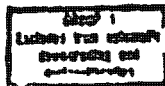
Enclosures:

As stated

Distribution: ✓

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

**SECRET**



**SECRET**  
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) FLORES, Daniel	
3 NATURE OF PERSONNEL ACTION TRANSFERRANT			4 EFFECTIVE DATE REQUESTED MONTH: 08 DAY: 1 YEAR: 1965		5 CATEGORY OF EMPLOYMENT Part Time
6 FUNDS X V TO V CF TO V		V TO CF CF TO CF	7 COST CENTER NO CHARGE ABLE 6235-1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C Intelligence Branch Reports and Requirements Section			10 LOCATION OF OFFICIAL STATION Washington, D.C.		
11 POSITION TITLE TELE. ROOM (1)			12 POSITION NUMBER 1134	13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GV, LH, etc) GS (06)		15 OCCUPATIONAL SERIES 0301.27	16 GRADE AND STEP 05 (3)	17 SALARY OR RATE \$ 5330	
18 REMARKS From: DDP/WH/CI St., #1130, D.C.					
DATE SIGNED 08/11/65		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 8/20/65	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 37	20 EMPLOY CODE 20	21 OFFICE CODING NUMERIC: 51501 ALPHABETIC: UH		22 STATION CODE 75315	23 INTEGREE CODE 1
24 HDQTRS CODE		25 DATE OF BIRTH		26 DATE OF GRADE	
27 DATE OF LEI		28 NTE EXPIRES		29 SPECIAL REFERENCE	
30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION, CANCELLATION DATA	
33 SECURITY REG NO		34 SEX		EOD DATA	
35 NET 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		45 POSITION CONTROL CERTIFICATION		46 OP APPROVAL	
47 DATE APPROVED		8/20/65			

Recorded by  
CSPD  
*CM*

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4

52  
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SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

15 January 1965

1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel	
3 NATURE OF PERSONNEL ACTION PAY ADJUSTMENT (TO PART TIME) FROM FULL TIME			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 05 65
5 CATEGORY OF EMPLOYMENT Regular (PART TIME)			6 FUNDS X V TO V CF TO V
7 COST CENTER NO. CHARGEABLE 5235-1162			8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DPP Special Affairs Staff Counter-Intelligence Staff Operations Section		10. LOCATION OF OFFICIAL STATION Washington, D.C.	
11 POSITION TITLE INTELLIGENCE ASST. (D)		12 POSITION NUMBER 1130	13 CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (G.S. 1 B, etc.) GS (35)	15 OCCUPATIONAL SERIES 0301.23	16 GRADE AND STEP 05 (2)	17 SALARY OR RATE \$ 5165

18 REMARKS  
 \* Subject to work on regularly scheduled tour not to exceed 19 hours per week.  
 \* Subject will be working Monday through Friday, from 1400 to 1700.

Recorded by  
CSPD  
am

Approved by Edm. CSP/D

DATE SIGNED 1/22/65	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED 2/2/65
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C/WH/Pers.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

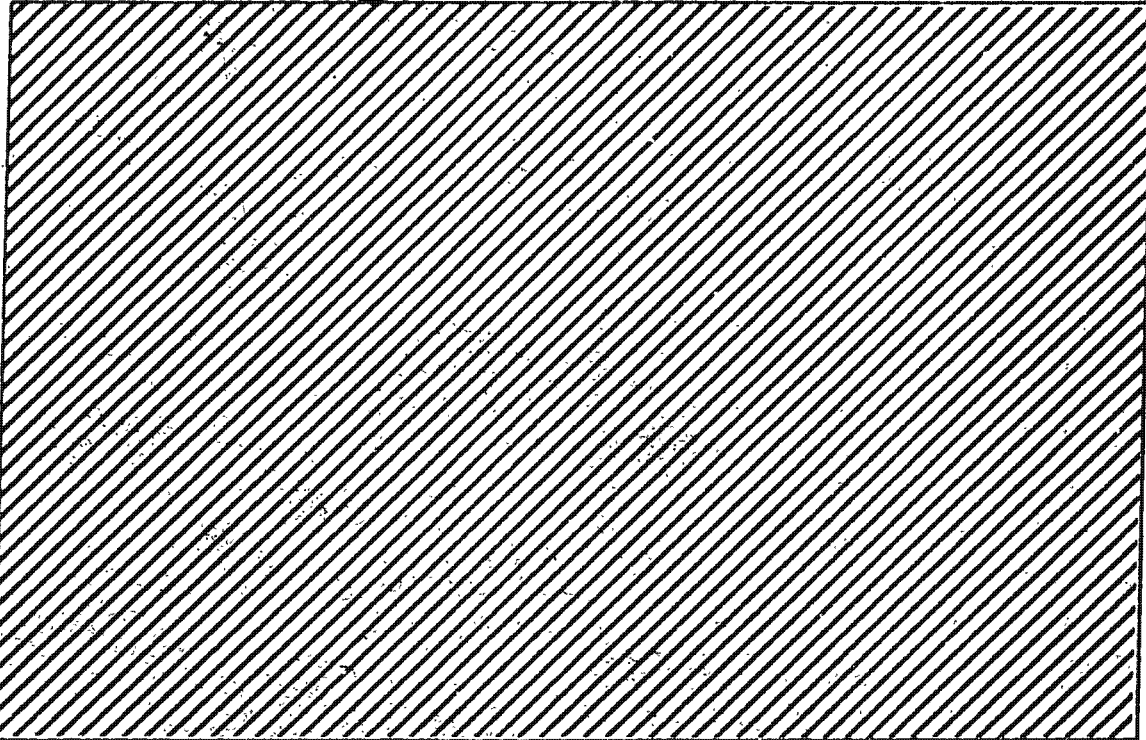
19. ACTION CODE 38	20 EMPLOY. CODE 36	21 OFFICE CODING NUMERIC ALPHABETIC 42/160 14-3	22 STATION CODE 25013	23 INTEGR. CODE	24 MGMTS. CODE 1	25 DATE OF BIRTH MO. DA. YR.	26 DATE OF GRADE MO. DA. YR. 03/16/64	27 DATE OF LEI MO. DA. YR. 03/16/64
28. HRS. EXPIRES MO. DA. YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-CSC 2-FICA 3-NONE	31 SEPARATION DATA CODE	32 CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.	33 SECURITY REQ. NO.	34 SEX	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. REL. PROB. TEMP. CODE	39 FEGLI HEALTH INSURANCE CODE 0-NONET 1-YES HEALTH INS. CODE	40 SOCIAL SECURITY NO.			
41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO PREVIOUS SERVICE 2-BREAK IN SERVICE 3-BREAK IN SERVICE (LESS THAN 3 YEARS) 4-BREAK IN SERVICE (MORE THAN 3 YEARS)	42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE MO. TAX EXEMPTIONS 1-YES 2-NO	44 STATE TAX DATA FORM EXECUTED CODE MO. TAX STATE CODE 1-YES 2-NO					
45 POSITION CONTROL CERTIFICATION 2/1 Kearney 02/05/65	46 OFF. APPROVAL	DATE APPROVED						

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET  
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) <b>Florus, Daniel</b>	NAME AND RELATIONSHIP OF DEPENDENT* <b>Self</b>	CLAIM NUMBER <b>63-514</b>
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There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on 3 September 1964.

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

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

6 January 1965

MEMORANDUM FOR: Chief, CSPO

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

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

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

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

[ ]  
C/WH/Personnel



3-15

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

13 January 1964

1. SERIAL NUMBER  
036130

2. NAME (Last-First-Middle)  
FLORES, Daniel

3. NATURE OF PERSONNEL ACTION  
PROMOTION

4. EFFECTIVE DATE  
MONTH DAY YEAR  
12 21 63

5. CATEGORY OF EMPLOYMENT  
REGULAR

6. FUNDS



X V TO V

V TO CF

CF TO V

CF TO CF

7. COST CENTER NO. CHARGEABLE  
4232-1000-1000

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS

DDP  
Special Affairs Staff  
Research Branch  
Reports, Records, Translation Section

10. LOCATION OF OFFICIAL STATION

Washington, D.C.

11. POSITION TITLE

TRANSLATOR

(B)

12. POSITION NUMBER

0702

13. CAREER SERVICE DESIGNATION

D

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

GS

15. OCCUPATIONAL SERIES

(B)

1015.01

16. GRADE AND STEP

05 (C) 2

17. SALARY OR RATE

~~4,600~~ 4,850

18. REMARKS

Promotion recommendation attached; Fitness Report submitted previously.

Recorded by  
CSFD  
JW

19A. SIGNATURE OF REQUESTING OFFICIAL

DATE SIGNED

19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE SIGNED

C/SAS/Pers.

12/Jan/64

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATE CODE	23. NATIONAL CODE	24. PROPS CODE	25. DATE OF BIRTH	26. DATE OF DEATH	27. DATE OF ...
22	10	49350	SAS	75013	1			
28. DATE EMPHASED	29. SPECIAL REFERENCE	30. SET REMOVAL DATE	31. SEPARATION DATE CODE	32. CONNECTION/TRANSITION DATA	FOI DATA			33. SOCIAL SEC. NO.
34. MIL. PREFERENCE	35. SERVA. COMP. DATE	36. LEAD. COMP. DATE	37. CAREER CATEGORY	38. REG. / HEALTH INSURANCE	39. SOCIAL SEC. NO.			
40. PREVIOUS GOVERNMENT SERVICE DATA	41. ...	42. ...	43. ...	44. ...	45. ...			
46. POSITION CONTROL CERTIFICATION	47. D.P. APPROVAL			DATE APPROVED				



14-00000

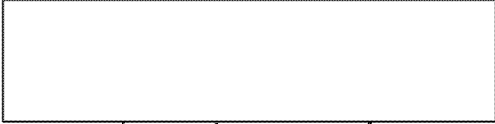
19 December 1963

**MEMORANDUM FOR:** Clandestine Services,  
Career Services Panel

**SUBJECT :** Mr. Daniel Flores -  
Recommendation for Promotion

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

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

  
Chief, SAS/Intel J

**APPROVAL RECOMMENDED**

**DESMOND FITZGERALD**  
Chief, Special Affairs Staff

**SECRET**  
(When Filled In)

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

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED 25 September 1961			
1. SERIAL NUMBER 15310		2. NAME (Last-First-Middle) FLORES Daniel					
3. NATURE OF PERSONNEL ACTION Excepted Appointment				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 03 11 62		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X V TO V CF TO V		V TO CF CF TO CF		7. COST CENTER NO. CHARGE-ABLE 2226 1200 1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP OPSER R I DIV Reference Branch Index Section - Night Shift				10. LOCATION OF OFFICIAL STATION Wash., D. C.			
11. POSITION TITLE File Clerk			12. POSITION NUMBER 0147		12A. PCR CONTROL NO.	12. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0305.01		16. GRADE AND STEP 04 1		17. SALARY OR RATE 4040	
10. REMARKS Regular tour of duty 3:30 PM to 12:00 PM daily/  Subject to trial period and medical  Recorded by CMD							
SIGNATURE OF REQUESTING OFFICIAL Walter Thomas Chief, RID/ADM.				SIGNATURE OF CAREER SERVICE APPROVING OFFICER			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 11 10		20. OFFICE CODES 39400		21. STATION CODE RI		22. DATE OF HIRE 03 11 62	
23. DATE OF SEPARATION		24. SECURITY DATA CODE 1		25. SECURITY CANCELLATION DATA FOD DATA		26. SECURITY REG. NO. 07100 M1	
27. NET PREFERENCE CODE 0		28. SER. COMP. DATE 03 11 62		29. SER. COMP. DATE 03 11 62		30. SOCIAL SECURITY NO. 460-42-6230	
31. FEDERAL TAX DATA		32. STATE TAX DATA		33. FEDERAL TAX DATA		34. STATE TAX DATA	
35. POSITION CONTROL CERTIFICATION		36. O.P. APPROVAL		37. FEDERAL TAX DATA		38. STATE TAX DATA	

14 February 1962

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

Dear Mr. Flores:

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

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

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

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

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

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

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

Very truly yours,

E. D. Echols  
Director of Personnel

OP/Corres/mjt  
File sent to: Shirley Wells

26 January 1962

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

Dear Mr. Flores:

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

Your continued interest and patience are appreciated.

Very truly yours,

E. D. Echols  
Director of Personnel

OP/Corres/sjm  
File sent to: Wells

20 October 1961

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

Dear Mr. Flores:

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

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

Very truly yours,

E. D. Echols  
Director of Personnel

OP/Corros/car  
file sent to shirley wells

12 October 1961

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

Dear Mr. Flores:

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

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

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

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

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

Very truly yours,

A. D. Echols  
Director of Personnel

OP/Corres/car  
file sent to shirley wells



**SECRET**  
(When Filled In)

<b>REQUEST FOR SECURITY CLEARANCE</b>				REQUEST NO. (1-2) 07:00 REQUEST DATE (10-11) 6 October 1961 YEAR OF BIRTH (20-30) 4 August 1935
NAME (LAST - FIRST - MIDDLE) FLORES, DANIEL		POSITION NUMBER (31 - 33) 0117		OCCUP. CODE (37 - 43) 0304.01
POSITION TITLE FILE CLERK		LOCATION (CITY, STATE, COUNTRY) WASHINGTON, D. C.		GRADE (40-46) GS-04
ASSIGNMENT (OFFICE, DIVISION, BRANCH) DDP/OPSER		CONVERSION ACTION		ORGN. CODE (48-50) 3900
TYPE OF APPLICANT <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> CONTRACT <input type="checkbox"/> MILITARY	IF OTHER, SPECIFY:		TYPE OF APPL. (49) 1	
NAME OF REQUESTER (OR OFFICIAL)		TYPE OF ASSIGNMENT AND PURGE <input checked="" type="checkbox"/> HOS <input type="checkbox"/> USF <input type="checkbox"/> PF <input checked="" type="checkbox"/> V <input type="checkbox"/> UV		HDQTRS & FUND (50) 1
CLEARANCE REQUIRED	PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)		<input checked="" type="checkbox"/> SECRET <input checked="" type="checkbox"/> FULL	CLEARANCE (51) 3
ATTACHMENTS	<input checked="" type="checkbox"/> PERSONAL HISTORY STATEMENT <input checked="" type="checkbox"/> PHOTOGRAPHS	<input checked="" type="checkbox"/> APPENDIX I <input type="checkbox"/> APPENDIX II	<input type="checkbox"/> REQUEST FOR WAIVER <input checked="" type="checkbox"/> REPORT OF INTERVIEW	RECRUIT. CODE (53-54) 105
VETERANS STATUS	<input checked="" type="checkbox"/> MALE - VETERAN <input type="checkbox"/> MALE - NON-VETERAN	<input type="checkbox"/> FEMALE - VETERAN <input type="checkbox"/> FEMALE - NON-VETERAN	VEY PREP. & SER (55)	

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

1 - SO  
1 - OTF

SPACE BELOW FOR OS USE ONLY

15 September 1961

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

Dear Mr. Flores:

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

Very truly yours,

E. D. Echols  
Director of Personnel

OP/Corres-bt  
file sent to Mr.

**CONFIDENTIAL**  
(When Filled In)

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

14-00000

**CENTRAL INTELLIGENCE AGENCY**

WASHINGTON 25, D. C.

Applicant Information  
Sheet No. 1

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

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

General Considerations:

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

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

14-00000

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

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

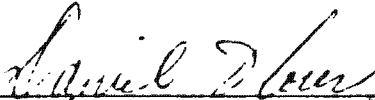
3. Employment by the Central Intelligence Agency is not a right upon which an applicant can insist. Offer of employment which is subject to full clearance does not constitute a commitment on the Agency's part giving an unsuccessful applicant grounds for any claim against the Agency. Acceptance of employment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

Statement of Understanding  
and Agreement

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

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

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

  
\_\_\_\_\_  
(Signature of Applicant)  
Daniel Flores

SECRET

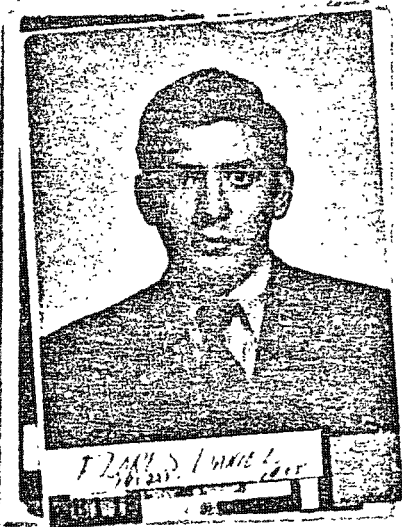
REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

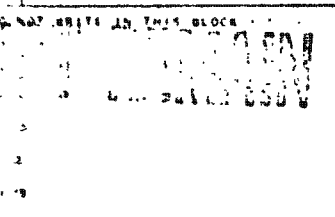
H a n d l e   W i t h   C a r e



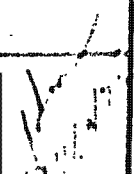
SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP				DATE	FILE NO.
				6 OCTOBER 75	15675
TC: (CHECK)	<input checked="" type="checkbox"/>	CHIEF, CONTROL DIVISION, OP		SS NUMBER	
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION, OP		EMPLOYEE NUMBER	030150
	<input checked="" type="checkbox"/>	CHIEF, (OPERATING COMPONENT FOR ACTION) ATTN: LA		ID CARD NUMBER	
REF.	Form 1522 Dated 18 Aug 75			OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> CANCELLED
STATUS	<input checked="" type="checkbox"/>	STAFF	<input type="checkbox"/>	CONTRACT	
SUBJECT	UNIT				

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

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

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DISTRIBUTION COPY 1 - [unclear] COPY 2 - [unclear] COPY 3 - [unclear] COPY 4 - [unclear] COPY 5 - [unclear]	
--	---



SECRET

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

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <b>EOD</b> <input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify) _____	SUBMIT FORM 542 TO BE ISSUED: <b>8/1/74</b> N-2
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <b>4</b> (HNB 20-7)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 375 (HNB 20-11)	EAA: CATEGORY I _____ CATEGORY II _____
<input checked="" type="checkbox"/> SUBMIT FORM 1322 (HNB 240-20)	<b>THIS MEMO MUST REMAIN ON TOP OF FILE</b>
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HNB 240-20)	
<input checked="" type="checkbox"/> EAA: CATEGORY I _____ CATEGORY II <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> SUBMIT FORM 2888 FOR AGE HOSPITALIZATION CARD REWARDS AND OR COVER HISTORY	
PERFORMANCE EVALUATION: <b>EP:61P</b> 1974 1 15675 1974 2 15675 1974 3 15675 1974 4 15675	

SECRET

U.S. GOVERNMENT PRINTING OFFICE: 1974 O-282-111

SECRET

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

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

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

REMARKS AND/OR COVER HISTORY

Nar 62 - Dec 62 Overt

EDF/ [ ]

DISTRIBUTION: [ ]

1551

*James H. [ ]*

SECRET

All

L48 304 015

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 OCTOBER 1979

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

1. SERIAL NO		2. NAME		3. ORGANIZATION		4. PLANS		5. LWOP HOURS		
036130		DANIEL FLCRES		LA						
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	QSI	ADJ.
GS	3	\$28,235	08/26/79	GS	3	\$31,333	10/07/79			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
FORM 1073 3601 <b>HEP</b> PAY CHANGE NOTIFICATION										

Handwritten initials and date: 10/25/80

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 06 OCTOBER 1978

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

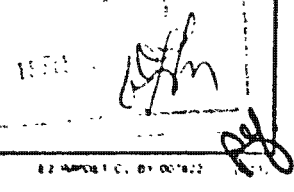
5678

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 WORK HOURS		
0036130		FLORES DANIEL		91 62C						
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION		
Grade	Step	Salary	EFFECTIVE DATE	Grade	Step	Salary	EFFECTIVE DATE	WGS	OSI	ADJ.
GS	13	2	28,368	01/29/76	GS	13	3	29,265	01/28/79	
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE				DATE						
				01/29/78						
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
				APPROVED BY						
FORM 10-73 560F <span style="float: right;">14 57</span>										

PAY CHANGE NOTIFICATION

SEA 021078

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER <b>036130</b>		2. NAME (LAST FIRST MIDDLE) <b>FLORES DANIEL</b>										
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>						4. EFFECTIVE DATE MO DA YR <b>02 11 78</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>				
6. FUNDS		V TO V		V TO CF		7. FAN AND NSCA <b>8035 0990 0000</b>		8. USC OR OTHER LEGAL AUTHORITY <b>50 USC 403 J</b>				
9. ORGANIZATIONAL DESIGNATIONS <b>DDO/LA DIVISION FOREIGN FIELD</b>						10. LOCATION OF OFFICIAL STATION						
11. POSITION TITLE <b>OPERATIONS OFFICER</b>						12. POSITION NUMBER <b>GK76</b>		13. SERVICE DESIGNATION <b>DRG</b>				
14. CLASSIFICATION SCHEDULE (GS, W, F, etc.) <b>GS</b>			15. OCCUPATIONAL SERIES <b>0136.01</b>			16. GRADE AND STEP <b>13 2</b>		17. SALARY OR RATE <b>26689</b>				
18. REMARKS												
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>51620 LA</b>		22. STATION CODE <b>45075</b>	23. INTERLEAVE CODE	24. HOURS CODE <b>3</b>	25. DATE OF BIRTH MO DA YR		26. DATE OF GRADE MO DA YR		27. DATE OF LEI MO DA YR	
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE 1 CSC 2 CIA 3 F/A 4 N/A		30. RETIREMENT DATA CODE		31. SEPARATION DATA CODE TYPE		32. CORRECTION/CANCELLATION DATA MO DA YR		33. SECURITY REQ NO		34. SEX
35. VET PREFERENCE CCGA 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 LAR RESV PROV EMP		39. FECL / HEALTH INSURANCE CODE CODE 0 WAIVER 1-YES		40. SOCIAL SECURITY NO		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CCGA 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 2 YRS. 3 BREAK IN SERVICE MORE THAN 2 YRS.				42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EXECUTED CODE FED TAX EXEMPTIONS 1 YES 2 NO			44. STATE TAX DATA FORM EXECUTED CODE MO TAX EXEMP STATE CODE 1 YES 2 NO			
SIGNATURE OR OTHER AUTHENTICATION												
												

FORM 1150  
5 Feb May 10 78

Use Previous Edition

SECRET

SEA

82 APR 1978 C. BY 001822

All

L48 100 255

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

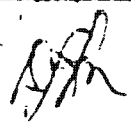
EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

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

CPD: 7 APR 77

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER <b>036130</b>		2 NAME (LAST FIRST MIDDLE) <b>FLORES DANIEL</b>	
3 NATURE OF PERSONNEL ACTION <b>REMOVAL FROM PARTICIPATION IN CIA RETIREMENT AND DISABILITY SYSTEM</b>			4 EFFECTIVE DATE MO DA YR <b>04 10 77</b>
5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>			6 FUNDS V TO V CF TO V <b>X</b> V TO CF CF TO CF
7 FAN AND NSCA <b>7135 4534 0000</b>		8 CSC OR OTHER LEGAL AUTHORITY <b>PL 88-643 SECT. 203</b>	
9. ORGANIZATIONAL DESIGNATIONS <b>DDO/LA DIVISION</b>		10 LOCATION OF OFFICIAL STATION <b>WASH., D.C.</b>	
11 POSITION TITLE		12 POSITION NUMBER	13 SERVICE DESIGNATION <b>DQG</b>
14 CLASSIFICATION SCHEDULE (SS, LS, etc)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP <b>13</b>	17 SALARY OR RATE
18 REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE	20 Employ Code	21 OFFICE CODING NUMERIC ALPHABETIC	22 STATION CODE
23 INTEGRAL CODE	24 Hdqtrs Code	25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR
27 DATE OF LEI MO DA YR	28 NTE EXPIRES MO DA YR	29 SPECIAL REFERENCE 1. CIA 2. CIA 3. FCA 4. NONE	30 RETIREMENT DATA CODE
31 SEPARATION DATA CODE	32 Correction / Cancellation Date TYPE MO DA YR	33 SECURITY REQ NO	34 SEX
35 VET PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY CAR 035 EPN 03MP
39 FEGLI / HEALTH INSURANCE 0 / WAIVER 1 YES	40 SOCIAL SECURITY NO	41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS. 3 BREAK IN SERVICE MORE THAN 3 YRS.	
42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO	44 FEDERAL TAX DATA NO TAX EXEMPTIONS	45 STATE TAX DATA FORM EXECUTED 1 YES 2 NO
SIGNATURE OR OTHER AUTHENTICATION			
			

FORM 1130  
5-6 May 70 Ed

Use Previous Edition

SECRET

USE PREVIOUS EDITION

PLF: 01 MAR 77

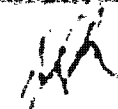
SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)									
036130		FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT					
REASSIGNMENT				02 26 77		REGULAR					
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		7135 4534 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION						
DDO/LA DIVISION CUBA OPERATIONS GROUP EA AREA					WASH., D.C.						
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION					
OPERATIONS OFFICER				F335		DQG					
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE				
GS			0136.01		13 1		24308				
18 REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGRAL CODE	24 MONTHS CODE	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF LEI	
37	10	51500	LA	75013	1	1	MO DA YR		MO DA YR		MO DA YR
28 NTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REG NO	34 SER	
MO DA YR		1 CSC 2 C.A. 3 F.A. 4 NONE	CODE		TYPE		MO DA YR		EOD DATA		
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 PEGU / HEALTH INSURANCE		40 SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		LAB BRV CODE		CODE 0 WAIVER 1 YES		HEALTH INS CODE	
1 NONE 2 5 PT 3 10 PT											
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE			42 LEAVE CAT CODE	43 FEDERAL TAX DATA			44 STATE TAX DATA				
CODE				NO. TAX EXEMPTIONS			NO. TAX EXEMPTED				
1 NO PREVIOUS SERVICE 2 NO BREAK IN SERVICE 3 BREAK IN SERVICE LESS THAN 3 YRS 4 BREAK IN SERVICE MORE THAN 3 YRS				1 YES 2 NO			1 YES 2 NO				
SIGNATURE OR OTHER AUTHENTICATION											



AEO:1 FEB 77

SECRET  
(When Filled In)

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KKK: 6 DEC 76

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(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																																																																																																											
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FROM CIA																																																																																																											

PIF

1. SERIAL NO.		NAME		3. EMPLOYER'S NO.		4. EMPLOYER'S NAME		5. COUNTY NO.		
J 1000		JAMES H. HILL		1111		FEDERAL				
6. OLD SALARY RATE				7. NEW SALARY RATE				8. EFFECTIVE DATE		
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date	WGT	QSI	ADJ
	1	200.00	11/15/75		1	200.00	11/15/75			
CERTIFICATION AND AUTHORIZATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLERKS INITIALS										
FORM 10.73 560E Use previous editions <b>PAY CHANGE NOTIFICATION</b> (4 51)										

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1976

NAME  
JAMES HILL

SERIAL NO. 1111 OF 1111  
GRADE 17 500 OF GS 17 3

NEW  
SALARY  
200.00

NRK: 19 JULY 76

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DCP

1 SERIAL NUMBER 53613		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL					
3 NATURE OF PERSONNEL ACTION REASSIGNMENT - CHANGE OF FUNCTIONAL CATEGORY				4 EFFECTIVE DATE MO DA YR JG 21 76		5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS		V TO V		V TO CF		7 TAN AND NSCA	
		CF TO V		X		CF TO CF	
				T175 3012 3500		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 433 J	
9 ORGANIZATIONAL DESIGNATIONS DDA/OTR FUNCTIONAL TRAINING DIVISION OPERATIONS TRAINING BRANCH				10 LOCATION OF OFFICIAL STATION WASH., D.C.			
11 POSITION TITLE INSTRUCTOR OPS				12 POSITION NUMBER BD33		13 SERVICE DESIGNATION DOG	
14 CLASSIFICATION SCHEDULE NOS. (B, OR)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE	
GS		1712.32		12 3		25078	
18 REMARKS							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE 37	20 EMPLOY CODE 15	21 OFFICE CODING NUMERIC 175 JG		ALPHABETIC OTR	22 STATION CODE 75 J13	23 INTEREST CODE	24 HOURS CODE 1
25 DATE OF BIRTH MO DA YR		26 DATE OF GRADE MO DA YR		27 DATE OF LET MO DA YR		28 SECURITY REQ NO.	
						EOD DATA	
29 VET PREFERENCE CODE 0 NONE 1 5 YR 2 10 YR	30 SERV COMP DATE MO DA YR		31 LONG COMP DATE MO DA YR		32 CAREER CATEGORY LAB ESW ECON STMP		33 FEDERAL / HEALTH INSURANCE CODE 0 WAIVED 1 YES
34 SOCIAL SECURITY NO.	35 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BRAGS IN SERVICE 2 BRAGS IN SERVICE LESS THAN 3 YRS. 3 BRAGS IN SERVICE MORE THAN 3 YRS.	36 LEAVE CAT CODE	37 FEDERAL TAX DATA FORM EXEMPTED CODE 1 YES 2 NO		38 STATE TAX DATA FORM EXEMPTED CODE 1 YES 2 NO		

SIGNATURE OR OTHER AUTHENTICATION

FROM: LA

AFG  
SECRET

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

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

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

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

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

EFFECTIVE DATE OF DESIGNATION: 31 MAY 1974.

FLORES DANIEL

036130

41351084

1 SERIAL NO		2 NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS		
036130		FLORES DANIEL			51 500		CF				
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ		
GS 12	2	19,076	11/24/74	GS 12	3	19,693	11/23/75				
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE											
SIGNATURE							DATE				
<i>[Signature]</i>							<i>[Date]</i>				
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD											
CLERK'S INITIALS									BY		
FORM 7-69 500E		PAY CHANGE NOTIFICATION							14 511		

REF: 10 SEP 75

**SECRET**  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1 SERIAL NUMBER 13317		2 NAME (LAST FIRST MIDDLE) FLORIS DANIEL											
3 NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="checkbox"/> STATUS				4 EFFECTIVE DATE MO DA YR 09 14 75		5 CATEGORY OF EMPLOYMENT REGULAR							
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY					
		CF TO V		CF TO CF		6155 1574		51 USC 403 J					
9 ORGANIZATIONAL DESIGNATIONS DOO/LA DIVISION CUSA OPERATIONS GROUP CPS BRANCH						10 LOCATION OF OFFICIAL STATION WASH., D.C.							
11 POSITION TITLE OPERATIONS OFFICER				12 POSITION NUMBER CQ05		13 SERVICE DESIGNATION DQB							
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 6136.01		16 GRADE AND STEP 12 2		17 SALARY OR RATE 19070						
18 REMARKS WASH., D.C.													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE 56	20 EMPLOY CODE 1	21 OFFICE CODING NUMERIC ALPHABETIC 5157 LA		22 STATION CODE 7513	23 INTEGREE CODE	24 Major Code 1	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI		
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction /Cancellation Data		33 SECURITY REG NO		34 SER	
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SIGNATURE OR OTHER AUTHENTICATION													
										<p><b>POSTED</b> 19 SEP 75 BL</p>			





LMP: 27 SEPT 74

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER <b>Ø3613Ø</b>		2 NAME (LAST FIRST MIDDLE) <b>FLORES DANIEL</b>								
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>					4 EFFECTIVE DATE MO DA '74 <b>Ø9 15 74</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>			
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CXC OR OTHER LEGAL AUTHORITY		
CF TO V		<b>X</b>		CF TO CF		<b>5135 4534 ØØØØ</b>		<b>5Ø USC 4Ø3 J</b>		
9 ORGANIZATIONAL DESIGNATIONS <b>DDO/WH DIVISION WH/COG OPS BRANCH</b>					10 LOCATION OF OFFICIAL STATION <b>WASH., D.C.</b>					
11 POSITION TITLE <b>OPS OFFICER</b>					12 POSITION NUMBER <b>1159</b>		13 SERVICE DESIGNATION <b>DQB</b>			
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>			15 OCCUPATIONAL SERIES <b>Ø136.Ø1</b>		16 GRADE AND STEP <b>12 1</b>		17 SALARY OR RATE <b>17497</b>			
18 REMARKS <b>WASH., D.C.</b>										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE <b>37</b>	20 Employ Code <b>1Ø</b>	21 OFFICE CODING NUMBER ALPHABETIC <b>515ØØ WH</b>		22 STATION CODE <b>75Ø13</b>	23 INTEGRITY CODE <input type="checkbox"/>	24 Hdqtrs Code <b>1</b>	25 DATE OF BIRTH MO DA '74		26 DATE OF GRADE MO DA '74	27 DATE OF LET MO DA '74
28 NTE EXPIRES MO DA '74		29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE		31 SEPARATION DATA CODE	32 Correction / Cancellation Code TYPE MO DA '74		33 SECURITY REQ NO	34 SER	
35 VET PREFERENCE CODE 0 NONE 1 5 YR 2 10 YR		36 SERV COMP DATE MO DA '74		37 LONG COMP DATE MO DA '74		38 CAREER CATEGORY CODE		39 FEGLI / HEALTH INSURANCE CODE 0 NONE 1 YES		40 SOCIAL SECURITY NO
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)			42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EMPLOYED CODE NO TAX EXEMPTIONS			44 STATE TAX DATA FORM EMPLOYED CODE NO TAX EXEMPTIONS			
SIGNATURE OR OTHER AUTHENTICATION										
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NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 888134	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM	4 EFFECTIVE DATE MO DA YR 06 27 74	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS	7 FAN AND NSCA 4135 1324 011	8 CSC OR OTHER LEGAL AUTHORITY PL 88-543 SECT. 203
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9 ORGANIZATIONAL DESIGNATION DDO/NA DIVISION	10 LOCATION OF OFFICIAL STATION
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11 POSITION TITLE	12 POSITION NUMBER	13 SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (SEE 18 USC)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP 12	17 SALARY GR DATE
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18 REMARKS  
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 CODES CODING ALPHABETIC	22 STATION CODE	23 PAYABLE CODE	24 HOURS CODE	25 DATE OF BIRTH MO DA YR	26 DATE OF LEAVE MO DA YR	27 DATE OF LET MO DA YR
28 NET SALARY	29 PAYMENT DEFERRABLE	30 RETIREMENT DATA TYPE 1. CA 2. SA 3. SA 4. SA	31 OPERATIONAL DATA CODE	32 CORRECTION / CANCELLATION DATE TYPE MO DA YR	33 SECURITY REG NO	34 SER	35 DATA	
36 VET PRESENT	37 VET COMP DATE	38 LONG COMP DATE	39 CAREER CATEGORY	40 FECA / HEALTH INSURANCE TYPE MO DA YR	41 SOCIAL SECURITY NO			
42 PREVIOUS FEDERAL EMPLOYMENT SERVICE	43 LEAVE CAT CODE	44 FEDERAL TAX DATA TYPE MO DA YR	45 STATE TAX DATA TYPE MO DA YR					

SIGNATURE OF OTHER AUTHENTICATION

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NOTIFICATION OF PERSONNEL ACTION

008

1 SERIAL NUMBER 030130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE 11   25   73
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V	V TO CF	7 PAN AND NSCA
	CF TO V	X	CF TO CF
		8 CSC OR OTHER LEGAL AUTHORITY	9 ORGANIZATIONAL DESIGNATIONS
		4135 1084 0000	50 USC 403 J
10 ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION FOREIGN FIELD BRANCH 3		11 LOCATION OF OFFICIAL STATION	
STATION			
12 POSITION TITLE OPS OFFICER		13 POSITION NUMBER 0136	14 SERVICE DESIGNATION D
15 CLASSIFICATION SCHEDULE (OS, LB, etc.) GS	16 OCCUPATIONAL SERIES 6136.01	17 GRADE AND STEP 12 1	18 SALARY OR RATE 17427
19 REMARKS  HOME CASE: WH			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

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

SIGNATURE OF OTHER AUTHENTICATION

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

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

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

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

055

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

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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

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

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NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
PROMOTION						11 28 71		REGULAR			
6 FUNDS		V TO V		V TO CP		7 Financial Analysis No. Chargeable		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CP		2135 1084 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION					
DDP/WH DIVISION FOREIGN FIELD BRANCH 3, [ ] STATION						[ ]					
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION			
OPS OFFICER						0136		0			
14 CLASSIFICATION SCHEDULE (GS, FS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP		17 SALARY OR RATE			
GS			0136.01			11 3		13457			
18 REMARKS											
[ ]											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE											
20 EMPLOY CODE											
21 OFFICE CODING											
22 STATION CODE											
23 INITIATION CODE											
24 PAYMENT CODE											
25 DATE OF BIRTH											
26 DATE OF GRADE											
27 DATE OF LEI											
28 PTE EXPIRES											
29 SPECIAL REFERENCE											
30 RETIREMENT DATA											
31 SEPARATION DATA CODE											
32 Correction / Cancellation Data											
33 SECURITY REG NO											
34 SER											
35 VET PREFERENCE											
36 SERV COMP DATE											
37 LONG COMP DATE											
38 CAREER CATEGORY											
39 FEGLI / HEALTH INSURANCE											
40 SOCIAL SECURITY NO											
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE											
42 LEAVE CAT CODE											
43 FEDERAL TAX DATA											
44 STATE TAX DATA											
45 NO PREVIOUS SERVICE											
46 NO BREAK IN SERVICE											
47 BREAK IN SERVICE LESS THAN 3 YRS											
48 BREAK IN SERVICE MORE THAN 3 YRS											
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50 NO TAX EXEMPTIONS											
51 FORM EXECUTED											
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Form 1150  
May 67

Use Previous Edition

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(When Filled In)





1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
036130		FLORES DANIEL		51 700		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS	10	2	\$11,901	07/26/70	GS	10	2	\$12,295	07/25/71
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE				DATE					
				6 May 1971					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS				AUDITED BY					
FORM 560 E Use previous editions				PAY CHANGE NOTIFICATION				(4-51)	

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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51 700	CF	GS 10 2	\$11,901

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(When Filled In)

BSJ: 10 AUG 70

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 036136		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE MO DA YR 07 29 70		5. CATEGORY OF EMPLOYMENT REGULAR					
6. FUNDS		V TO V	V TO CF	7. Functional Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY					
CF TO V		X	CF TO CF	1135 0884 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3				10. LOCATION OF OFFICIAL STATION [REDACTED] STATION [REDACTED] BASE							
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0376		13. SERVICE DESIGNATION D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 10 2		17. SALARY OR RATE 11231				
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 51700/WH		22. STATION CODE 19559	23. INTEGRITY CODE	24. MAJOR CODE 3	25. DATE OF BIRTH MO DA YR		26. DATE OF GRADE MO DA YR		
28. INT. EXPIRES MO DA YR 07 25 72		29. SPECIAL REFERENCE 81		30. RETIREMENT DATA 1. CSC 2. CIA 3. FICA 4. NCA		31. SEPARATION DATA CODE		32. CORRECTION / CONCERN DATA EOD DATA		33. SECURITY REQ NO	34. SIA
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEEDBACK HEALTH INSURANCE		40. SOCIAL SECURITY NO	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA		
45. SIGNATURE OR OTHER AUTHENTICATION											

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1 SERIAL NO.		2. NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS		
036130		FLURES DANIEL			91 700		CF				
6 OLD SALARY RATE				7. NEW SALARY RATE				8 TYPE ACTION			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.		
GS	09	2	\$ 9,631	04/06/69	GS	09	3	\$ 9,942	04/05/70		
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.											
SIGNATURE						DATE					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD											
CLEAR'S INITIALS								AUDITED BY			
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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: 13 JULY 1966

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

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11924 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

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

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NOTIFICATION OF PERSONNEL ACTION

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1 SERIAL NUMBER 036130	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION	4 EFFECTIVE DATE 04 10 69	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS	V TO V	V TO CF	7 Financial Analysis No. (Chargeable)	8 CSC OR OTHER LEGAL AUTHORITY
	CF TO V	X CF TO CF	9135 0884 0000	50 USC 403 J

9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3	10 LOCATION OF OFFICIAL STATION STATION BASE
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11 POSITION TITLE OPS OFFICER	12 POSITION NUMBER 0376	13 SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (OS, LS, ON, O)	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 09 2	17 SALARY OR RATE 8744
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18 REMARKS

MARITAL STATUS: MARRIED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

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

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*[Handwritten Signature]*

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FORM 1152  
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(When Filled In)

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NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO CONFIDENTIAL FUNDS AND CHANGE OF SERVICE DESIGNATION			4 EFFECTIVE DATE 04 16 69
5 CATEGORY OF EMPLOYMENT REGULAR			6 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
7 FUNDS	V TO V CF TO V	V TO CF CF TO CF	8 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 STATION BASE
9 POSITION TITLE OPS OFFICER		10 POSITION NUMBER 0376	11 SERVICE DESIGNATION D
12 CLASSIFICATION SCHEDULE (GS 18 44)	13 OCCUPATIONAL SERIES 0136.01	14 GRADE AND STEP GS 2	15 SALARY OR RATE 8744
16 REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 20	20 EMPLOY CODE 10	21 OFFICE CODING NUMBER 51700	21 OFFICE CODING ALPHABETIC WH	22 STATION CODE 19559	23 PAY GRADE CODE 3	24 DATE OF BIRTH 04 06 69	25 DATE OF GRADE 04 06 69	26 SECURITY REQ NO	27 SECURITY NO
28 PMS SERVICE	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 Correction/Computation Code	33 SOCIAL SECURITY NO		34 SOCIAL SECURITY NO		
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 REGU / HEALTH INSURANCE	40 SOCIAL SECURITY NO				
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA				

SIGNATURE OR OTHER AUTHENTICATION

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(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)								
036130		FLORES DANIEL								
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT				
REASSIGNMENT				10   06   68		REGULAR				
6 FUNDS		X V TO V		V TO CF		7 Financial Analysis No. Chargeable		8 CSC OR OTHER LEGAL AUTHORITY		
CF TO V		CF TO CF		9235 0620 0000		50 USC 403 J				
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION						
DDP/WH BRANCH 4				SECTION		WASH., D.C.				
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION				
OPS OFFICER				1441		SJ				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE				
GS		0136.01		08 2		7956				
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 Military Code	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF LEI
37	10	51450	WH	75013		1				
28 NTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Correction / Cancellation Date		33 SECURITY REG NO		34 SER
								EOD DATA		
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGU / HEALTH INSURANCE		40 SOCIAL SECURITY NO
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE			42 LEAVE CAT CODE	43 FEDERAL TAX DATA			44 STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION										
FROM CTP										
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>105115</p> <p><i>[Signature]</i></p> </div>										

FORM 1150  
1-68  
May 1967

Use Previous Edition

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Included here automatically accompanying and for retention

(When Filled In)

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

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

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

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



JLB: 24 JUN 68

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																																																																																																																																		
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)																																																																																																																																
036130		FLORES DANIEL																																																																																																																																
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT																																																																																																																										
PROMOTION						06   16   68		REGULAR																																																																																																																										
6. FUNDS		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY																																																																																																																														
X		8275 2100 0000		50 USC 403 J																																																																																																																														
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION																																																																																																																												
DDS/OTR CAREER TRAINING PROGRAM						WASH., D.C.																																																																																																																												
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION																																																																																																																										
CAREER TRAINEE						0748		SJ																																																																																																																										
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE																																																																																																																											
GS			0090.01		GS 2		7630																																																																																																																											
18. REMARKS																																																																																																																																		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																																																																		
<table border="1"> <tr> <td>19. ACTION CODE</td> <td>20. EMPLOY CODE</td> <td colspan="2">21. OFFICE CODING</td> <td>22. STATION CODE</td> <td>23. INTEGREE CODE</td> <td>24. HUMAN CODE</td> <td colspan="2">25. DATE OF BIRTH</td> <td colspan="2">26. DATE OF GRADE</td> <td colspan="2">27. DATE OF LEI</td> </tr> <tr> <td>22</td> <td>10</td> <td>NUMBER</td> <td>ALPHABETIC</td> <td>75013</td> <td></td> <td>1</td> <td>MO</td> <td>DA</td> <td>YE</td> <td>MO</td> <td>DA</td> <td>YE</td> </tr> <tr> <td></td> <td></td> <td>26300</td> <td>CTP</td> <td></td> <td></td> <td></td> <td>06</td> <td>16</td> <td>68</td> <td>06</td> <td>16</td> <td>68</td> </tr> <tr> <td colspan="2">28. INT. EXPIRES</td> <td colspan="2">29. SPECIAL REFERENCE</td> <td colspan="2">30. RETIREMENT DATA</td> <td colspan="2">31. SEPARATION DATA CODE</td> <td colspan="2">32. Correction - Cancellation Data</td> <td colspan="2">33. SECURITY REQ NO</td> <td>34. SER</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">EOD DATA</td> <td colspan="2"></td> <td></td> </tr> <tr> <td colspan="2">35. VET PREFERENCE</td> <td colspan="2">36. SERV. COMP. DATE</td> <td colspan="2">37. LONG COMP. DATE</td> <td colspan="2">38. CAREER CATEGORY</td> <td colspan="2">39. FEGLI / HEALTH INSURANCE</td> <td colspan="3">40. SOCIAL SECURITY NO.</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="3"></td> </tr> <tr> <td colspan="4">41. PREVIOUS CIVILIAN GOVERNMENT SERVICE</td> <td colspan="2">42. LEAVE CAT. CODE</td> <td colspan="4">43. FEDERAL TAX DATA</td> <td colspan="4">44. STATE TAX DATA</td> </tr> <tr> <td colspan="4"></td> <td colspan="2"></td> <td colspan="4"></td> <td colspan="4"></td> </tr> </table>												19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HUMAN CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		22	10	NUMBER	ALPHABETIC	75013		1	MO	DA	YE	MO	DA	YE			26300	CTP				06	16	68	06	16	68	28. INT. EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction - Cancellation Data		33. SECURITY REQ NO		34. SER									EOD DATA					35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.																41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA																	
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HUMAN CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI																																																																																																																							
22	10	NUMBER	ALPHABETIC	75013		1	MO	DA	YE	MO	DA	YE																																																																																																																						
		26300	CTP				06	16	68	06	16	68																																																																																																																						
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41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA																																																																																																																								
SIGNATURE OR OTHER AUTHENTICATION																																																																																																																																		

POSTED  
*PC*  
 6-24-68

FORM 54a 1150 May 10-67

Use Previous Edition

SECRET JLB

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

SECRET  
(When Filled In)

FVD: 15 DEC 67

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 030130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION			4 EFFECTIVE DATE MO. DA. YR. 12   17   67
5 CATEGORY OF EMPLOYMENT REGULAR			6 CSC OR OTHER LEGAL AUTHORITY
7. Financial Analysis No. Chargeable 6275 2100 0000	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS JCS/OTR CAREER TRAINING PROGRAM		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE CAREER TRAINEE		12 POSITION NUMBER 0748	13 SERVICE DESIGNATION SJ
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15. OCCUPATIONAL SERIES 0000.01	16 GRADE AND STEP 07 2	17. SALARY OR RATE 6859
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

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

SIGNATURE OR OTHER AUTHENTICATION

POSTED  
RW  
12-26-67

FORM 1150  
8-66

Use Previous Edition

SECRET

FVD

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

SECRET  
(When Filled In)

MAH: 20 SEPT 67

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

EOD DATA

*[Handwritten signature]*  
11/20/67

FORM 1150

Use Previous Edition

SECRET

MAH

GROUP 1 Excluded from automatic downgrading and declassification

(When Filled In)

SECRET *6-43*  
(When Filled In)

Pub

NOTIFICATION OF PERSONNEL ACTION

OCS 10/07/67

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

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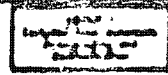
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
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18 REMARKS

SIGNATURE OF OTHER AUTHENTICATION

*FOR FILE*  
*[Signature]*

SECRET



SECRET  
(When Filled In)

MAIL: 28 JULY 67

NOTIFICATION OF PERSONNEL ACTION

OCF

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

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
PROMOTION & PAY ADJUSTMENT TO FULL TIME	07 130 167	REGULAR

6. FUNDS	7. Financial Analysis No. (Optional)	8. CSC OR OTHER LEGAL AUTHORITY
X V TO V CF TO V	8235 1162 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION	WASH., D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
INTELLIGENCE ASST	1174	D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY GS RATE
GS	0301,28	06 3	6263

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. EMPLOYEE CODE	24. HEIGHT CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
28	10	51500 WH	75013				07 30 67	07 130 67

28. NTE EXPIRES	29. SPECIAL EMPLOYMENT	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REQ NO	34. SER

35. VET PREFERENCE	36. LEAVY COMP DATE	37. LONG LEAVY DATE	38. CAREER CATEGORY	39. FEELS / HEALTH INSURANCE	40. SOCIAL SECURITY NO

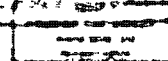
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA

SIGNATURE OR OTHER AUTHENTICATION

**POSTED**

08 07 67

*File*



653

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

Form 145 500E May 2-65

(4-51)

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	51	500 V	GS 05 4	\$ 5,694	\$ 5,859



SECRET  
(When Filled In)

RZF: 28 JAN 66

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		2 NAME (LAST-FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION CHG IN STRENGTH COUNT			4 EFFECTIVE DATE 01 30 66
			5 CATEGORY OF EMPLOYMENT PART TIME
6 FUNDS X		V TO V CF TO V	V TO CF CF TO CF
		7 COST CENTER NO. CHARGEABLE 6235 1162 0000	
		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE INTELLIGENCE CLERK		12 POSITION NUMBER 1184	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15 OCCUPATIONAL SERIES 0301.27	16 GRADE AND STEP 05 3	17 SALARY OR RATE 5523
18 REMARKS THIS ACTION CORRECTS COMPUTER CODING TO REFLECT CHANGE IN STRENGTH COUNT OF PART TIME PERSONNEL IN ACCORDANCE WITH PROVISIONS OF HR-20-10, REVISED 21 DECEMBER 1965.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 33	20 EMPLOY. CODE 36	21 OFFICE CODING NUMERIC: 51500 ALPHABETIC: WH	22 STATION CODE 75013
23 INTEGRAL CODE		24 HOURS	25 DATE OF BIRTH
26 DATE OF GRADE		27 DATE OF LEI	
28 HTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE
32 SECURITY REQ NO		34 SEX	
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.	
43 FEDERAL TAX DATA		44 STATE TAX DATA	
45 FEDERAL TAX DATA		46 STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION			

FORM 1150  
11 62

Use Previous Edition

SECRET

*[Handwritten Signature]*

FORM 1150-100  
11 62  
11 62

(When Filled In)



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

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

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

DATE: 25 AUG 65

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130		2. NAME (LAST-FIRST-MIDDLE) FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE 08   25   65
5. CATEGORY OF EMPLOYMENT PART TIME			6. COST CENTER NO. (CHARGEABLE) 6235 1162 (XXX)
7. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			8. CSC OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE INTELLIGENCE CLERK		12. POSITION NUMBER 1184	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0301.27	16. GRADE AND STEP 05 3	17. SALARY OR RATE 5330
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION NO. (Employ Code) 37	20. EMPLOY CODE 20	21. OFFICE CODING NUMERIC: 515(X)   ALPHABETIC: WH		22. STATION CODE 75(13)	23. INTEGREE CODE	24. MAINT. CODE 1	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. NEE EXPIRES NO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - RICA 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 - B PT 2 - D PT	36. SERV. COMP. DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. CAREER CATEGORY LAN REGV PHIL TEMP		39. FEGLI / HEALTH INSURANCE CODE 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 EXEMPTED: CODE NO TAX EXEMPTIONS 1 - YES 2 - NO			44. STATE TAX DATA FORM EXEMPTED: CODE NO TAX EXEMPT 1 - YES 2 - NO		

EOD DATA

SIGNATURE OR OTHER AUTHENTICATION

8-27-65 W

*J. J. J.*

GROUP 1 - NO AUTOMATIC DOWNGRADING AND DECLASSIFICATION

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

MAR 11 1965

DLB: 5 FEB 65

SECRET  
(When Filled In)

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

DLB: 9 FEB 65

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

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

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 31	20. EMPLOY CODE 20	21. OFFICE CODES NUMERICAL ALPHABETIC 49150 SAS	22. STATION CODE 75013	23. INTELLIGENCE CODE	24. BRANCH CODE 1	25. DATE OF BIRTH MO DA YR 03 16 64	26. DATE OF GRADE MO DA YR 03 16 64	27. DATE OF LET MO DA YR 03 16 64
28. NTE EXPIRES MO DA YR	29. SPECIAL DEFERMENT	30. RETIREMENT DATA 1. CODE 2. DATE	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE MO DA YR	33. SECURITY RTO NO	EOD DATA		
34. VET PREFERENCE CODE 0 NONE 1 5% 2 10%	35. LAST COMP DATE MO DA YR	36. LONG COMP DATE MO DA YR	37. CAREER CATEGORY CODE	38. FECA/HEALTH INSURANCE CODE	39. SOCIAL SECURITY NO			
40. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 NO PREVIOUS SERVICE 1 NO SERVICE IN SERVICE 2 SERVICE IN SERVICE (LESS THAN 1 YEAR) 3 SERVICE IN SERVICE (MORE THAN 1 YEAR)		41. LEAVE CODE CODE	42. FEEDBACK DATA CODE	43. LEAVE DATA CODE				

SIGNATURE OR OTHER AUTHENTICATION

**FOSTED**

*[Handwritten Signature]*

1150

Use Previous Edition

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC  
DOWNGRADING AND  
DECLASSIFICATION

When Filled In



MHC: 6 AUG 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT					08   06   64		REGULAR		
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		5235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SAS COUNTER-INTELL STAFF OPERATIONS SECTION					WASH., D.C.				
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION		
INTELLIGENCE ASST					1130		D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0301.28		05 2		4850			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES
37	10	49150	SAS	75013		1			
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA		33. SECURITY REG NO		34. SER
							EOD DATA		
35. RET. PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO		
41. PREVIOUS GOVERNMENT SERVICE DATA			42. LEAVE CAT CODE	43. FEDERAL TAX DATA			44. STATE TAX DATA		
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           10-111D            08/13/64 JPK         </div>									

FORM 1130

Use Previous Edition

SECRET 6 AUG 1964

Check  
Number - not calculate  
Date and no  
Signature

(When Filled In)

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 07/01/64

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

Form 1120  
1-63 (MFL 1-63)

Use Previous  
Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)



1. Serial No		2. Name		3. Cost Center Number		4. LWOP Hours				
036130		FLORES DANIEL		49 350		38F V 2 1 70				
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ
GS 04	2	\$ 4,355	03/17/63	GS 04	4	\$ 4,495	03/15/64			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS                      AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE						DATE				
<i>[Signature]</i>						31 Jan 1964				
PAY CHANGE NOTIFICATION										

DEC 24 1964  
 MAR 9 3 53 PM '64

Form 961 560 Obsolete Previous Edition (431)

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. PAY GRADE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LET
22	10	NUMERIC: 49350	ALPHABETIC: SAS	75013		1	MO DA YR	MO DA YR	MO DA YR
28. WTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO	34. SER
MO DA YR		1. CBC 2. FICA 3. NONE		CODE	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	CODE		CODE		NO. YES	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA	
CODE				CODE		CODE		CODE	
0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS 3 BREAK IN SERVICE MORE THAN 3 YRS				1 YES 2 NO		1 YES 2 NO		1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <b>POSTED</b>  <i>[Signature]</i> </div>									

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

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

SECRET  
(When Filled In)

RZP: 3 MAY 63

NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)							
036130		FLORES DANIEL							
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
REASSIGNMENT				05 09 63		REGULAR			
6 FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		3222 1000 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SPECIAL AFFAIRS STAFF RESEARCH BRANCH REPORTS, RECORDS, TRANSLATION SEC					WASH., D.C.				
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION			
TRANSLATOR				0702		D			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			0031.01		04 2		4250		
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE	
37		10		31350 SAS		75013			
24. DATE OF BIRTH		25. DATE OF GRADE		26. DATE OF LEE		27. SECURITY REF NO			
						EOD DATA			
28. NET PREFERENCE		29. SARP (COMP DATE)		30. LCRS (COMP DATE)		31. CAREER CATEGORY		32. FEELI / HEALTH INSURANCE	
33. PREVIOUS GOVERNMENT SERVICE DATA				34. LEAVE CAT		35. FEDERAL TAX DATA		36. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">12 May 1963 J.D.</p> </div>									

SECRET

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

AMPD 07/31/63

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE MO DA YE 07 21 63
6 FUNDS		7 COST CENTER NO (CHARGEABLE)	
<input checked="" type="checkbox"/> X	V TO V	V TO CF	8 CSC OR OTHER LEGAL AUTHORITY
	CF TO V	CF TO CF	4232 1000 1000
9 ORGANIZATIONAL DESIGNATIONS DDP/SAS		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE TRANSLATOR		12 POSITION NUMBER 0702	13 CAREER SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS 18, etc) GS	15 OCCUPATIONAL SERIES 1045:01	16 GRADE AND STEP 04	17 SALARY OR RATE
18 REMARKS			
<div data-bbox="954 1474 1253 1634" data-label="Text"> <p>POSTED</p> <p><i>[Signature]</i></p> </div>			
SIGNATURE OR OTHER AUTHENTICATION			



BWS: 13 MARCH 62

SECRET  
(When Filled In)

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

CLASSIFICATION

FITNESS REPORT

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

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C PERFORMANCE EVALUATION

**U-Unsatisfactory** Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

**M-Marginal** Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

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

**S-Strong** Performance is characterized by exceptional proficiency.

**O-Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

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

SPECIFIC DUTY NO. 1	SEE ATTACHED [ ] TELEPOUCH 51744 (in 3383966) dtd 13 Nov 79.	RATING LETTER
SPECIFIC DUTY NO. 2		RATING LETTER
SPECIFIC DUTY NO. 3		RATING LETTER
SPECIFIC DUTY NO. 4		RATING LETTER
SPECIFIC DUTY NO. 5		RATING LETTER
SPECIFIC DUTY NO. 6		RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

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

RATING LETTER

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

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

NOV 15 3 01 PM '79

MAIL ROOM

SEE ATTACHED.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
13 Nov 79	DCOS	Robert Berg /S/

2. BY EMPLOYEE

I HAVE <input type="checkbox"/> OR HAVE NOT <input checked="" type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.	DATE	SIGNATURE OF EMPLOYEE
	13 Nov 79	Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL		
SEE ATTACHED.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
13 Nov 79	COS	/S/

4. BY EMPLOYEE

I HAVE <input type="checkbox"/> OR HAVE NOT <input checked="" type="checkbox"/> ATTACHED A STATEMENT CONCERNING THE REVIEWER'S EVALUATION OF MY PERFORMANCE.	DATE	SIGNATURE OF EMPLOYEE
	13 Nov 79	Daniel Flores /S/

CLASSIFICATION

/20/ \*EYES ONLY\*

CONFIDENTIAL

FRP: . . . . .

**EYES ONLY**

DEFERRED TELEPOUCH

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

79 3383966

PAGE 001

3383966

TOR: 132307Z NOV 79

CONFIDENTIAL 132241Z NOV 79 DEFERRED TELEPOUCH

CITE [REDACTED]

TO: WASHINGTON.

FOR: C/LA/PERS

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

*Daniel Flores*

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

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

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

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

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

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

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

OVERALL RATING - STRONG.

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

CONFIDENTIAL



CONFIDENTIAL

DEFERRED TELEPOUCH

79 3383966

PAGE 002  
TOR: 132307Z NOV 79

3383966

4. SECTION C - NARRATIVE COMMENTS.

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

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

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

SUBJECT ALSO COOPERATED WITH ANOTHER GOVERNMENT AGENCY IN ATTEMPTING TO RE-ESTABLISH CONTACT WITH A ( )

CONFIDENTIAL

CONFIDENTIAL

DEFERRED TELEPOUCH

79 3381966

PAGE 003  
TOR: 132307Z NOV 79

3383966

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

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

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

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

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

5. COMMENTS BY REVIEWING OFFICER:

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

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

END OF MESSAGE

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

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**SECTION C NARRATIVE COMMENTS**

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

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

--CONTINUED--

**SECTION D CERTIFICATION AND COMMENTS**

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

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

**3. BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

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

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL
	C/LA/COG

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

CONFIDENTIAL

FITNESS REPORT

Daniel Flores

NARRATIVE COMMENTS

cont.

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

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

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

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

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

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CLASSIFICATION

**FITNESS REPORT**

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

<b>SECTION B</b>											
<b>QUALIFICATIONS UPDATE</b>											
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD 'YES' IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD 'NO' IN THE BOX AT RIGHT.											

<b>SECTION C</b>											
<b>PERFORMANCE EVALUATION</b>											
<b>U—Unsatisfactory</b>		Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.									
<b>M—Marginal</b>		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.									
<b>P—Proficient</b>		Performance is satisfactory. Desired results are being produced in the manner expected.									
<b>S—Strong</b>		Performance is characterized by exceptional proficiency.									
<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.									

**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).

<b>SPECIFIC DUTY NO. 1</b>	Conducts tutorial training in clandestine operational trade-craft skills for [redacted] as well as U.S. staff and contract personnel.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 2</b>	In collaboration with sponsoring Agency components prepares detailed training programs and schedules for the conduct of tailored tutorial and small-group training.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 3</b>	Evaluate trainee performance in each program and prepare final training reports, and as appropriate draft follow-up questionnaires for field evaluation of training effectiveness.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 4</b>	Participate in live problems and exercises as [redacted] and [redacted] as required and contribute to improvement in training materials and techniques.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 5</b>		<b>RATING LETTER</b>
<b>SPECIFIC DUTY NO. 6</b>		<b>RATING LETTER</b>

<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>	
Take into account everything about the employee which influences his effectiveness in his current position and his performance of specific duties. Productivity, conduct on job, cooperativeness, attendance, promptness, neatness, and professional appearance are factors. Rank on the basis of your knowledge of employee's overall performance during the rating period. Enter the letter in the rating box corresponding to the description which most closely reflects his level of performance.	
<b>RATING LETTER</b>	

SECRET  
CLASSIFICATION

**SECTION D NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain items which provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section D, use a separate sheet of paper.

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

(continued)

**SECTION E CERTIFICATION AND COMMENTS**

**1. BY SUPERVISOR**

<b>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</b>	<b>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</b>		
4 Months			
<b>DATE</b>	<b>OFFICIAL TITLE OF SUPERVISOR</b>	<b>TYPED OR PRINTED NAME AND SIGNATURE</b>	
17 January 1977	Chief, ALT Unit	Walter R. Cox <i>[Signature]</i>	

**2. BY EMPLOYEE**

<b>STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE</b>		<b>DATE</b>	<b>SIGNATURE OF EMPLOYEE</b>
<input type="checkbox"/> HAVE ATTACHED	<input type="checkbox"/> HAVE NOT ATTACHED	26 Jan 77	<i>[Signature]</i>

**3. BY REVIEWING OFFICIAL**

**COMMENTS OF REVIEWING OFFICIAL:**

I concur in the ratings on specific duties and on the overall rating of STRONG for Mr. Flores. Although he was assigned to this Unit for a short period of time, he was proving to be a well qualified operations instructor. His home Division requested his return in order to give him a responsible position for which he was well qualified, and he should do well on that assignment.

<b>DATE</b>	<b>OFFICIAL TITLE OF REVIEWING OFFICIAL</b>	
19/1/77	CHIEF, CERTIFIED	[redacted]

<b>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</b>	<b>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</b>		
<b>DATE</b>	<b>OFFICIAL TITLE OF SUPERVISOR</b>	<b>TYPED OR PRINTED NAME AND SIGNATURE</b>	

**4. BY EMPLOYEE**

<b>STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE</b>		<b>DATE</b>	<b>SIGNATURE OF EMPLOYEE</b>
<input type="checkbox"/> HAVE ATTACHED	<input type="checkbox"/> HAVE NOT ATTACHED		



14-00000

S E C R E T

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

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

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

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

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

S E C R E T

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION

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

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C PERFORMANCE EVALUATION

- U—Unsatisfactory** Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
- M—Marginal** Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
- P—Proficient** Performance is satisfactory. Desired results are being produced in the manner expected.
- S—Strong** Performance is characterized by exceptional proficiency.
- O—Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

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

SPECIFIC DUTY NO. 1 SEE ATTACHED [ ] (IN 1584998) dtd 18 Nov 78	RATING LETTER
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperation, personal appearance, habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most closely reflects his level of performance.

RATING LETTER

Handwritten initials/signature

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

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

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SEE ATTACHED.

MAN ROOM

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

Rating Officer Profile:

DATE

OFFICIAL TITLE OF SUPERVISOR

19 15 20 00 00  
TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

DCOS

Robert Berg /S/

2. BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

COS

Lawrence Sternfield /S/

4. BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

CLASSIFICATION

NO EYES ONLY

CONFIDENTIAL

FRP: . . . . .

EYES ONLY

DEFERRED TELEPOUCH

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

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PAGE 001  
TOW: 182031Z NOV 78

1584998

CONFIDENTIAL 172250Z NOV 78 DEFERRED TELEPOUCH

CITE [REDACTED]

*Per*

TO: WASHINGTON.

FOR: C/LA/PERS

*DAN FLORES*

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

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

2. THE FOLLOWING INFO IS KEYED TO FORM 45A, SECTION A:  
1. 03b130; 4. M; 5. GS-13; 6. DUG; 9. [REDACTED]  
10. CAREER; 11. ANNUAL; 12. 15 FEB-30 SEP 78.

3. SECTION B. PERFORMANCE EVALUTATION - SPECIFIC DUTIES:

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

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

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

4. COORDINATES SENSITIVE CE OPERATIONS RUN BY OTHER NVA/BLAZON AGENCIES WITH [REDACTED] RATING

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*4/*  
*9/*

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78 1524998

PAGE 002  
TOP: 182031Z NOV 78

1524998

LETTER -- S.

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

OVERALL PERFORMANCE -- S.

4. SECTION C - NARRATIVE COMMENTS

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

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

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

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

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PAGE 003  
TOR: 182031Z NOV 78

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

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

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

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

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

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

SUBJECT WELL DESERVES A RATING OF STRONG FOR HIS

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PAGE 004  
TOR: 182031Z NOV 78

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

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

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

END OF MESSAGE

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CLASSIFICATION

**FITNESS REPORT**

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

**SECTION B** **QUALIFICATIONS UPDATE**

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

**SECTION C** **PERFORMANCE EVALUATION**

**U—Unsatisfactory** Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

**M—Marginal** Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

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

**S—Strong** Performance is characterized by exceptional proficiency.

**O—Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

**SPECIFIC DUTIES**

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

<b>SPECIFIC DUTY NO. 1</b> Handle a sensitive and productive [redacted] in Cuban operations via TDY travel to meet, debrief, and prepare operational/intelligence reports.	<b>RATING LETTER</b>  O
<b>SPECIFIC DUTY NO. 2</b> Review incoming operational correspondence from Latin America on Cuban matters and ensure that prompt response and helpful guidance is provided.	<b>RATING LETTER</b>  S
<b>SPECIFIC DUTY NO. 3</b> Maintain a thorough familiarity with all Cuban activities in Latin America and our operations against them; carry out coordination with other components where appropriate.	<b>RATING LETTER</b>  S
<b>SPECIFIC DUTY NO. 4</b> Develop leads against the Cuban target by [redacted] and ultimately [redacted] etc., of [redacted] to obtain assessment data on the targets as well as use the leads in approaches to [redacted]	<b>RATING LETTER</b>  O
<b>SPECIFIC DUTY NO. 5</b> Work closely with the IA's of the section to ensure that they answer all required correspondence and to stimulate them to be creative and productive.	<b>RATING LETTER</b>  S
<b>SPECIFIC DUTY NO. 6</b>	<b>RATING LETTER</b>

**OVERALL PERFORMANCE IN CURRENT POSITION**

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

**RATING LETTER**  
  
S



**SECRET**  
CLASSIFICATION

**SECTION D NARRATIVE COMMENTS**

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

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

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

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

**SECTION E CERTIFICATION AND COMMENTS**

**1. BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
DATE	OFFICIAL TITLE OF SUPERVISOR
	C/LA/COG [redacted]

**2. BY EMPLOYEE**

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

**3. BY REVIEWING OFFICIAL**

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

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

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

**4. BY EMPLOYEE**

DATE	SIGNATURE OF EMPLOYEE
	[Signature]

CLASSIFICATION

S E C R E T

FITNESS REPORT

Daniel Flores

cont.

SECTION D

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

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

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

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

\* \* \*  
No. 3

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

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CLASSIFICATION

FITNESS REPORT								
SECTION A				GENERAL INFORMATION				
1. EMPLOYEE NUMBER 194737		2. NAME (Last, first, middle) Flores, Daniel		3. DATE OF BIRTH		4. SEX M	5. GRADE GS-12	6. SD D
7. OFFICIAL POSITION TITLE Ops Officer			8. OFF. DIV BR OF ASSIGNMENT DDO/LA/COG		9. CURRENT STATION Washington, D.C.		10. CODE (ch one) X	11. NOS OF
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT				
CAREER	RESERVE	CONTRACT	OTHER (Spec.)	TEMPORARY	X	ANNUAL	REASSIGNMENT	SPECIAL
13. REPORTING PERIOD (7/01-10-)				14. DATE REPORT DUE IN O.P.				
1 October 1974 - 30 June 1975				31 July 1975				
SECTION B QUALIFICATIONS UPDATE								
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.								
SECTION C PERFORMANCE EVALUATION								
<p><b>U—Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.</p> <p><b>M—Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.</p> <p><b>P—Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</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 Case Officer for COG's Latin America area responsible for operational support of LA field Stations Cuba programs.							RATING LETTER S	
SPECIFIC DUTY NO. 2 Case officer for [ ] sensitive [ ] operations.							RATING LETTER S	
SPECIFIC DUTY NO. 3 Develop leads to potential Cuban recruitment targets and personally interview prospective access agents.							RATING LETTER S	
SPECIFIC DUTY NO. 4 Supervisor for [ ] Intelligence Analyst							RATING LETTER 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	

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

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

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

As such, Mr. Flores assignment is

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

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

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
DATE	OFFICIAL TITLE OF SUPERVISOR
8 August 1975	ADC/LA/COG

2. BY EMPLOYEE	
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	8 Aug. 1975 <i>[Signature]</i>

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

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

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL
8 August 1975	AC/LA/COG

<input type="checkbox"/> I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	BY EMPLOYEE 8 August 1975 <i>[Signature]</i>
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CLASSIFICATION

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Continuation of Section D

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

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

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

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

Continuation of Section E

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

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Continuation of Section E

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

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

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

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CLASSIFICATION

FITNESS REPORT

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

SECTION B		QUALIFICATIONS UPDATE	
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.			

SECTION C		PERFORMANCE EVALUATION	
<u>U- Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.		
<u>M- Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.		
<u>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).

SPECIFIC DUTY NO. 1 Primary case officer for a sensitive [redacted]	RATING LETTER S
SPECIFIC DUTY NO. 2 Provide operational support and guidance for Cuban operations conducted by LA Division Stations.	RATING LETTER P
SPECIFIC DUTY NO. 3 Direct and supervise Intelligence Assistants assigned to specific areas of responsibilities.	RATING LETTER S
SPECIFIC DUTY NO. 4 Desk case officer for access agents and support assets in LA Division Stations' Cuban operations.	RATING LETTER S
SPECIFIC DUTY NO. 5 Search for leads in the U.S. for LA Division Cuban operations and personally debrief and exploit further exploitation.	RATING LETTER S
SPECIFIC DUTY NO. 6	RATING LETTER C

OVERALL PERFORMANCE IN CURRENT POSITION	
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	RATING LETTER S

CLASSIFICATION

12. IMPROV CL BY [signature]

CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

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

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

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

SECTION E

CERTIFICATION AND COMMENTS

(cont'd)

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
16 NOV 1974	LA/COG/OPS	[redacted]

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED <input type="checkbox"/>	6 Oct 1974	[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

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

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

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
16 NOV 74	DC/LA/COG	[redacted]

(cont'd)

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	6 Nov 1974	[Signature]

CLASSIFICATION



FITNESS REPORT - Daniel Flores

SECTION D (CONTINUED)

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

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

COMMENTS BY REVIEWING OFFICIAL (CONTINUED)

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

CONFIDENTIAL

<b>FITNESS REPORT</b>		NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
<b>SECTION A. GENERAL INFORMATION</b>					
1. EMPLOYEE NUMBER 194737	2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH	4. SEX M	5. GRADE & SD GS-12 D
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/Br 3		9. CURRENT STATION	
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30-MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> REASSIGNMENT		<input type="checkbox"/> SPECIAL
12. REPORTING PERIOD (From to) 31 May 73-4 March 74			13. DATE REPORT DUE IN O.P.		
<b>SECTION B. PERFORMANCE EVALUATION</b>					
<p><b>U - Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M - Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P - Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</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 Station officer responsible for operations against the MPCHEEK target					RATING LETTER S
SPECIFIC DUTY NO. 2 Direction of and support for an [redacted] and the [redacted]					RATING LETTER S
SPECIFIC DUTY NO. 3 Case officer responsible for a [redacted] team					RATING LETTER S
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					RATING LETTER S
Take into account everything about the employee as an individual as well as his performance in his current position and in performance of specific duties. Consider his job accomplishments, potential for growth or future, and particular limitations or talents. Based on your knowledge of employee as a whole and performance during the rating period, place the letter in the rating box corresponding to the employee which most closely reflects his level of performance.					

**SECTION C NARRATIVE COMMENTS**

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

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

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

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

(Continued)

**SECTION D CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

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

DATE: 4 Mar 74 SIGNATURE OF EMPLOYEE: /s/ Daniel Flores

2. BY SUPERVISOR

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

DATE: 4 Mar 74 OFFICIAL TITLE OF SUPERVISOR: DCOS TYPED OR PRINTED NAME AND SIGNATURE: /s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL:

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

(Continued)

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

CONFIDENTIAL

Continuation of Narrative Comments

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

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

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

SECRET

S E C R E T

Continuation of Comments of Reviewing Officer

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

SECRET

SECRET

CONFIDENTIAL

<b>FITNESS REPORT</b>		NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
<b>SECTION A GENERAL INFORMATION</b>					
1. EMPLOYEE NUMBER <b>036130</b>		2. NAME (last, first, middle) <b>Flores, Daniel</b>		3. DATE OF BIRTH [ ]	4. SEX <b>M</b>
5. GRADE <b>GS11</b>		6. SD <b>D</b>		7. OFFICIAL POSITION TITLE <b>Operations Officer</b>	
8. OFF/DIV/BR OF ASSIGNMENT <b>DDO/WH/3</b>		9. CURRENT STATION [ ]			
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30 MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL*	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to) <b>1 July 1972-31 May 73</b>		13. DATE REPORT DUE IN O.P. [ ]
<b>SECTION B PERFORMANCE EVALUATION</b>					
<p><b>U—Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M—Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P—Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S—Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O—Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 <b>Station officer responsible for operations against the MPCHEEK target.</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 <b>Handler for sensitive [ ]</b>					RATING LETTER <b>O</b>
SPECIFIC DUTY NO. 3 <b>Supervise principal agent</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 4 <b>Miscellaneous operational support activity, including direction of a [ ] team.</b>					RATING LETTER <b>S</b>
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, give the letter in the rating box corresponding to the statement which most accurately reflects the level of performance.					RATING LETTER <b>S</b>

CONFIDENTIAL

**SECTION C NARRATIVE COMMENTS**

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

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

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

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

**SECTION D CERTIFICATION AND COMMENTS**

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

DATE	SIGNATURE OF EMPLOYEE
28 June 1973	/s/ Daniel Flores

2. BY SUPERVISOR

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

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

3. BY REVIEWING OFFICIAL

**COMMENTS OF REVIEWING OFFICIAL**

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

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

CONFIDENTIAL

Section C continued.....

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

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

CONFIDENTIAL



SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						036130	
<b>SECTION A - GENERAL</b>							
1. NAME (Last) Flores (First) Daniel (Middle)			2. DATE OF BIRTH	3. SEX M	4. GRADE GS-11	5. SD D	
6. OFFICIAL POSITION TITLE Ops Officer				7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/3		8. CURRENT STATION	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER		<input type="checkbox"/> RESERVE		<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 August 1972				12. REPORTING PERIOD (From - to) 24 September 1971 - 30 June 1972			
<b>SECTION B - PERFORMANCE EVALUATION</b>							
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</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 Direction of and administrative support for principal agents whose efforts he directs [redacted] and [redacted]						RATING LETTER S	
SPECIFIC DUTY NO. 2 Coordinator of all Station operations against the [redacted] including management of the project covering this activity.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Case officer in charge of the Station's [redacted]						RATING LETTER P	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           EXEMPT FROM RECENT DECLASSIFICATION            OF E.O. 11652, 11652A &amp; 11652B            S 55(1) (C)            AUG 1998            IMPDET            (Various Responsibilities, Insert Code or Code)         </div>							
<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	

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

SECRET

(When Filled In)

**SECTION C NARRATIVE COMMENTS**

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

In the period of this report, Subject established himself and his family at this post and undertook the direction of the Station's operations against the [redacted] which had formerly been handled by an officer two grades senior to Subject. He has proved equal to the task. He learned his new assignment rapidly and adapted well to the handling of his cases through [redacted] agents, a security requirement of the [redacted] which can be frustrating for an aggressive officer with fluent Spanish such as Subject. However, he has shown maturity and superior handling ability in directing his assets against the [redacted] and particularly the [redacted]. His intimate knowledge of the [redacted] enabled him to plan secure contact with a [redacted] who at first appeared genuine. After thoroughly debriefing this individual, drawing upon his knowledge of the [redacted] Subject was able to recommend no continuing contact with him due to specific fabrications on the part of the [redacted].

He is careful in management of funds entrusted to him for his operations and provides required administrative and operational reports in a timely manner. There have been past comments on Subject's weakness in writing. He has worked hard on this, and the rating officer feels that he is now competently producing the reports required. Subject understands that this is an area that requires continuing attention for a growing professional.

/CONTINUED/

**SECTION D CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

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

DATE: 15 August 1972 SIGNATURE OF EMPLOYEE: /s/ Daniel Flores

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 10 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE: 15 August 1972 OFFICIAL TITLE OF SUPERVISOR: Deputy Chief of Station TYPED OR PRINTED NAME AND SIGNATURE: /s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL:

Subject has come up the hard way, both in pushing on to finish his education and in BKTRUST. As a result he is way under-graded for his maturity and for his operational contributions. That we have given Subject a major responsibility here (STPAGODA) attests to how much confidence we have in him and his ability. He is, of course, bi-lingual and mixes well with [redacted] an advantage he uses well. A good "street" operator, he still has a way to go in organizing his paper work and in relating to HQ needs.

DATE: 15 August 1972 OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief of Station TYPED OR PRINTED NAME AND SIGNATURE: /s/ Richard S. Welch

SECRET

SECTION C continued.....

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

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

SECRET  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
<b>SECTION A GENERAL</b>					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
Flores, Daniel				M	GS-10 D
6. OFFICIAL POSITION TITLE			7. OFFICER OF ASSIGNMENT		8. CURRENT STATION
Ops Officer			DDP/WH/3		Hqs
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
31 October 1971			1 May 1971 - 30 September 1971		
<b>SECTION B PERFORMANCE EVALUATION</b>					
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</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
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<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, energy/enthusiasm, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER

SECRET

SECTION C

NARRATIVE COMMENTS

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

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

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

SECTION D

CERTIFICATION AND COMMENTS

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

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SSN	
Flores, Daniel				M	GS-10	D	
6. OFFICIAL POSITION TITLE			7. OFF. OR. BR. OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/WH/3				
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 October 1970/30 April 1971			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</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	
Case Officer responsible for a Base project targetted against the						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Case Officer responsible for a sensitive technical operation including the selection of intelligence resulting from the operation.						O	
SPECIFIC DUTY NO. 3						RATING LETTER	
Development of new agent assets.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Preparation of dispatches, intelligence reports and other correspondence pertinent to his area of responsibility.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<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 C

NARRATIVE COMMENTS

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

There has been little ~~change~~ <sup>change</sup> Subject's performance since the submission of his last report covering the period through 30 September 1970.

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

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

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

SECTION D

CERTIFICATION AND COMMENTS

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

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

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

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

3. BY REVIEWING OFFICIAL  
COMMENTS OF REVIEWING OFFICIAL

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

(Continued)

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

SECRET

SECRET

Continuation of Comments by Reviewing Official

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

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

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

SECRET



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

TRAINING REPORT

Weapons Training/Defensive Driving Course No. 1/72

2-6 August 1971

Date

TRAINEE: FLORES, Daniel

OFFICE: WH

PURPOSE AND SCOPE OF COURSE:

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

ACHIEVEMENT RECORD:

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

FOR THE DIRECTOR OF TRAINING:



Chief, Special Activities Branch

9 August 1971

Date

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

Certification of Handgun Qualification

9 August 1971

Date

Mr.  and  
(Instructor SAB Staff, OTG, ISOLATION)  
Identity

Trainee FLORES, Daniel, WH  
Identity

on 2-6 August, Mr. Flores was given 28 hours  
date identity

instruction in firing techniques, weapon care and safe weapons handling

procedures. Subsequently Mr. Flores fired the handgun qualifica-  
identity  
tion course with a Automatic (Cal. - 9mm) achieving a score of 258  
Revolver (Cal. - 38) 261 out  
weapon

of a possible 300. Mr. Flores demonstrated that he  
identity

had absorbed the instruction on safe weapon handling and that he exercises

due care and discretion. Accordingly Mr. Flores is certified as  
identity

qualified with the Automatic (Cal. - 9mm)  
Revolver (Cal. - 38) as of this date.  
weapon

Signed

SAB/OTG  
Instructor Identity

SECRET

Continuation of Narrative Comments

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

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

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

Continuation of Comments of Reviewing Official

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

SECRET

Classified by (S) (M) (RM)

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

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

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

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

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
30 Oct. 1970	/s/ Daniel Flores	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
30 Oct. 1970		[redacted] /s/
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I agree with the ratings. This has been a good year for Subject, one which has given him a rather unusual opportunity to learn many facets of the work of this organization and one in which he has shown a very satisfactory level of accomplishment. Shortly after his arrival in [redacted] he became, for a short time, the Acting Chief of Base, and through that period and the ensuing change in Base Chiefs, he showed a professional maturity we felt to be exceptional for a young officer on his first tour. He has worked hard and intensely for improvement in the quantity and quality of his operational production, and he has collaborated very effectively with the other officers (Continued)		
DATE	SIGNATURE	
30 Oct. 1970	[redacted]	[redacted]

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
<b>SECTION A GENERAL</b>					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. DD
Flores, Daniel		4 Aug 1935	M	GS-10	D
6. OFFICIAL POSITION TITLE			7. OFFICER OF ASSIGNMENT		
Ops Officer			DDP/WH/Branch 3		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/>	CAREER	<input type="checkbox"/>	RESERVE	<input type="checkbox"/>	TEMPORARY
<input type="checkbox"/>	CAREER-PROVISIONAL (See instructions - Section C)		<input checked="" type="checkbox"/>	ANNUAL	
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 October 1969 - 30 September 1970		
<b>SECTION B PERFORMANCE EVALUATION</b>					
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</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
Case Officer responsible for Base project targeted against the [redacted]					S
SPECIFIC DUTY NO. 2					RATING LETTER
Case Officer responsible for a sensitive [redacted] operation including the selection of the intelligence resulting from the operation					S
SPECIFIC DUTY NO. 3					RATING LETTER
The development of new agent assets and operations					P
SPECIFIC DUTY NO. 4					RATING LETTER
Preparation of dispatches, intelligence reports and other correspondence pertinent to the operation in his area of responsibility					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<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, cooperation, personal conduct, habits and general 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**

SECRET

Section C

Narrative Comments, Cont'd

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

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

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

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

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

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

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

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

RYBAT  
SECRET

**SECRET**  
(When Filled In)

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

**SECRET**

(When Filled In)

**SECTION C**

**NARRATIVE COMMENTS**

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

OCT 28 10 40 AM '69

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

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

...Continued...

**SECTION D**

**CERTIFICATION AND COMMENTS**

<b>1. BY EMPLOYEE</b>		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2 October 1969	/s/ Daniel Flores	
<b>2. BY SUPERVISOR</b>		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
2 October 1969	Chief of Base	/s/ [ ]
<b>3. BY REVIEWING OFFICIAL</b>		
COMMENTS OF REVIEWING OFFICIAL		
This Officer has made a most impressive beginning in [ ] He has in a few short months adapted to new tasks and a new environment with mature, if modest, assurance and a professional approach which speaks highly for the training and experience he has had. He has taken on, in the absence of the Chief of Base and other senior officers, responsibilities uncommon to an officer of his junior position, and he has handled them in a superior fashion. He and his wife have entered into their representational responsibilities with great enthusiasm and effectiveness, and I predict a most highly successful tour for him in [ ] Because he has shown a personal and professional competence beyond his grade level, it is strongly recommended that he be considered for promotion to GS-10 at the earliest opportunity.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
16 October 1969	Chief of Station	/s/ [ ]

**SECRET**



**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130 ✓	
<b>SECTION A GENERAL</b>					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Flores Daniel			M	GS-08	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/RR OF ASSIGNMENT	8. CURRENT STATION	
OPH Officer			DDP/WH/4	HQS	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To)		
			19 September 1968 - 30 April 1969		
<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
Operations officer handling the Headquarters direction and support of FI projects and activities.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Preparation of operational correspondence, dispatches, cables and special memoranda.					P
SPECIFIC DUTY NO. 3					RATING LETTER
Coordination of operational matters with other components and desks.					P
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					P

13 MAY 1969  
*[Signature]*

SECRET

(When Filled In)

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

SECRET

STATE DEPARTMENT OF DEFENSE

1. NAME (LAST, FIRST, MIDDLE)	GRADE	OFFICE	REPORTING PERIOD	EMPLOYEE SERIAL NO.
FLORES, Daniel	07		30 November 1968 - 31 October 1968	036130

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

Detailed evaluations of his performance in each phase are contained in his Official Personnel Folder. Definition of performance letter corresponds to that in Section B, Fitness Report Form 40 (4-64).

OVERALL PERFORMANCE IN INTEGRATED PROGRAM **Proficient**

3. COMMENTS AND PERTINENT OBSERVATIONS.

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

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

27 NOV 1968  
*[Signature]*

25 November 1968

*[Signature]*  
John Gerry

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				030130	
<b>SECTION A GENERAL</b>					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
FLORES, Daniel			M	GS-05	D
8. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION		
Intel Clerk			DDP/WH/COG WASH., D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 February 1967-15 June 1967		
<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 Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assembles lead files, DEAS collates data on hand and additions information received in preparation for target analysis.					RATING LETTER S
SPECIFIC DUTY NO. 2 Screens Cuban [redacted] for information of value in the branch counter espionage-counter intelligence records and for operational data.					RATING LETTER S
SPECIFIC DUTY NO. 3 Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.					RATING LETTER P
SPECIFIC DUTY NO. 4 Prepares translations from Spanish to English and English to Spanish of operational correspondence.					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<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

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

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

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

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

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

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

BY SUPERVISOR

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

DATE: OFFICIAL TITLE OF SUPERVISOR: DC/WH/COG/CICS TYPED OR PRINTED NAME AND SIGNATURE: Carl Trettin

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL:

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

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

SECRET

SECRET  
(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER	
			036130	
<b>SECTION A GENERAL</b>				
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
Flores Daniel			M	GS-05 D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/RR OF ASSIGNMENT		8. CURRENT STATION
Intel Clerk		DDP/WH/COG		WASH., D.C.
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT	
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):	
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)	
			1 April 66 - 31 Jan 67	
<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
Conducts liaison between two contract agents and WH/COG/CICS				P
SPECIFIC DUTY NO. 2				RATING LETTER
Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.				P
SPECIFIC DUTY NO. 3				RATING LETTER
Prepares translations from Spanish to English and from English to Spanish				S
SPECIFIC DUTY NO. 4				RATING LETTER
Prepares material for input for the [ ] Program				P
SPECIFIC DUTY NO. 5				RATING LETTER
SPECIFIC DUTY NO. 6				RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER
				P

1 FEB 1967

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

JAN 30 10 48 AM '67

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

MAN ROOM

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR

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

5 months

DATE OFFICIAL TITLE OF SUPERVISOR TYP

26 January 67

Chief, WH/COG/CICS

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

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

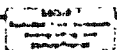
DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYP

30 Jan 67

Deputy Chief, WH/COG

**SECRET**  
(When Filled In)

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





SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

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

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

SECTION D

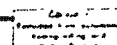
CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
30 November 1966	<i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
11 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPE OR PRINTED NAME AND SIGNATURE
30 November 66	DC/WH/COG/CICS	<i>[Signature]</i> John A. Castoro
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Mr. Flores has worked closely under my direct supervision in the handling of the two contract employees listed under Specific Duty No. 1 and 2. I concur with the rating of Mr. Castoro and can only emphasize that I believe Mr. Flores will make a good Case Officer and I plan to recommend him for CT status as soon as he is able to be with us full time.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	
30 Nov 1966	Chief, WH/COG/CICS	

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
<b>SECTION A GENERAL</b>					
1. NAME <i>(Last) (First) (Middle)</i> <b>FLORES, Daniel</b>		2. DATE OF BIRTH	3. SEA <b>N</b>	4. GRADE <b>GS-05</b>	5. SD <b>D</b>
6. OFFICIAL POSITION TITLE <b>Intel Clerk</b>		7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/WH/COG</b>		8. CURRENT STATION <b>WASH., D.C.</b>	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section E.)			<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) <b>Recommendation for Promotion</b>		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) <b>1 February 1967-15 June 1967</b>		
<b>SECTION B PERFORMANCE EVALUATION</b>					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 <b>Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assembles lead files, collates data on hand and additions information received in preparation for target analysis.</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 <b>Screens [redacted] for information of value in the branch counter-espionage-counter intelligence records and for operational data.</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 3 <b>Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.</b>					RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4 <b>Prepares translations from Spanish to English and English to Spanish of operational correspondence.</b>					RATING LETTER <b>P</b>
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 <b>S</b>



SECRET

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

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

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

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

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

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

2. BY SUPERVISOR

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

DATE: OFFICIAL TITLE OF SUPERVISOR: DC/WH/COG/CICS TYPE OR PRINTED NAME AND SIGNATURE: Carl Trettin

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

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

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

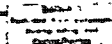
SECRET

**SECRET**

*(When Filled In)*

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME <b>FLORES, Daniel</b>			2. DATE OF BIRTH	3. SEX <b>M</b>	4. GRADE <b>GS-05</b>	5. SD <b>D</b>	
6. OFFICIAL POSITION TITLE <b>Intelligence Asst.</b>			7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/SAS</b>		8. CURRENT STATION <b>Washington D.C.</b>		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> SPECIAL (Specify):		REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P. <b>30 April 1965</b>			12. REPORTING PERIOD (From- to-) <b>1 January 1964 - 31 March 1965</b>				
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1		Served as interpreter for WH/SA counterintelligence operations officers and Office of Communications officers in training and briefing agents					RATING LETTER
		DE62					S
SPECIFIC DUTY NO. 2		Assisted in the debriefing of a Cuban intelligence service defector.					RATING LETTER
		DE32					P
SPECIFIC DUTY NO. 3		Translated and participated in the preparation of agent [ ] and [ ]					RATING LETTER
		DB63					P
SPECIFIC DUTY NO. 4		Performed traces and research relating to counterintelligence operations and activities.					RATING LETTER
		DC30					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	

13 APR 1965



SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

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

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

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

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

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

SECTION D CERTIFICATION AND COMMENTS

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

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

2. BY SUPERVISOR MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 15 months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION: [redacted]

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

3. BY REVIEWING OFFICIAL COMMENTS OF REVIEWING OFFICIAL

Concur.

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

SECRET

SECRET

- 2 -

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

Mr. Flores does not hold a supervisory position.

SECRET

**SECRET**  
(When Filled In)

<b>FITNESS REPORT</b>				EMPLOYEE SERIAL NUMBER <b>036130</b>	
<b>SECTION A GENERAL</b>					
1. NAME (Last) (First) (Middle) <b>FLORES Daniel</b>			2. DATE OF BIRTH	3. SEX <b>Male</b>	4. GRADE 5. SO <b>GS-4 D</b>
6. OFFICIAL POSITION TITLE <b>Translator</b>			7. OFF. DIV./RR OF ASSIGNMENT <b>DDP/S.A.S.</b>	8. CURRENT STATION <b>Washington, D.C.</b>	
9. CHECK (X) TYPE OF APPOINTMENT <input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			10. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input checked="" type="checkbox"/> SPECIAL (Specify): <b>Promotion Recommendation</b>		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) <b>10 June 1963 to 6 December 1963</b>		
<b>SECTION B PERFORMANCE EVALUATION</b>					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 <b>Translates material from Spanish to English and vice-versa. Translates agent messages.</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 <b>Performs name traces, analyses, extracts and summarizes obtained information.</b>					RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3 <b>Prepares and initiates requests for operational clearances.</b>					RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4 <b>Writes and prepares dispatches, cables and memoranda.</b>					RATING LETTER <b>A</b>
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 pertinent limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER <b>P</b>
<b>30 DEC 1963</b>					

**SECRET**

(When Filled In)

**SECTION C NARRATIVE COMMENTS**

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

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

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

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

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

**SECTION D CERTIFICATION AND COMMENTS**

**1. BY EMPLOYEE**

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

<small>DATE</small> 17 Dec 1963	<small>SIGNATURE OF EMPLOYEE</small> Daniel Flores <i>Daniel Flores</i>
------------------------------------	--

**2. BY SUPERVISOR**

<small>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</small> 3 Months	<small>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</small>
--	--

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

**3. BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

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

Attached is a formal recommendation.

<small>DATE</small> 17 Dec 63	<small>OFFICIAL TITLE OF REVIEWING OFFICIAL</small> CHIEF, SAS/INTL	<small>TYPED OR PRINTED NAME AND SIGNATURE</small>
----------------------------------	--	--





SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

APR 23 4 13 PM '63

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

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

SECTION D

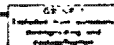
CERTIFICATION AND COMMENTS

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

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					030130	
<b>SECTION A GENERAL</b>						
1. NAME (Last) (First) (Middle) <b>FLORES, Daniel</b>			2. DATE OF BIRTH	3. SEX <b>M</b>	4. GRADE <b>GS-4</b>	5. SD <b>D</b>
6. OFFICIAL POSITION TITLE <b>File Clerk</b>			7. OFF/DIV/BR OF ASSIGNMENT <b>OPGER/RII/RB</b>		8. CURRENT STATION <b>Idgra.</b>	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> INITIAL			REASSIGNMENT SUPERVISOR
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL			REASSIGNMENT EMPLOYER
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. <b>12 January 1963</b>			12. REPORTING PERIOD (From - to) <b>12 March 1962 - 12 December 1962</b>			
<b>SECTION B PERFORMANCE EVALUATION</b>						
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
<b>SPECIFIC DUTIES</b>						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).						
SPECIFIC DUTY NO. 1						RATING LETTER
Performs name traces of personal and impersonal subjects in the RI/Index.						<b>S</b>
SPECIFIC DUTY NO. 2						RATING LETTER
Fulfills daily and weekly requirements of maintenance duties; e.g., filing, purging, auditing, and screening of index cards.						<b>P</b>
SPECIFIC DUTY NO. 3						RATING LETTER
SPECIFIC DUTY NO. 4						RATING LETTER
SPECIFIC DUTY NO. 5						RATING LETTER
SPECIFIC DUTY NO. 6						RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>						
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER
						<b>P</b>



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>From the outset Mr. Flores has shown many characteristics of an above-average employee. His initial training in the intricacies of his duty assignment was marked by a high degree of application, interest, and achievement. Since that time Mr. Flores has proven himself a conscientious and responsible employee, one whose work record is distinguished by a high calibre of quality and quantity.</p> <p>Because of his fine record, Mr. Flores was chosen one of the three area specialists for this section. He specializes in the [ ] area and his work is characterized by exceptional proficiency.</p> <p>At present Mr. Flores is registered at American University as a sophomore. Inasmuch as he has exhibited both potentiality and strong working habits, I recommend that Mr. Flores be given the Professional Battery Test at the earliest opportunity.</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		
3 January 1963	[Signature]		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
7 months	[ ]		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYP	[ ]
3 January 1963	Deputy Chief, RID/IN (R/S)		
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
I fully concur in the above evaluation.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED	[ ]
3 January 1963	Chief, RID/Index		

SECRET

SECRET

(When Filled In)

TRAINING EVALUATION--CLERICAL INDUCTION

SECTION I IDENTIFYING INFORMATION

NAME OF STUDENT <b>FLORES, Daniel</b>		SEX <b>M</b>	DATES OF ATTENDANCE <b>19-23 March 1962</b>
DATE OF BIRTH	FOB DATE <b>12 March 1962</b>	TITLE AND GRADE <b>File Clerk GS-4</b>	

SECTION II CHARACTERISTICS OF THE COURSE

Each course subject is taught daily for a 5-day period. Students who do not meet Agency standards in shorthand and/or typewriting within this 3-day period receive further instruction in an attempt to meet the established qualifications. The second week of geography instruction is given to students who have not been assigned to their positions. It is possible that not all students will be assigned to every course subject.

SECTION III OBJECTIVES

To meet the typewriting criterion based on the scale on the reverse of this page. (For qualification, students must meet this requirement once.)  
 To take dictation at 80 words a minute for 3 minutes and to transcribe with 5 or fewer errors in not more than 20 minutes. (For qualification, students must meet this requirement once.)  
 To recognize errors in grammar and in punctuation and capitalization.  
 To study the politics and the geography of countries of Europe and Asia. (These continents are covered in alternate weeks.)  
 To receive instruction in typing of reproduction masters, making erasures, caring for the typewriter, and utilizing typing shortcuts.  
 To become familiar with the system of filing as outlined in the Agency's "Handbook for Subject Filing."

SECTION IV QUALIFICATION IN SKILLS

COURSE PERFORMANCE				QUALIFICATION		NOT QUALIFIED
				IN COURSE	AT 100	
TYPENRITING	WPM <b>44</b>	ERRORS <b>15</b>	RET <b>29</b>			X
SHORTHAND	WPM	ERRORS				

SECTION V RATINGS

Agency samplings of students' ratings indicate the percentage distribution as noted below. This trainee's rating is marked by the asterisk.

SUBJECT	POOR	FAIR	SATISFACTORY	EXCELLENT
GRAMMAR	4%	16% *	51%	27%
PUNCTUATION AND CAPITALIZATION	20% *	2%	41%	12%

EXCELLENT - - - thorough knowledge of material presented and above-average performance in meeting course goals.  
 SATISFACTORY - - average knowledge of material presented and adequate performance in meeting course goals.  
 FAIR - - - - - borderline knowledge of material presented and limited performance in meeting course goals.  
 POOR - - - - - inadequate knowledge of material presented and unsatisfactory performance in meeting course goals.

SECTION VI FAMILIARIZATION LECTURES

<input checked="" type="checkbox"/> GEOGRAPHY OF EUROPE	<input type="checkbox"/> GEOGRAPHY OF ASIA	<input checked="" type="checkbox"/> AGENCY FILING SYSTEM	<input checked="" type="checkbox"/> OFFICE PRACTICE
---	--	--	---

SECTION VII COMMENTS

This student was assigned to the class in typewriting at his own request. Because it is not necessary for an individual whose job title is File Clerk to meet Agency standards in typewriting, he was released from training when his final processing was completed.

CAUTION: COMMENTS ON REVERSE SIDE  OVER

FOR THE DIRECTOR OF TRAINING:

SIGNATURE OF CHIEF, CLERICAL INDUCTION TRAINING

[Signature Box]

[Signature Box]

**SECRET**

*(When Filled In)*

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

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

SECRET  
(When Filled In)

REPORT OF TEST RESULTS (CLERICAL SKILLS)

NAME FLORES, Daniel (NMI)	TITLE AND GRADE File Clerk GS-4	DATE OF BIRTH <input type="text"/>
DATE 14 March 1962	PERSONNEL OFFICER - IAS	

AGENCY STANDARDS

**TYPEWRITING** The typewriting criterion is based on the scale on the reverse of this page.

**SHORTHAND** Dictation at 80 words a minute for three minutes and the transcription of the dictated material with five or fewer errors in not more than twenty minutes.

EXAMINEE'S RATINGS

TYPEWRITING: WAM 43 Errors 14 Net 29 Qualified: Yes  No

SHORTHAND: WAM  Errors  Qualified: Yes  No

REMARKS: Training in typewriting recommended if he so desires. It is not necessary for his job title.

\_\_\_\_\_  
CHIEF, CLERICAL INSTRUCTION TRAINING

SECRET

**CONFIDENTIAL**  
(When Filled In)

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

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

NAME <b>FIOROS, Daniel (M)</b>	GRADE AND POSITION <b>GS-11 File Clerk</b>	PERSONNEL OFFICER <b>TAS</b>
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TEST RESULTS ARE AN INTEGRAL PART OF THE FACT FINDING PHASE OF MOST PERSONNEL OPERATIONS. EVALUATION OF THESE MEASUREMENTS IN RELATION TO OTHER FACTUAL MATERIAL IN THE PERSONNEL RECORD PROVIDES ONE OF THE BASIS FOR THE SELECTION AND PLACEMENT OF APPLICANTS AND FOR COUNSELING WITH NEW EMPLOYEES. HOWEVER, THE DECISION AS TO WHETHER AN INDIVIDUAL CAN AND WILL PERFORM THE DUTIES OF A SPECIFIC JOB MUST REST ON THE JUDGMENT OF THE RECRUITER OR PLACEMENT OFFICER, WHO CONSIDERS ALL ASPECTS OF THE INDIVIDUAL'S ABILITY, BACKGROUND, AND PERSONALITY IN RELATION TO THE REQUIREMENTS OF THE AGENCY.

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

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

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

NAME OF TEST	VERY LOW		LOW		AVERAGE		HIGH		VERY HIGH	
	25	50	75	100	125	150	175	90	55	25
CLERICAL SPEED AND ACCURACY								✓		
SPELLING								✓		
SENTENCES					✓					
NUMERICAL ABILITY							✓			
ABSTRACT REASONING							✓			
VERBAL REASONING					✓					

REMARKS:

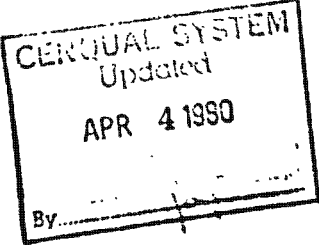

Mr. Fioros should be referred for P&TB, preferably while he is still in the I&S.

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



CONFIDENTIAL (When Filled In)

A-11A

CERTIFICATION OF LANGUAGE PROFICIENCY IN <u>Spanish A</u>					DATE PREPARED <u>4-1-80</u>	
SSN <u>41610 4262310</u>		NAME (Last-First-NC) <u>Flores, Daniel</u>		DATE OF BIRTH YEAR MONTH DAY		DIVISION <u>LA</u>
TYPE CHANGE <u>C</u>		LAW CODE <u>PL18</u>		READING* <u>+</u>	SPEAKING* <u>5</u>	UNDERSTANDING* <u>5</u>
DATE TESTED <u>80 2 20</u>		TYPE TEST <u>N</u>		*SEE BACK FOR PROFICIENCY LEVEL DEFINITIONS		
REMARKS <u>Outside Test.</u>						
				 CHIEF OF TESTING'S TEST NUMBER <u>42001</u>		
				By: _____		

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

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

TO BE COMPLETED BY EMPLOYEE

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

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

Spouse - 43  
Daughter - 5

14. PERSONAL INTEREST FACTORS THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

Child's schooling

15. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (use special note on transmittal form).

Liaison Officer in charge of an  man unit.

16. TRAINING DESIRED  
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

Training in a third language.  
Additional management training offered either by the Agency or by a private institution. Consideration for an appointment to a War College.

SECRET

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

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

48. INDICATE IF YOU SPECIFY TO EXTEND YOUR CURRENT TOUR BY [redacted] IS APPROPRIATE. YOU MUST INCLUDE AT LEAST ONE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES, EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR. \*Please see 6A

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

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

TO BE COMPLETED BY FIELD STATION

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

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

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

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

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

FOR USE BY CAREER SERVICE

9. APPROVED ASSIGNMENT

10. EMPLOYEE NOTIFIED BY \_\_\_\_\_ DATE \_\_\_\_\_  
CABLE NO. \_\_\_\_\_ DATE \_\_\_\_\_

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

SECRET

SECRET

CA Continued. . .

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

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

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

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

SECRET

C 10

ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

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

SERIAL NO. 1-6	NAME		
	LAST	FIRST	MIDDLE
036130	Flores	Daniel	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Omp only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

REMARKS

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

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

*to turn to [unclear]  
by 16 Jan*

CONFIDENTIAL  
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

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

MEMORANDUM OF UNDERSTANDING

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

DANIEL FLORES  
NAME  
(Please Print)

*Daniel Flores*  
SIGNATURE

Jan 30, 1978  
DATE

FORM 3661  
5-74

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

CONFIDENTIAL  
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

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

MEMORANDUM OF UNDERSTANDING

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

Daniel Flores  
NAME  
(Please Print)

*Daniel Flores*  
SIGNATURE

14 Nov. 1977

FORM 3661  
5-74

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

SECRET  
(When Filled In)

### SERVICE ABROAD AGREEMENT

#### I. GENERAL

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

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

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

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

NAME OF EMPLOYEE <b>Daniel Flores</b>	SO <b>D</b>
--	----------------

#### II. TOUR OF DUTY ABROAD

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

#### III. PERMANENT PLACE OF RESIDENCE

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

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE SERVICE AGREEMENT, YOU WILL BE PROMPTED BY HR 22 (3) NORMALLY INDICATE THE PLACE WHERE YOU PREVIOUSLY RESIDED IN THE UNITED STATES, THE TERRITORIES OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PREVIOUS ASSIGNMENT TO A POST ABROAD. YOU MAY ALSO INDICATE THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU HAVE BEEN CONTACTED BY THE PERSONNEL OFFICIALS OF THE POST TO WHICH YOU ARE ASSIGNING AND THAT YOU HAVE BEEN ADVISED THAT YOU WILL BE PERMANENTLY ASSIGNED TO THAT POST. IF YOU HAVE BEEN CONTACTED BY THE PERSONNEL OFFICIALS OF THE POST TO WHICH YOU ARE ASSIGNING AND THAT YOU HAVE BEEN ADVISED THAT YOU WILL BE PERMANENTLY ASSIGNED TO THAT POST, YOU SHOULD INDICATE THE PLACE WHERE YOU PREVIOUSLY RESIDED IN THE UNITED STATES, THE TERRITORIES OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PREVIOUS ASSIGNMENT TO A POST ABROAD.

SECRET  
(When Filled In)

3. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS  <div style="border: 1px solid black; width: 200px; height: 20px; margin: 5px 0;"></div> <i>VIENNA, VIRGINIA 22180</i>		4. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3) FULL ADDRESS  	
APPROVED		CONCUR	
DEPUTY DIRECTOR  		DATE  	
APPROVED <div style="border: 1px solid black; width: 150px; height: 30px; margin: 5px 0;"></div>		APPROVED 	
DATE <i>11/9/78</i>		DIRECTOR OF PERSONNEL  	
		DATE  	

IV. HOME LEAVE POINT

7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.
8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-30B(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.

9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS  <i>PORTLAND, OREGON</i>		10. DESIGNATION PER ITEM 8 ABOVE. FULL ADDRESS  	
APPROVED		CONCUR	
DEPUTY DIRECTOR  		DATE  	
RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT <i>IN-LAWS</i>		APPROVED 	
APPROVED <div style="border: 1px solid black; width: 150px; height: 30px; margin: 5px 0;"></div>		APPROVED 	
DATE <i>11/9/78</i>		DIRECTOR OF PERSONNEL  	
		DATE  	

EMPLOYEE CERTIFICATION

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

*[Handwritten Signature]* *[Handwritten Signature]*





**ADMINISTRATIVE  
Internal Use Only**

**REPORT OF SERVICE ABROAD**

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

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

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

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

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

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

REMARKS

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

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

ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

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

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 50, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 2 - CORRECTION 3 - CANCELLATION				40-42
04	12	77	04	15	77		2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

REMARKS

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

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

CONFIDENTIAL  
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

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

GENERAL

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

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

2. MEMBERS OF FAMILY

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

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

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

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

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

NAME	DATE OF BIRTH	RELATIONSHIP
<b>N/A</b>		

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

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

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

YES	
NO	<b>X</b>

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)

YES	
NO	<b>X</b>

YES THIS INDIVIDUAL KNOWS THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.)

YES	
NO	<b>X</b>

The persons named in item 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

**CONFIDENTIAL**

*(When filled in)*

**5. VOLUNTARY ENTRIES**

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

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

**Riggs National Bank Joint account: Daniel and/or Flores**

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

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

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

**At home. New is being prepared.**

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  YES  NO. (If "Yes" give name(s) and address) **Mr. and Mrs.**

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

**6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS**

*(Empty space for additional data)*

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

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

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

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

SIGNED AT: *Daniel Flores* DATE: *Dec 30 1977* SIGNATURE

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

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

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

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

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

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

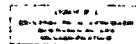
<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER ( <i>Specify</i> )	

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

REMARKS

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

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



**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

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

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

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

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

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

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

REMARKS

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

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

ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ASSAID

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

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

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

TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TOY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39
10	28	77	11	03	77		2		
									WESTERN HEMISPHERE 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

REMARKS

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

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



ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

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

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION


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

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

PREPARED BY	APPROVED AND CERTIFIED BY	DATE	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

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

CONFIDENTIAL

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

FORM 3687 OBSOLETE PREVIOUS EDITIONS

CONFIDENTIAL

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

CONFIDENTIAL

OFFICE OF TECHNICAL SERVICES

BEHAVIORAL ACTIVITIES BRANCH

[Redacted]

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

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

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

[Redacted]

OIS/Training Branch

E2 IMPDET CL BY 019432

CONFIDENTIAL

S-E-C-R-E-T

TRAINING REPORT/CERTIFICATION OF HANDGUN QUALIFICATION

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

STUDENT: FLORES, Daniel OFFICE: IA SD: D

PURPOSE AND SCOPE OF COURSE:

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

PERFORMANCE RECORD:

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

HANDGUN QUALIFICATION:

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

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

out of a possible 300.

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

FOR THE DIRECTOR OF TRAINING:

[redacted]  
Chief, Special Activities Branch/OTD  
[redacted]

9/26/77  
Date

S-E-C-R-E-T

E2 IMPDET  
CL by 056382

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

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

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

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATED BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
2	0	16	1	0	16	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2				120

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

DOCUMENT IDENTIFICATION NO. BPC 14-1-77	DOCUMENT DATE/PERIOD 1. 16, 16, 25, 30 Sept, 77
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REMARKS

PREPARED BY [Signature]	REPORT ASSISTANT OR CONTROL DOCUMENT	DATE 10/10	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	SIGNATURE [Signature]
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE  
Internal Use Only**

**REPORT OF SERVICE ABROAD**

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

SERIAL NO.

NAME

1-6  
056150

LAST

FIRST

MIDDLE

(Print)

7-28

Flora

David

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		ARRA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
26-28	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
2	1	77	0	1	77		2		W 11	1 1

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

DOCUMENT IDENTIFICATION NO.

LA-10-77

DOCUMENT DATE/PERIOD

1 Dec 76 to 30 Sept 77

REMARKS

PREPARED BY

REPORT ANNOTATED ON CONTROL DOCUMENT

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

DCM  
C B L DIVISION, CTDD.  
C B F DIVISION

DATE

21.2.77

SIGNATURE

*[Signature]*

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

**ADMINISTRATIVE  
Internal Use Only**

**REPORT OF SERVICE ABROAD**

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

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

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

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

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

*per. Jaque 5467*

**SOURCE DOCUMENT AND CERTIFICATION**

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

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

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

ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

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

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

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

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



ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

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

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (O/P ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 33, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
03	03	77	03	05	77	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		WESTERN HEMISPHERE	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

REMARKS

PREPARED BY	REPORT IDENTIFIED BY	ADDS DATA CERTIFIED CORRECTLY BASED UPON SOURCE DOCUMENT LISTED
<input checked="" type="checkbox"/> OPI DIVISION, C-100	DATE <u>3/25/77</u>	

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

CONFIDENTIAL  
(When Filled In)

### RESIDENCE AND DEPENDENCY REPORT

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

#### GENERAL

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

1. MARITAL STATUS (Check one)

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

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

IF DIVORCED, PLACE OF DIVORCE DECREE: \_\_\_\_\_ DATE OF DECREE: \_\_\_\_\_

2. MEMBERS OF FAMILY

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

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

**Mr. \_\_\_\_\_ - Brother-in-law**

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

NAME	DATE OF BIRTH	RELATIONSHIP
_____	_____	_____

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

NAME (or first name) **Mr. \_\_\_\_\_** RELATIONSHIP **Brother-in-law**

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

5. SIGNATURE AND DATE OF EMPLOYEE

NAME (Last, First, Middle) \_\_\_\_\_

ADDRESS (No. Street, City, State, Zip Code) \_\_\_\_\_

DATE \_\_\_\_\_

IF YOU ARE NOT A MEMBER OF THE U.S. ARMY, NAVY, AIR FORCE, OR MARINE CORPS, YOU MUST REGISTER AS AN EMERGENCY CONTACT PERSON AT THE ADDRESS OF YOUR HOME OR OTHER PLACE OF RESIDENCE IN THE U.S. (SEE HRP 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS).

\_\_\_\_\_ = Spouse

\_\_\_\_\_

\_\_\_\_\_

The person named in this report shall be notified in case of emergency. If your notification is not to be made, please advise the appropriate authority.

CONFIDENTIAL

CONFIDENTIAL  
(When Filled In)

**5. VOLUNTARY ENTRIES**

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

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

---

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

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

---

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

---

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  YES  NO. (If "Yes" give name(s) and address)

---

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

---

**6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS**

---

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

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

---

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

FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNATE	DATE
	DIRECTOR OF PERSONNEL (When Applicable) (See NR 22-2)	DATE

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

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
BY *[Signature]*

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

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

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Only one) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO GFI NO. 98, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

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

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Internal Use Only

REPORT OF SERVICE ABROAD										FILE PUNCHED BY <i>BY</i>		
TO: Office of Personnel, Control Division, Statistical Reporting Branch												
SERIAL NO			NAME									
1-6			LAST			FIRST			MIDDLE			
036130			FLORES			DANIEL						
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION ( <i>One only</i> ). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 56, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	2 - CORRECTION	3 - CANCELLATION	CODE	ONLY		
28-28	27-28	29-30	31-32	33-34	35-36				37	38	39	40-42
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		ANALYSIS	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic)	2 - CORRECTION	3 - CANCELLATION	CODE	ONLY		
28-28	27-28	29-30	31-32	33-34	35-36				37	38	39	40-42
06	15	76	06	20	76			2				WESTERN HEMISPHERE 811
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH						
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD						
LA 07-76						6-14-76						
REMARKS												
PREPARED BY			REPORT SUBMITTED TO CONTROL DIVISION			ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITED						
DATE			DATE			SIGNATURE						
9-20-76												
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C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Instructor Training Workshop

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

COURSE OBJECTIVES--CONTENT AND METHODS

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

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

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

ACHIEVEMENT RECORD

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

FOR THE DIRECTOR OF TRAINING

11/10/76  
LXTE

Chief Instructor

E 2 IMPDET CL BY OIC628

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

311

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Internal Use Only

0.361.30  
31/E 135/4534

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Control Division, Statistical Reporting												
SERIAL NO.			LAST			FIRST			NAME			
1-6 0.361.30			(Point) Flores			3-28 Amice						
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 98, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38	39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION					40-42	
						3 - CANCELLATION						
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - TDY (Basic)	CODE	37	38	39	CODE	
07	16	75	07	19	75	2 - CORRECTION					40-42	
						3 - CANCELLATION					811	
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH						
CARLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD						
REMARKS												
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED						
B & C DIVISION, CTDR.			DATE			SIGNATURE						
B & C DIVISION			11/21/75									
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FILE  
PUNCHED  
BY

ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

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

**FILE  
PUNCHED  
BY:**

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

INSTRUCTIONS

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

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	25	75	07	29	75	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	2		LATIN AMERICAN	40-42 825

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. \_\_\_\_\_ DOCUMENT DATE/PERIOD \_\_\_\_\_

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCB	DATE	SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION, CTRD.	12/1/75	[Signature]
<input type="checkbox"/> C & T DIVISION		

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IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel Control Division, Statistical Reporting Branch

**FILE PUNCHED BY**  
FLORES

SERIAL NO.

NAME

036130

LAST (initial)  
FLORES

FIRST

24 DANIEL

MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO.  
LA-07-76

DOCUMENT DATE/PERIOD  
DEC 3-13-75

REMARKS

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

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**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

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

**FILE  
PUNCHED  
BY**

SERIAL NO. **036130** NAME **FLORES DANIEL**

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

**PCS DATES OF SERVICE**

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

**TDY DATES OF SERVICE**

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

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

DOCUMENT IDENTIFICATION NO. **LA-145-76** DOCUMENT DATE/PERIOD **10/15-22/75**

REMARKS

PREPARED BY:  S & L DIVISION, CTOD. DATE:  REPORT ANNOTATED FOR CONTROL DOCUMENT. ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED.

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SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

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

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

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

ADMINISTRATIVE  
Internal Use Only

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REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Report

FILE  
PUNCHED  
BY  
MICHAEL

SERIAL NO. 1-6	NAME	
	LAST (Print)	FIRST
036130	ELKINS	WIMB

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
08	16	75	09	02	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	LATIN AMERICAN S.O.S	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. \_\_\_\_\_ DOCUMENT DATE/PERIOD \_\_\_\_\_

REMARKS

PREPARED BY JED	REPORT SUBMITTED ON OFFICIAL DOCUMENT DATE 11/2/75	ABOVE DATA CERTIFIED CORRECT. INITIAL UPON SOURCE DOCUMENT ENTER SIGNATURE 11/2/75
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SECRET  
(When Filled In)

S/E

REPORT OF SERVICE ABROAD

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

FILE  
PUNCHED  
NAME BY MIDDLE

SERIAL NO.

036130

LAST

(Print)

Flores

FIRST

7-24

Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
06	05	75	06	11	75	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	2			Europe 801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. \_\_\_\_\_ DOCUMENT DATE/PERIOD \_\_\_\_\_

REMARKS

PREPARED BY: [Signature] REPORT SUBMITTED BY: [Signature] ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

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

SECRET

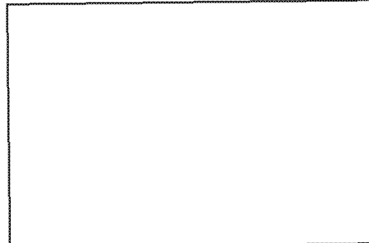
OFF

18 NOV 1975

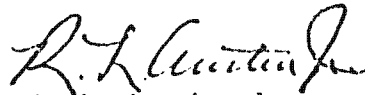
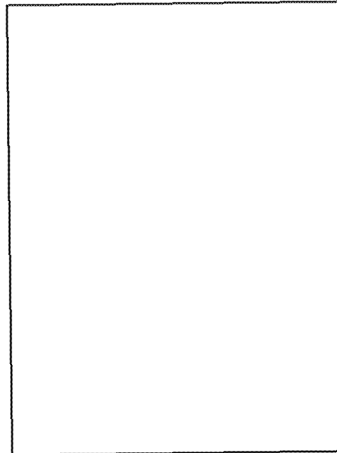
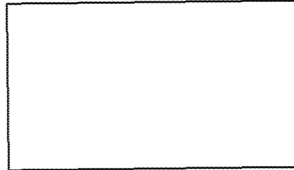
MEMORANDUM FOR THE RECORD

SUBJECT: Meritorious Unit Citation -- Cuban Operations Group,  
Latin America Division

On 13 November 1975 the Director of Central Intelligence approved award of the Meritorious Unit Citation to the Cuban Operations Group in recognition of the outstanding performance of the following employees from 1 October 1974 to 30 September 1975:



Daniel Flores.

A handwritten signature in cursive script, appearing to read "R. L. Austin, Jr.".

R. L. Austin, Jr.  
Recorder

Honor and Merit Awards Board

Distribution:

- 1 - Each OFF
- 1 - C/LA
- 1 - Recorder/IMAB
- 1 - Exec Sec/IMAB

SECRET

E2 Impdet C1 By 014029

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REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
BY *BY/5*

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO.	NAME		
1-9	LAST	FIRST	MIDDLE
<i>36130</i>	<i>FLORES</i>	<i>DANIEL</i>	

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58 DATED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	09	75	07	14	75	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	37	38 39	<i>WH</i>	<i>811</i>

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. \_\_\_\_\_ DOCUMENT DATE/PERIOD \_\_\_\_\_

REMARKS

PREPARED BY	REPORT APPROVED BY CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITE
<i>BY DIVISION 1000</i>	DATE <i>7/15/75</i>	SIGNATURE

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SECRET  
(When Filled In)

FILE  
FORWARDED  
BY/W

REPORT OF SERVICE ABROAD

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

SERIAL NO. - <b>036130</b>	NAME		
	LAST <b>Flares</b>	FIRST <b>Daniel</b>	MIDDLE

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

ARRIVAL O/S						DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	CODE			37		38 39		CODE		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION							40-42		
			<b>03</b>	<b>05</b>	<b>74</b>	<b>1</b>							<b>570</b>		

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. **135131** DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCR	DATE <b>3/28/74</b>	SIGNATURE
C & L DIVISION, CTDO.		
C & S DIVISION		

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ADMINISTRATIVE  
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
BY [initials]

TO: Office of Personnel, Control Division, Statistical Reporting

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
10	05	74	10	07	74	2		Europe	801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. WHT 119-75	DOCUMENT DATE/PERIOD 10/4-10/2/74
---	--------------------------------------

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT APPROVED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE
<input checked="" type="checkbox"/> S. S. DIVISION, CTRD.	DATE 12/23/74	SIGNATURE

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

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE  
FORWARDED  
BY [Signature]

TO: Office of Personnel, Transactions and Records Branch, State Department

SERIAL NO. 1-6	NAME	
	LAST (Print)	FIRST 7-26
020 20	FLORES	JOHN W.

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREAS	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	07	74	07	11	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		60 61	81 1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

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

REMARKS

PREPARED BY	REPORT ANNOTATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DEC	DATE 6/10/74	SIGNATURE [Signature]
C & A DIVISION, CTRD.		
C & V DIVISION		

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

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
BY *fil*

TO: Office of Personnel, Control Division, Statistical Reporting

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

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	40-42
06	13	74	06	21	74	2		WA P/1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. *WA 542-74*      DOCUMENT DATE/PERIOD *6/13-6/4/74*

REMARKS

PREPARED BY: *[Signature]*      DATE: *9 May 74*

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

ADMINISTRATIVE  
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

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

SERIAL NO.

NAME

1-6  
036130

LAST

FIRST

(Print)

FLUCES

DANIEL

FILE  
PUNCHED  
BY *lcr*

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

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

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
08	12	74	08	16	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	LA AREA	40-42 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE PERIOD

12-17 June 74

WITNESSES

PREPARED BY: *[Signature]*  
 CHECKED BY: *[Signature]*  
 APPROVED BY: *[Signature]*

THIS REPORT SHALL BE FILED IN THE OFFICE OF PERSONNEL  
 IN THE INSTITUTION'S OFFICIAL PERSONNEL FILES

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item 3-1)	NAME OF SUPERVISOR (true)	DATE (from item 3-2)	
Daniel Flores	27 Feb 73	Richard Welch	27 Feb 73	
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CARRIER SERVICE:	
2 March 1973		HPLT-6502		
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
		GS-11 FI Case Officer		LNFALL
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	
24 Sept 1971	30 Nov 1974	1 Feb 1975	15 Feb 1975 (depending on training.)	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Wife: 37, daughter: 3				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
None				
LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-B)				
September 1971 - July 1972 - Activities of the [redacted] and [redacted] Preparation of project outlines and progress reports.				
August 1972 - Present - [redacted] Operations. [redacted] capability. Preparation of project outlines and progress reports.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
In the near future I would like to take an advanced operations course. In connection with this, I would like to concentrate on the [redacted] and [redacted] targets in Latin America. Special courses in these two areas would be extremely helpful. Some time in the future I would like to attend the mid-career course.				

## SECRET

## 11. PREFERENCE FOR NEXT ASSIGNMENT

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

At this point in my career the [ ] and [ ] targets are of major interest to me. Although I would prefer to work on [ ] operations in my next assignment, as an alternative I would consider working on [ ] operations.

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

EXTEND TOUR 14 MONTHS AT CURRENT STATION TO 31 November 1974  
(Date)

BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_

BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION.  
1ST CHOICE [ ] 2ND CHOICE [ ] 3RD CHOICE [ ]

RETURN TO MY CURRENT STATION

## TO BE COMPLETED BY FIELD STATION

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

Concur. This officer is doing a good job on his assigned targets and his overall abilities give the Station a flexibility it often needs to call on.

## TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

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

Subject's tour has been extended fourteen months to 31 November 1974.

DATE 4/23/73 TITLE C/MII/Pers SIGNATURE H. L. Beythold

## FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. HPIS-3284 DATE (typed) 23-Apr 73

CABLE NO. \_\_\_\_\_ DATE: \_\_\_\_\_

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

SECRET

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

**FILE  
PUNCHED  
BY**

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

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

**INSTRUCTIONS**

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

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		1988	38 38		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION	37	38 38		40-42
			0 5	2 8	7 1		1			1 9 5

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		1988	38 38		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	37	38 38		40-42

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

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

DOCUMENT IDENTIFICATION NO. 16318	DOCUMENT DATE/PERIOD 28 May 1971
--------------------------------------	-------------------------------------

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 6/9/71	SIGNATURE <i>[Signature]</i>	

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

SECRET

(When filled in)

### SERVICE ABROAD AGREEMENT

#### I. GENERAL

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

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

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

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

NAME OF EMPLOYEE <b>Daniel Flores</b>	SO <b>D</b>
--	----------------

#### II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT <b>Currently</b> [ ] <b>and Next Assignment:</b> [ ]
---

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

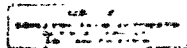
A. STANDARD TOUR OF DUTY OF 24 MONTHS <input checked="" type="checkbox"/> X	C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYER SIGNING THIS AGREEMENT. (See HR 20-18)
	REQUESTED (None attached)
B. NONSTANDARD TOUR OF DUTY OF _____ MONTHS PREVIOUSLY APPROVED PER HR 20-18.	CONCUR
OPERATING OFFICIAL	CAREER SERVICE DEPUTY DIRECTOR
[ ] <i>H/1/4/1/Pos</i>	APPROVED
	DIRECTOR OF PERSONNEL

#### III. PERMANENT PLACE OF RESIDENCE

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

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE REVERSE SIDE, YOU WILL (SEE BYPROCED AND HR 22-3) NORMALLY INDICATE THE PLACE WHERE YOU PHYSICALLY COULD IN THE UNITED STATES, ITS POSSESSIONS OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PMS TRANSFER TO A POST ABROAD. YOU MAY REQUEST IN ITEM 6 THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU CAN ESTABLISH THAT YOUR PHYSICAL DRELLING PLACE IS (OR WAS) TRANSIENT AND THAT SUCH OTHER PLACE IS YOUR DOMICILE OR HAS PREVIOUSLY BEEN USED BY YOU AS A PHYSICAL DRELLING PLACE. INFORMATION THAT CAN BE PRESENTED IN AN ATTACHED STATEMENT AS EVIDENCE INCLUDES BUT IS NOT LIMITED TO, STATE VOTING REGISTRATION, PROPERTY OWNERSHIP AND PLACE WHERE INCOME OR PERSONAL PROPERTY TAXES HAVE BEEN PAID.

SECRET





**SECRET**  
(When Filled In)

<p>3. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof)</p> <p>FULL ADDRESS:</p> <p style="text-align: center;">Washington, D. C.</p>	<p>6 OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3)</p> <p>FULL ADDRESS:</p>
<b>CONCUR</b>	
DEPUTY DIRECTOR	DATE
<b>APPROVED</b>	
DEPUTY DIRECTOR	DATE
[Redacted]	5-20-71
<b>IV. HOME LEAVE POINT</b>	
<p>7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.</p> <p>8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-30B(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.</p>	
<p>9. DESIGNATION PER ITEM 7 ABOVE</p> <p>FULL ADDRESS:</p> <p style="text-align: center;">[Redacted] Milwaukie, Oregon</p>	<p>10. DESIGNATION PER ITEM 8 ABOVE.</p> <p>FULL ADDRESS:</p>
<b>CONCUR</b>	
DEPUTY DIRECTOR	DATE
<b>APPROVED</b>	
DEPUTY DIRECTOR	DATE
[Redacted]	5-20-71
<b>EMPLOYEE CERTIFICATION</b>	
<p>I have read and understand my service obligations and travel entitlements as described in this agreement.</p>	
<p>SIGNATURE OF EMPLOYEE</p> <p style="text-align: center;">See Dispatch Attached <i>Paul Ober</i></p>	<p>DATE</p> <p style="text-align: center;">5/20/71</p>



**CONFIDENTIAL**  
(When Filled In)

<b>5. VOLUNTARY ENTRIES</b>		
Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.		
INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.		
The Riggs National Bank, Federal Office, 1750 Pennsylvania Avenue, N.W., Washington D.C.		
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)		
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes" give name(s) and address)		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)		
<b>6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS</b>		
<b>7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY</b> (No Approval Required)		
RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)	
<b>8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3)</b> (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE
SIGNED AT <i>Headquarters</i>	DATE <i>7 June 1951</i>	SIGNATURE <i>Clair D. Over</i>

**CONFIDENTIAL**



SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

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

I would like a position of increased responsibility, preferably as a Case Officer for Soviet Operations in Latin America. If this is possible I would like to take the Soviet Operations Course at Headquarters prior to my next assignment.

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

- EXTEND TOUR \_\_\_\_\_ MONTHS AT CURRENT STATION TO \_\_\_\_\_ (DATE)
- BE ASSIGNED TO HQQTRS FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_
- BE ASSIGNED TO ANOTHER FIELD STATION; INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE AND GEOGRAPHIC AREA.  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_
- RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

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

It is believed that this officer's performance at his present post of assignment has provided sufficient indication of his competence as a field case officer, and that he should have no problem filling a Soviet Operations Officer slot at a medium sized field installation. He should attend the Soviet Operations Course prior to such assignment.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

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

WII Division has selected Mr. Flores for assignment to [ ] in September 1971.

DATE 1 Mar 71 TITLE C/WII/PCRB SIGNATURE H. T. Burthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. 113900 DATE: \_\_\_\_\_

CABLE NO. \_\_\_\_\_ DATE: \_\_\_\_\_

16. SUPERVISOR'S REPRESENTATIVE \_\_\_\_\_ DATE: \_\_\_\_\_

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
BY RT

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

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	Flores	Daniel	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	3/	36 39		40-42
05	13	69					1			175

TDY DATES OF SERVICE

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

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

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

DOCUMENT IDENTIFICATION NO. *2457300*      DOCUMENT DATE/PERIOD *12 May 1967*

REMARKS

PREPARED BY	REPORT SUBMITTED ON	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<i>[Signature]</i>	DATE	SIGNATURE
	<i>7/1/67</i>	

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

SECRET

Not Approved by  
CS Career Service

81 JAR pm

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

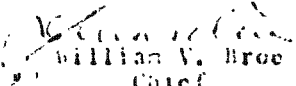
SUBJECT : Recommendation for Promotion to Grade  
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-09 to GS-10.

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

3. Both as a Headquarters and field operations officer Mr. Flores has carried out his assignments with intelligence, enthusiasm and initiative. As the [redacted] Base officer in charge of [redacted] operations, his performance has been of high caliber. In August 1969, during the forced absence of the Chief of Base and other senior officers, Mr. Flores assumed the full responsibilities for running the base for a period of several weeks. He performed the duties of Acting Chief of Base in a superior manner. In addition to his operational competence, the [redacted] Chief of Base has observed that Mr. Flores' ability to develop social relations with ease has been a distinct asset for the Base.

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

  
William V. Broe  
Chief  
Western Hemisphere Division

SECRET

CONFIDENTIAL  
(When filled in)

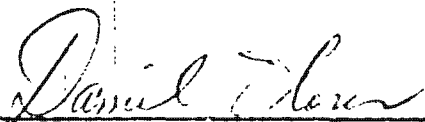
IMPORTANT

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

---

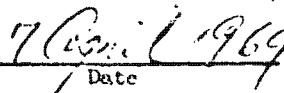
MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.



Signature

DANIEL FLORES



Date

CONFIDENTIAL

Group 1 - Excluded from  
automatic downgrading  
and declassification.



**CONFIDENTIAL**

*(When Filled In)*

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) Elbert (First) Daniel (Middle) \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

**1. RESIDENCE DATA**

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY Washington, D.C. LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) \_\_\_\_\_  
 PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE Washington, D.C. HOME LEAVE RESIDENCE Washington, D.C.

**2. MARITAL STATUS (Check one)**

SINGLE  MARRIED  SEPARATED  DIVORCED  WIDOWED  ANNULLED

IF MARRIED, PLACE OF MARRIAGE Lima, Peru DATE OF MARRIAGE 11/20/1960

IF DIVORCED, PLACE OF DIVORCE DECREE \_\_\_\_\_ DATE OF DECREE \_\_\_\_\_

IF WIDOWED, PLACE SPOUSE DIED \_\_\_\_\_ DATE SPOUSE DIED \_\_\_\_\_

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S) \_\_\_\_\_

**3. MEMBERS OF FAMILY**

ADDRESSES (No., Street, City, State, Zip Code)	TELEPHONE NO.
<u>Accompanying</u>	
SEX	DATE OF BIRTH

NAME OF YOUR MOTHER (or female guardian) Deceased ADDRESS Genzoko, Texas (Box 39) TELEPHONE NO. 512/672-6061

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

**4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY**

NAME (Mr., Mrs., Miss) Mr. RELATIONSHIP Brother-in-law  
 HOME ADDRESS (No. Street, City, State, Zip Code) \_\_\_\_\_ HOME TELEPHONE NUMBER (512) 679-7070  
 BUSINESS ADDRESS (No. Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE (Same as above) BUSINESS TELEPHONE & EXTENSION \_\_\_\_\_

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

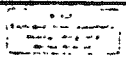
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person who should make such decisions in case of emergency.) YES  NO

DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer to "No" explain why in item 6.) YES  NO

The persons named in item 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONTINUED ON REVERSE SIDE

**CURRENT RESIDENCE AND DEPENDENCY REPORT**



CONFIDENTIAL

(When Filled In)

VOLUNTARY ENTRIES

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

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

Riggs National Bank : Daniel and [redacted] Flores  
17th and Penn. Avenues, Washington, D.C.  
(1750 Penn Avenue

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

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

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

At home. Will leave with responsible person for safe keeping

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  YES  NO. (If "Yes" give name(s) and address)

N/A

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

But may before I leave.

ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

My father should not be notified in case of an emergency because of his health and age.

SIGNED AT

DATE

7 April 1969

SIGNATURE

Daniel Flores

CONFIDENTIAL

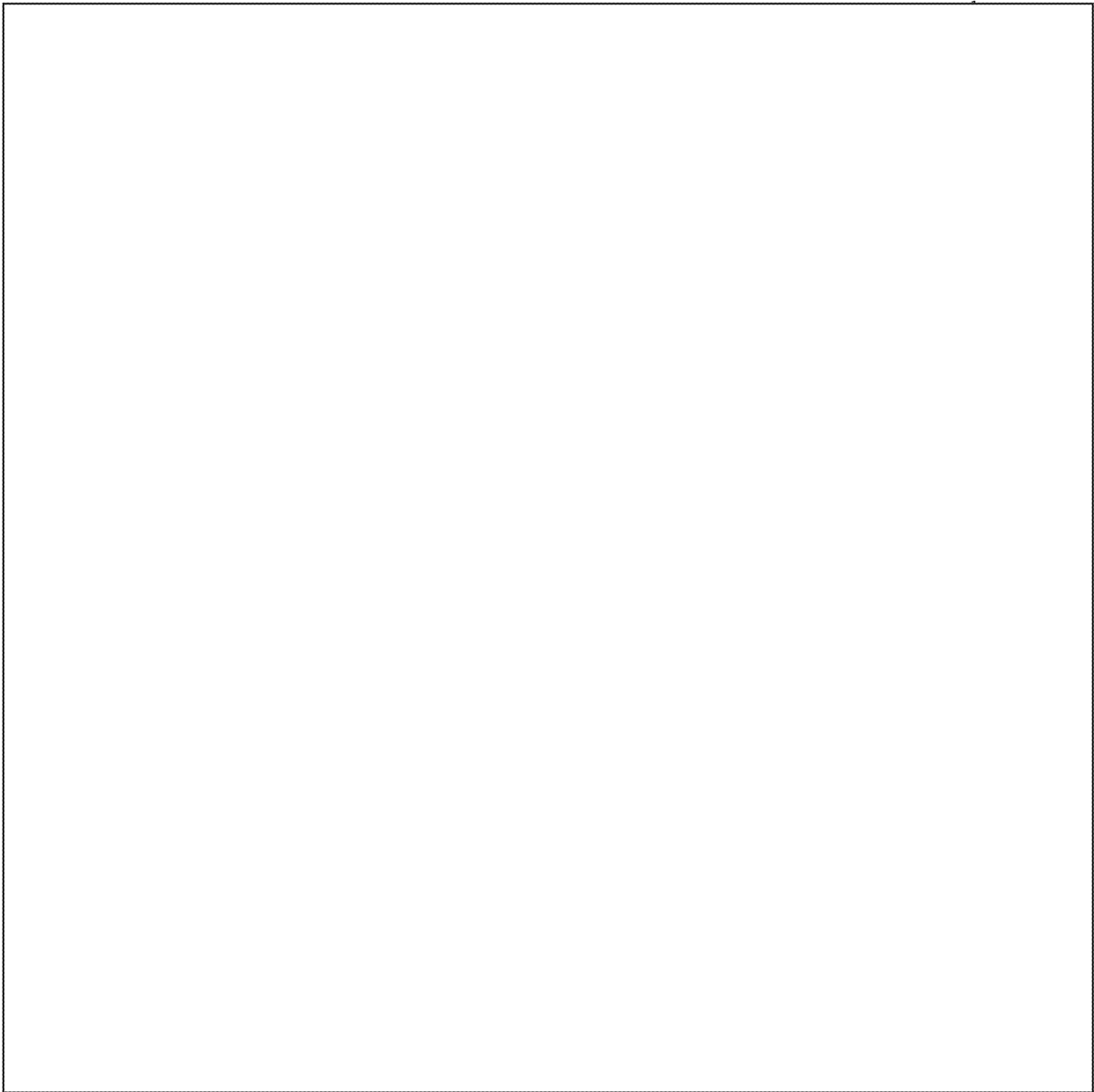
SECRET

*TPR*

Supplement to Staff Employee Personnel

Daniel Flores

Effective 10 April 1969



SECRET



2

SECRET

SECRET



UNITED STATES GOVERNMENT



Personnel Office

ACCEPTED:

A handwritten signature in cursive script, appearing to read 'David L. ...'. The signature is written in dark ink and is positioned below the 'ACCEPTED:' label.

3

FORM 1535c

SECRET

10 01

SECRET

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

**IMPORTANT  
AGENCY INSTRUCTIONS  
ON BACK OF ORIGINAL**

**TO COMPLETE THIS FORM—**

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

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

NAME (last) Flores (first) Daniel (middle) 036730 DATE OF BIRTH (month, day, year) SOCIAL SECURITY NUMBER

EMPLOYING DEPARTMENT OR AGENCY LOCATION (City, State, ZIP Code)

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

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

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

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

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

Signature: Daniel Flores  
Date: 1/10/68

**FOR EMPLOYING OFFICE USE ONLY**

(Official receiving date stamp)

Stamp: 1-10-68

S-E-C-R-E-T

- TRAINING REPORT -

Operational Interrogation Course No. 2-69  
(Full time - three weeks) 4 - 22 November 1968

Student: Flores, Daniel

Office: WH

Grade : 08

EOD : Mar 62

Number of Students Enrolled:

Service Designation: D

COURSE OBJECTIVE

RATING

Class Performance : Satisfactory

Interrogation Aptitude: Average

GENERAL CLASS PERFORMANCE

Excellent: 3      Satisfactory: 6      Unsatisfactory: 0

GENERAL CLASS APTITUDE FOR INTERROGATION

High: 2      Average: 6      Low: 1

FOR THE DIRECTOR OF TRAINING:

27 DEC 1968

Date

Chief Instructor

S-E-C-R-E-T

C-E-C-R-E-T

TRAINING REPORT OPERATIONS COURSE (FULL TIME)	Course No.	No. of Students		Dates of Course	
	OC-1-3/4-68	Began	Finished	27 May - 16 August 1968	
STUDENT IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	ECG DATE	OFFICE	CS	SD
FLORES, Daniel		March 1967	CTP	CS	SD
PERFORMANCE EVALUATION					

- W - Weak                      Ranges from inadequate to less than satisfactory (in terms of a new and inexperienced case officer).
- A - Adequate                Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.
- P - Proficient              More than satisfactory. Has acquired a solid beginner's proficiency. This rating may be interpreted as representing "average" on our rating scale.
- S - Strong                    Exceptional proficiency, characterized by thoroughness, initiative, originality, and an exceptional student understanding of the case officer role in clandestine operations.
- O - Outstanding            Performance is so exceptional in relation to requirements of the work and in comparison to the performance of other students doing similar work as to warrant special recognition.

COURSE OBJECTIVE

This course is designed to prepare selected staff officers from the Career Trainee Program for field operations officer work with the Clandestine Services. The student's understanding of the Clandestine Services doctrines, policies and operational concepts and his ability to apply these related items is measured by a series of practical exercises. Successful completion of the Operations Familiarization Course (OFC) is a prerequisite for admission to the Operations Course.

	RATING LETTER
TRADECRAFT	P
INTELLIGENCE AND OPERATIONAL INFORMATION REPORTING	P
CLANDESTINE SERVICES OPERATIONAL PROGRAMS	P

The trainee also received basic instruction and practical work

This rating corresponds to the statement which most accurately reflects the student's level of performance and takes into account everything about him which influenced his effectiveness. This rating is a reflection of the degree to which the instructors feel that the student is both suitable and competent for overseas service in the Clandestine Services.

OVERALL PERFORMANCE
P

Overall performance ratings of all students in this class:

WEAK 0    ADEQUATE 0    PROFICIENT 40    STRONG 40    OUTSTANDING 20



S-E-C-R-E-T

NARRATIVE COMMENTS

Significant strengths and weaknesses and their relationship to overall performance in the Operations Course. This section amplifies and explains, as necessary, the rating letters given above.

Mr. Flores' overall performance in this course was at the high proficient level. He is a very friendly and personable individual who put forth a good deal of effort to do well in the course. Mr. Flores takes a very practical approach to solving problems and his attitude throughout the course was excellent.

Mr. Flores acquired a good understanding of the principles and techniques of Clandestine Services operations, and in problems requiring [redacted] in the live exercises he came through as a very friendly and personable individual. He was particularly effective in debriefing situations and demonstrated flexibility in meeting the problems that arose during the [redacted]

Mr. Flores demonstrated a good understanding of Clandestine Services programs in Foreign Intelligence, Counterintelligence and Covert Action. His performance was graded strong in handling of a [redacted] and in a Counterintelligence case study and a Covert Action case study his understanding and analyses were judged highly proficient. He received a rating of adequate in photography.

Mr. Flores has good writing skills and acquired a thorough understanding of intelligence and operational reporting procedures and formats of the Clandestine Services. His intelligence reports were consistently complete, accurate and clear. His operational reports suffered occasionally from weak organization, and on one occasion he had difficulty distinguishing operational from intelligence information; but his reports were generally complete and accurate and showed a sound understanding of operational reporting requirements.

Mr. Flores is a personable and intelligent individual who got along very well with his colleagues and with the instructors. With his excellent attitude and strong desire for a career in the Clandestine Services together with his willingness to work hard, Mr. Flores should have little difficulty in developing into an effective case officer as he gets greater experience.

FOR THE DIRECTOR OF TRAINING:

[redacted]

Chief Instructor

23 August 1968  
Date

S-E-C-R-E-T

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68  
( 416 hours, full-time)

4 March - 3 May 1968  
(Date)

Student : FLORES, Daniel Office : CTP/OTR  
Year of Birth:  Service Designation: BJ  
Grade : GS-07 No. of Students:  Began;  Finished  
EOD : March 1962

COURSE OBJECTIVES:

The course is designed to prepare junior clandestine services officers for  related to the  of  Upon completion of training, the officer will be capable of developing and implementing actions which will contribute to the elimination of  in the  of the world in furtherance of U.S. policy. He shall also be capable of developing plans for the  of  in support of United States  in  and will be able to plan for the use of  and  operations in direct support of other intelligence activities.

ACHIEVEMENT RECORD:

The performance rating and narrative comments below are derived from a synthesis of all observations and evaluations submitted on each trainee by the instructor staff. Student rating is indicated by the asterisk.

INCOMPLETE 0 ADEQUATE 0 PROFICIENT \* 48 STRONG 12

NARRATIVE COMMENTS:

Mr. Flores is a self-sufficient, steady worker, who demonstrated an excellent ability to adapt himself to the various training situations. His proficient performance during Operations Course, Phase II-3-68 did not fluctuate appreciably from beginning to end.

Mr. Flores was always mentally alert, receptive to instruction and responsive to instructional exercises. He cheerfully accepted all responsibilities, consistently produced satisfactory results, and appeared to demonstrate a sense of pride in his accomplishments. His conscientious effort, sincerity, and cooperative attitude enabled him to develop a sound working relationship with his colleagues.

Continued on Page 2

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68  
(416 hours, full-time)

4 March - 3 May 1968

Student : FLORES, Daniel

Office : CTP/OTR

Service Designation: SJ

NARRATIVE COMMENTS (Continued)

Of noteworthy mention was Mr. Flores' pleasant, industrious performance throughout the [redacted] He established a cheerful environment for his colleagues and completed assigned responsibilities with enthusiasm, determination and cooperation. His sustained high-level performance and ability to adapt to the [redacted] earned him the respect and appreciation of his classmates.

The degree of performance attained in the course indicates Mr. Flores has gained a sound familiarization of the [redacted] activities, responsibilities, skills, and concepts.

FOR THE DIRECTOR OF TRAINING:

[redacted]

Chief Instructor, Operations Course, Phase II

2

S-E-C-R-E-T



S E C R E T

NARRATIVE RATING OF ACHIEVEMENT:

Mr. Flores showed considerable ability and experience in his handling of the practical problem. He should have no trouble in doing work of this kind with a minimum of supervision.

Overall adjectival rating of achievement:

Satisfactory ✓

Overall adjectival ratings of achievement of all employees in the course:

EXCELLENT: 2 SATISFACTORY: 14 UNSATISFACTORY:

Attendance at this course does not provide the student with operational knowledge and background sufficient to qualify him as an independent researcher, capable of making operational judgments.

NOTE: CS Records I (Introduction to Records) is a prerequisite for this course.

FOR THE DIRECTOR OF TRAINING:

24 MAY 1968

Date

Chief Instructor

- 2 -

S E C R E T

**SECRET**  
(When Filled In)

TRAINING REPORT INTELLIGENCE TECHNIQUES COURSE (120 Hours)		COURSE NO.	NO. STUDENTS	DATE OF COURSE	
		3-68	46	29 Jan - 13 Feb 1968	
IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	FOB DATE	OFFICE	GS	SD
FLORES, Daniel		Mar 1962	CTP	07	SJ
KEY TO RATINGS					
<b>W - Weak</b>	<i>Ranges from inadequate to less than satisfactory.</i>				
<b>A - Adequate</b>	<i>Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.</i>				
<b>P - Proficient</b>	<i>More than satisfactory. Has acquired a solid beginner's proficiency.</i>				
<b>S - Strong</b>	<i>Exceptional proficiency. Characterized by thoroughness, initiative, originality, and an exceptional student understanding of the work involved in intelligence production.</i>				
<b>O - Outstanding</b>	<i>Performance is so exceptional in relation to requirements and in comparison to the performance of others doing similar work as to warrant special recognition.</i>				
EVALUATION OF PERFORMANCE IN SKILLS					
BRIEFING	RATING	WRITING	RATING	ANALYSIS	RATING
	P		A+		P
OVER-ALL PERFORMANCE EVALUATION					
<p>The RATING LETTER reflects the over-all performance of the student in the course and is thus a measure of the extent to which the student possesses the skills and techniques required in the production of finished intelligence. The rating is not necessarily arrived at by mathematically averaging in the skills ratings, but takes into consideration any outstanding strengths or weaknesses that should be reflected in an evaluation of the performance of the student as a whole. The RATING LETTER is a consensus of the view of the faculty.</p>					<b>RATING</b>  P-
REPORT OF OBSERVATIONS, JUDGMENTS AND IMPRESSIONS					
<p>This is a general, unspecific, narrative report of observations, judgments, and impressions. It includes intangible factors such as the student's attitude, cooperativeness, attentiveness, maturity, and judgment. It also includes the general impression the student has made on the faculty. This report will not be included unless the instructors believe that it would add something to the previous evaluation of performance in skills as well as to the evaluation of the OVER-ALL PERFORMANCE of the student.</p>					
FOR THE DIRECTOR OF TRAINING:		<input type="checkbox"/>		DATE	
		CHIEF, INTELLIGENCE PRODUCTION FACULTY INTELLIGENCE SCHOOL			

S-E-C-R-E-T

PERFORMANCE RECORD

The

[Redacted Name]

CT Class SEC - 1111 100

Course Description

A. Statement of Objectives

1.

2.

[Redacted Objectives]

B. Course Method

1. Approximately one-half of the course is devoted to lectures, one-fourth to seminars, exercises and demonstrations, and one-fourth to individual study.
2. Student achievement is judged on the basis of performance in one written examination and participation in seminars and exercises.

NAME Flower, David

Written Work

Examination By Student

Oral Work

Seminars, Exercises By Student

Comment:

GROUP I  
Excluded from automatic  
downgrading and  
declassification

S-E-C-R-E-T

TRAINING REPORT

OPERATIONS FAMILIARIZATION COURSE NO. 2-68  
(152 hours, full-time)

2 Jan. - 26 Jan. 1968  
(Date)

STUDENT : FLORES, Daniel

OFFICE : CIP

YEAR OF BIRTH:

SERVICE DESIGNATION: GJ

GRADE : GS-07

PROGRESS OF STUDENTS :  Began

END DATE : March 1962

Finished

COURSE OBJECTIVE AND CONTENT

The Operations Familiarization Course is a four-week course designed to provide the student with an understanding of the Clandestine Services programs, operational methods and reporting techniques. Special emphasis is given the basic elements of

METHODS

The instructional methods used included class discussions, lectures, films demonstrations, practical exercises and case studies. Practical exercises were

The operational programs of various Clandestine Services Divisions were discussed by representatives of the respective Headquarters components.

EVALUATION OF PERFORMANCE

The student's rating is based on understanding of the material presented as demonstrated by his participation in class discussions, the preparation of intelligence and operational reports, the application of operational principles in the practical exercises and the grade received on a comprehensive written examination given in the final week of the course which covered all areas of course content. Other factors considered in determining the final rating were the student's interest, attitude and preparation for assignments. The number of students receiving each adjectival rating on overall course performance is shown below. This student's rating is indicated by an asterisk. Explanatory narrative comments are included with a rating of ADEQUATE or STRONG. When considered pertinent by the training staff, comments may also be included with a PROFICIENT (average) rating.

UNSATISFACTORY

ADEQUATE

\* PROFICIENT

STRONG

✓ Mr. Flores' overall performance in the course was at the solid proficient level. It should be noted that he demonstrated a particularly good attitude throughout the course. He took full advantage of the training offered to increase his knowledge of the Clandestine Services.

FOR THE DIRECTOR OF TRAINING

9 Feb. 1968  
[Signature]

J-S-C-S-8-1



S-E-C-R-E-T

ORIENTATION TO INTELLIGENCE FOR CT'S  
(Class of December 1967)

STUDENT : Daniel FLORES  
YEAR OF BIRTH:   
GRADE : GS-07  
EOD : March 1962

Duration: 11-22 December 1967  
(30 hours, full time)  
OFFICE : CT  
SERVICE DESIGNATION: SJ  
NUMBER OF STUDENTS :

COURSE OBJECTIVES - CONTENT AND METHODS

In the Orientation to Intelligence Course the objectives are: (1) to instruct the student in the basic concepts and terminology of intelligence; (2) to describe the history of U.S. intelligence and the current role of intelligence in the national security structure; (3) to outline the composition and mission of the intelligence community, noting the Agency's significant role therein; (4) to define the mission of CIA in supporting the DCI and to identify the functions of the Agency's major components, particularly in the collection, production, and dissemination of intelligence; and (5) to identify and discuss major problems facing the Agency. The area surveys and "Articulating the United States" elements of the course are designed to introduce the students briefly to some of the intelligence problems presented by major regions of the free world and to stimulate thought about the American way of life and its relationship to these areas.

Instructional techniques include lectures given by members of the Orientation and Briefing Faculty, guest speakers from Agency components, seminars, directed reading, review exercises, training films, and intelligence exhibits.

ACHIEVEMENT RECORD

The individual student evaluation is based on his score achieved on a written examination given at the conclusion of the course. This test, consisting of 100 items, covered all major aspects of the course content. The rating assigned to this student is:

PROFICIENT

The evaluation system used was as follows:

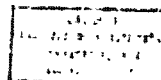
O = Outstanding - 0-3 wrong  
S = Strong - 4-8 wrong  
P = Proficient - 9-15 wrong  
A = Adequate - 16-25 wrong  
W = Weak - 26- wrong

FOR THE DIRECTOR OF TRAINING:

Chief, Orientation & Briefing Faculty

8 January 1968  
Date

S-E-C-R-E-T



CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

THROUGH : Executive Secretary  
CSCT Selection Board

SUBJECT : Application for Career Training Program

1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.
2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.
3. Should you have any further questions, do not hesitate to call on the Program Officers.

[Redacted Signature]

Chief, CTP

CONFIDENTIAL

10 OCT 27 1967

SECRET

(When Filled In)

MILITARY STATUS QUESTIONNAIRE (READ INSTRUCTIONS ON REVERSE SIDE)				DO NOT WRITE IN SPACES BELOW			
1. THIS DATE (Month-day-year) MARCH 18, 1962				1-6. SERIAL NUMBER 606130			
2. NAME (Last-First-Middle) FACKES, DANIEL (G)				7-24. NAME			
3. DATE OF BIRTH (Month-day-year)		4. SEX <input checked="" type="checkbox"/> (1) MALE <input type="checkbox"/> (2) FEMALE		25-29. UIC 1835		29. SER 1	
5. OFFICE TO WHICH ASSIGNED DDP/OPSER/RT		6. SCHEDULE AND GRADE GS-04		30-31. OFFICE CODE 39		32-34. SCHD. 35-39. GR. C-5 C-4	
7. SUBJECT TO CURRENT DRAFT YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		8. INDICATE DRAFT CLASSIFICATION, IF ANY		37. DRAFT STATUS 2		38-39. CLASS.	
<b>VETERANS COMPLETE THE FOLLOWING</b>							
9. BRANCH OF SERVICE ON SEPARATION (Check one)				10. MIL. GRADE ON SEPARATION O-4 (E4)		40. BRANCH SERVICE 3	
<input type="checkbox"/> (1) ARMY		<input checked="" type="checkbox"/> (2) MARINE		<input type="checkbox"/> (3) COAST GUARD		41-42. MIL. GRADE E 4	
<input type="checkbox"/> (4) NAVY		<input type="checkbox"/> (5) AIR FORCE		10A. YRS. MOT OF ACTIVE SERVICE 4 YRS.			
11. STATUS AT TIME OF SEPARATION (Check one)				43. STATUS AT SEPARATION 1			
<input checked="" type="checkbox"/> (1) REGULAR		<input type="checkbox"/> (2) RESERVE		<input type="checkbox"/> (3) DRAFTER		<input type="checkbox"/> (4) OTHER (Specify in Comments)	
12. TYPE OF SEPARATION (Check one)				44. TYPE OF SEPARATION (A-less than 8 yrs; B-8 yrs or more)			
<b>PLEASE NOTE</b>							
ALTHOUGH YOU MAY HAVE A SERVICE CONNECTED DISABILITY, DO NOT CHECK THE BOX "RETIRED-SERVICE CONNECTED DISABILITY" UNLESS YOU WERE ACTUALLY RETIRED FOR THIS REASON. IF OTHERWISE, CHECK "HONORABLE DISCHARGE" OR "RELEASED TO INACTIVE DUTY" AS APPROPRIATE, EVEN THOUGH YOU MAY BE DRAWING A DISABILITY ALLOWANCE OR COMPENSATION.							
<input type="checkbox"/> (1) RELEASED TO INACTIVE DUTY		<input type="checkbox"/> (6) RETIRED-AGE		<input type="checkbox"/> (11) HONORABLE DISCHARGE		<input type="checkbox"/> (16) RETIRED-SERVICE CONNECTED DISABILITY	
<input checked="" type="checkbox"/> (2) HONORABLE DISCHARGE		<input type="checkbox"/> (7) RETIRED-20 (or more) YRS. SERVICE		<input type="checkbox"/> (12) RETIRED-COMBAT DISABILITY		<input type="checkbox"/> (17) OTHER-SPECIFY UNDER COMMENTS	
<input type="checkbox"/> (3) RETIRED-LESS THAN 20 YRS. SERVICE		<input type="checkbox"/> (8) OTHER-SPECIFY UNDER COMMENTS					
<b>MEMBERS OF RESERVE FORCES COMPLETE THE FOLLOWING</b>							
13. RESERVE BRANCH OR SERVICE				14. ORIGINAL ENTRY DATE IN ARMED SERVICES		45. BRANCH SERVICE	
15. SERVICE SERIAL NO.				16. MOS, AFSC, DESIGNATOR, OR RATING		46-49. ENTRY DATE	
17. MIL. GRADE		18. RESERVE CATEGORY (Check one)		50-59. SERV. SER. NO.		60-64. MOS, AFSC, ETC.	
		<input type="checkbox"/> (1) READY <input type="checkbox"/> (2) STANDBY <input type="checkbox"/> (3) RETIRED		65-66. MIL. GRADE		67. CATEGORY	
19. EXPIRATION DATE OF APPOINTMENT OR ENLISTMENT (Month and year)				68-71. EXPIRATION DATE			
20. MIL. MOBILIZATION ASSIGNMENT				72. MOBILIZATION ASSIGNMENT			
21. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED				73. ASSIGNMENT UNIT			
				74. MOBILIZATION CATEGORY			
22. COMMENTS							

OUTSIDE ACTIVITY APPROVAL REQUEST

SEE HR 10-7 BEFORE SUBMITTING TO FOR AN ORIGINAL AND 2 COPIES OF THIS FORM

TO : DIRECTOR OF SECURITY; ATTN: EMPLOYEE ACTIVITY BRANCH      DATE: 16 April 1962

THROUGH: (Operating official, administrative and/or security officer)

[Redacted]  
Security Officer, RID

FROM : NAME AND GRADE OF EMPLOYEE (Print or type) COMPONENT ROOM NO. AND BLDG. PHONE  
FLORES, Daniel GS-04 EDP/OPSER/RID/RB/IN A B 4003 6187

1. DESCRIPTION OF OUTSIDE ACTIVITY FOR WHICH APPROVAL IS REQUESTED:

Bartender

2. FULL NAMES OF ORGANIZATION AND/OR PERSONS INVOLVED

Bartenders Union Local OIA 75      Mr. [Redacted]

3. DATE(S) OF PARTICIPATION AND LOCALE OF ACTIVITY

On call different days of the week.  
914 F Street, N. W.  
Washington, D. C.

4. REMARKS

In engaging in the requested activity I will make no reference to, or discuss my CIA assignments or duties nor will I make reference to or discuss my CIA employment except as authorized by Headquarters Regulation 10-7.

*[Signature]*  
SIGNATURE OF REQUESTING EMPLOYEE

5. CONCURRENCES AND/OR APPROVAL WITHIN OPERATING OFFICE

(signed) John M. Wigglesworth  
[Redacted]  
Chief, RID/ADMIN

FOR COMPLETION BY EMPLOYEE ACTIVITY BRANCH AND RETURN OF ORIGINAL TO EMPLOYEE

*[Handwritten initials]*

*20 Apr 62*  
*W.A. [Signature]*

Standard Form No. 1002  
CHAPTER I, SUBCHAPTER 1  
5, GOVERNMENT

**HEALTH BENEFITS REGISTRATION FORM\***  
FEDERAL EMPLOYERS HEALTH BENEFITS ACT OF 1959

4536490

**PART A**  
ALL WHO DESIRE MUST FILL IN THIS PART

1. NAME (LAST, FIRST, MIDDLE INITIAL) FLORES, LUIS

2. DATE OF BIRTH (Month, Day, Year) 11/15/52

3. Are you now married? YES  NO

4. YOUR MAILING ADDRESS (NUMBER AND STREET, CITY AND ZONE NUMBER, STATE) 1177 1/2 ...

5. Are you covered by, or is any family member covered by, or enrolling in a plan under the Federal Employees Health Benefits Act of 1959 (through the agency or another United States or District of Columbia Government agency or consultant)? YES  NO

6. Place an "X" in proper box to show your annual basic salary range:  
 UNDER \$1,000  \$1,000 TO \$1,999  \$2,000 TO \$2,999  \$3,000 TO \$3,999  \$4,000 TO \$4,999  \$5,000 TO \$5,999  \$6,000 TO \$6,999  \$7,000 TO \$7,999  \$8,000 TO \$8,999  \$9,000 TO \$9,999  \$10,000 TO \$10,999  \$11,000 TO \$11,999  \$12,000 TO \$12,999  \$13,000 TO \$13,999  \$14,000 TO \$14,999  \$15,000 TO \$15,999  \$16,000 TO \$16,999  \$17,000 TO \$17,999  \$18,000 TO \$18,999  \$19,000 TO \$19,999  \$20,000 TO \$20,999  \$21,000 TO \$21,999  \$22,000 TO \$22,999  \$23,000 TO \$23,999  \$24,000 TO \$24,999  \$25,000 TO \$25,999  \$26,000 TO \$26,999  \$27,000 TO \$27,999  \$28,000 TO \$28,999  \$29,000 TO \$29,999  \$30,000 TO \$30,999  \$31,000 TO \$31,999  \$32,000 TO \$32,999  \$33,000 TO \$33,999  \$34,000 TO \$34,999  \$35,000 TO \$35,999  \$36,000 TO \$36,999  \$37,000 TO \$37,999  \$38,000 TO \$38,999  \$39,000 TO \$39,999  \$40,000 TO \$40,999  \$41,000 TO \$41,999  \$42,000 TO \$42,999  \$43,000 TO \$43,999  \$44,000 TO \$44,999  \$45,000 TO \$45,999  \$46,000 TO 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CONFIDENTIAL  
(when filled in)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents  
of Handbook 20-4, Employee Conduct, dated 29 August 1961.

*David Lopez*  
Signature

18 March 1962  
Date

CONFIDENTIAL

## APPOINTMENT AFFIDAVITS

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

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D. C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, FLORES, DANIEL, do solemnly swear (or affirm) that—

### A. OATH OF OFFICE

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

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

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

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

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

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

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

### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

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

11 March 1962

(Date of entrance on duty)

*Daniel Flores*

(Signature of appointee)

Subscribed and sworn before me this 12th day of March A. D. 19 62.

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

[SEAL]

*Shelby L. Lewis*

(Signature of official)

Appointment Clerk

(Title)

NOTE — The oath of office must be administered by a person specified in 5 U. S. C. 18 or by a person designated to administer oaths under Section 206, Act of June 10, 1943, 5 U. S. C. 106. If by a Notary Public, the date of expiration of his commission should be shown.

## DECLARATION OF APPOINTEE

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

PRESENT ADDRESS (Street and number, city and State) \_\_\_\_\_ **WASHINGTON 8, D.C.**

(B) PLACE OF BIRTH (City and State or city and foreign country) \_\_\_\_\_ **SAN MARCOS, TEXAS**

(A) IN CASE OF EMERGENCY, PLEASE NOTIFY \_\_\_\_\_ **MRS. DORRIS TOLLES**

(B) RELATIONSHIP \_\_\_\_\_ **WIFE**

(C) STREET AND NUMBER, CITY AND STATE \_\_\_\_\_ **14 W. WASH, S. DC**

(D) TELEPHONE NO. \_\_\_\_\_ **265-5522**

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

If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 13

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

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
8 (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA OR (B) AS A NATIVE OR AMERICAN-BORN DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?	X		10 (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT?		X
9 ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in Item 13		X	(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?		X
10 DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PERIOD OF OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give details in Item 13		X	11 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
11 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED OR FILED BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AGENCIES FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCE? DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$25 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED. If your answer is "Yes," give in Item 13 for each case, (1) approximate date, (2) charge, (3) place, (4) action taken.		X	B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
12 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EMPLOYMENT OR ACCEPTING THIS SERVICE APPOINTMENT? If your answer is "Yes," give dates of and reasons for such department in Item 13		X	C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS? If your answer to A, B or C is "Yes," give details in Item 13 as to date, as you can remember, including the name and address of employer, approximate date, and reasons in each case		X

13 OTHER FOR (A) TALKED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)

ITEM NO. \_\_\_\_\_

ITEM NO. \_\_\_\_\_

**INSTRUCTIONS TO APPLICANTS (OFFICER)** You must determine that the appointment award is in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment. The form should be checked for the signing of other persons, any record of record of charges or arrest, age, citizenship, and name. Note of terms. Also to establish the identity of the appointee, you should postmark check (1) by signature and handwriting against the application and in other pertinent papers and (2) by the appointing officer against the medical certificate.



STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE  
 AND DETERMINATION OF COMPETITIVE STATUS

IMPORTANT: The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I.—EMPLOYEE'S STATEMENT

PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial) **FLORES, DANIEL**

2. DATE OF BIRTH

9. RETENTION GROUP

10. A. CIVIL STATUS  YES  NO  
 B. TYPE OF PRESENT APPOINTMENT

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

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF RETURN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	

11. SERVICE

YEAR	MONTH	DAY

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

BRANCH	FROM—			TO—			DISCHARGE (Hon or dishon?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
UNITED STATES MARINE CORPS	1957	JULY	25	1961	JULY	25	HONORABLE

12. TOTAL SERVICE

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR?  YES  NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.

TYPE IF KNOWN (LWOP, Full, Susp, AWOL, Mes Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

13. NONCREDITABLE SERVICE (Leave purposes only)

14. NONCREDITABLE SERVICE (RIF purposes only)

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS?  YES  NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)

15. REEMPLOYMENT RIGHTS  YES  NO

16. RETENTION RIGHTS  YES  NO

7. ARE YOU  
 A. THE WIFE OF A DISABLED VETERAN?  YES  NO  
 B. THE SISTER OF A DECEASED OR DISABLED VETERAN?  YES  NO  
 C. THE UNREMARKED SPOUSE OF A VETERAN?  YES  NO

17. EXPIRATION DATE OF RETENTION RIGHTS

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

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

12 March 1962 (DATE)

Daniel Flores (SIGNATURE)

Subscribed and sworn to before me on this 12th day of Mar 1962 at Washington, D.C. (LOCATION) (DATE)

Shirley L. Smith (SIGNATURE)

SEAL

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

INSTRUCTIONS: To do this form on the personnel side of the employee's official personnel folder immediately before or after the personnel office interview.

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(When Filled In)

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave of government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. The original of this form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) <b>FLORES</b>	(First) <b>DANIEL</b>	(Middle) <b>CR</b>	SOCIAL SECURITY NUMBER
--	--------------------------	-----------------------	------------------------

**1. RESIDENCE DATA**

PLACE OF RESIDENCE WHEN INITIALLY APPOINTED <b>WASH DC</b>	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <b>WASH DC</b>	HOME LEAVE RESIDENCE

**2. MARITAL STATUS (Check one)**

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

IF MARRIED, PLACE OF MARRIAGE  
**LIMA, PERU, SOUTH AMERICA**

DATE OF MARRIAGE  
**DEC 14, 1961**

IF DIVORCED, PLACE OF DIVORCE DECREE

DATE OF DECREE

IF WIDOWED, PLACE SPOUSE DIED

DATE SPOUSE DIED

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)

**3. MEMBERS OF FAMILY**

ADDRESSES (No., Street, City, Zone, State)	TELEPHONE NO.
<b>N.W.</b>	<b>265-8322</b>
NAMES OF CHILDREN	DATE OF BIRTH
NAME OF FATHER (Or male guardian)	TELEPHONE NO.
<b>SAN MIGUEL TENS</b>	
NAME OF MOTHER (Or female guardian)	TELEPHONE NO.
<b>SAN MIGUEL TENS</b>	

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

**4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY**

NAME (Mr., Mrs., Miss) <b>FLORES</b>	RELATIONSHIP <b>WIFE</b>
HOME ADDRESS (No., Street, City, Zone, State) <b>WASH DC</b>	HOME TELEPHONE NUMBER <b>265-5322</b>
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE <b>WASHINGTON DC</b>	BUSINESS TELEPHONE & EXTENSION <b>RE 7-5444</b>

IS THE INDIVIDUAL NAMED ABOVE SITTING AT YOUR AGENCY APPLICATION? (If "No" give name and address of organization he believes you work for.)	YES	NO
		<b>X</b>
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)	YES	NO
		<b>X</b>
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 5.)	YES	NO
		<b>X</b>

The persons named in item 3 above may also be notified in case of emergency. If such notification is not desirable because of health or other reasons, please so state in item 6 on the reverse side of this form.

**CURRENT RESIDENCE AND DEPENDENCY REPORT**

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(When Filled In)

4. VOLUNTARY ENTRIES

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

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

UNION TRUST Co, WASH. D.C. - DANIEL CR [ ] FLORES  
BANK OF CALIFORNIA, PORTLAND ORE, DANIEL CR [ ] FLORES

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

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  
 YES  NO. (If "Yes" give name(s) and address)

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

5. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT: Washington DC DATE: March 12 1962 SIGNATURE: Daniel X Flores

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INTERNAL USE ONLY

UNCLASSIFIED

**REQUEST FOR MEDICAL EVALUATION**

12 Sept 77

APPLICANT HAS APPLICANT PREVIOUSLY BEEN SEEN BY OMS  YES  NO

1. NAME (Last, First, Middle)  
**Llores, Daniel**

3. GRADE **13 All** 4. DUTY STATION **BDO/LA** 5. SOCIAL SECURITY NO. **5270** 6. POSITION **Ops Officer**

13. DEPENDENT NAME (Last, First, Middle)	14. SOC SEC NO.	15. SEX	16. DORMITORY	17. RELATIONSHIP	18. DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)
		F		wife	yes
		F		dau	yes

20. REQUESTED ACTION (see instructions on back of form)

APPLICANT	PRE EMPLOYMENT	STATION	EOD	STD STATUS (M/F/R)	NO. OF DEPENDENTS TO ACCOMPANY ON RETURN
	<input checked="" type="checkbox"/> USPCS			14 Oct 77	2
ASSIGNMENTS	<input type="checkbox"/> US TDY			Ops Officer	
	<input type="checkbox"/> US RETURNEE				
	<input type="checkbox"/> US TOY STANDBY				
	<input type="checkbox"/> US PLANNING				
SEPARATION	<input type="checkbox"/> RETIREMENT				
ROUTINE	<input type="checkbox"/> REGULAR ANNUAL				
	<input type="checkbox"/> EXECUTIVE ANNUAL				

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

22. REQUESTING OFFICER'S OFFICE DIV **DIX/LA/PERS** 23. ROOM/BLOG **31313 Jng** 24. EXTENSION **5270** 25. SIGNATURE OF REQUESTING OFFICER

FOR APPLICANTS					FOR OMS USE ONLY	
APPROVE PROCESSING FOR EOD					DATE _____ OMS SIGNATURE _____	
HOLD PENDING RECEIPT OF ADDITIONAL MEDICAL INFORMATION (see instructions)						
REQUEST PRE EMP MEDICAL EVALUATION						
OTHER (see instructions)						
FOR OTHER ACTIONS					COMMENTS	
REQUESTED ACTION	QUAL	COND QUAL	DEFER	DISQUAL	QUALIFIED FOR OMS. OMS MUST BE EVALUATED PRIOR TO FUTURE OMS. 26 OCT 1977	
DATE _____					DATE _____ OMS SIGNATURE _____	

UNCLASSIFIED  INTERNAL USE ONLY  CONFIDENTIAL  SECRET 8.2 IMPROVED BY

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION			1. DATE OF REQUEST						
2. NAME (Last, First, Middle) <b>Flores, Daniel</b> DOB: <input type="text"/>		3. POSITION TITLE <b>Instructor</b>	<b>28 July 1976</b>						
5. OFFICE DIVISION BRANCH <b>OTR/FTD/OTB</b>		4. GRADE <b>GS-12</b>							
		6. EMPLOYEE'S EXT. <b>5101</b>							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/TDY	<table border="1"><tr><td>ETD</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCB</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr></table>		ETD	STATION	TDY OR PCB	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED
ETD									
STATION									
TDY OR PCB									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED									
<input type="checkbox"/> ENTRANCE ON DUTY	<input type="checkbox"/> OVERSEAS ASSIGNMENT								
<input checked="" type="checkbox"/> TDY STANDBY									
<input type="checkbox"/> SPECIAL TRAINING									
<input type="checkbox"/> ANNUAL									
<input type="checkbox"/> RETURN TO DUTY	<input type="checkbox"/> RETURN FROM OVERSEAS								
<input type="checkbox"/> FITNESS FOR DUTY		<table border="1"><tr><td>ETA</td></tr><tr><td>STATION</td></tr><tr><td>NO. OF DEP.'S</td></tr></table>		ETA	STATION	NO. OF DEP.'S			
ETA									
STATION									
NO. OF DEP.'S									
<input type="checkbox"/> MEDICAL RETIREMENT									
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER							
<input type="checkbox"/> YES	SIGNATURE		<input type="text"/>						
<input type="checkbox"/> NO	ROOM NO. & BUILDING								
	<b>6057 Hqs</b>	EXT.	<b>5101</b>						
10. COMMENTS									
<b>Destination: World-Wide</b>									
11. REPORT OF EVALUATION									
<b>Qualified for TDY Standby until 1 August 1978.</b>									
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF							
<b>31 August 1976</b>		<input type="text"/> <b>ONS/PEO</b>							

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
		18 June 1976	
2. NAME (Last, First, Middle) Flores, Daniel		3. POSITION TITLE Instructor	4. GRADE GS-13
5. OFFICE DIVISION BRANCH OTR/FTD/OTB		6. EMPLOYEE'S EXT. 5191	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQS/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input checked="" type="checkbox"/> TDY STANDBY		ETA	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		TDY OR PCS	
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER	
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES		SIGNATURE	
<input type="checkbox"/> NO		ROOM NO. & BUILDING	
		EXT.	
		6057 Hqs. 5191	
10. COMMENTS			
11. REPORT OF EVALUATION			
Qualified for TDY Standby until 1 August 1978.			
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF	
31 August 1976		OMS/PEO	

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) <b>Flores, Daniel (NMN) 4-35</b>		3. POSITION TITLE <b>Ops Officer</b>	4. GRADE <b>GS-12</b>
5. OFFICE DIVISION BRANCH <b>DDO/LA/COG</b>		6. EMPLOYEE'S EXT. <b>7265</b>	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQS/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input checked="" type="checkbox"/> TDY STANDBY		ETD	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		TDY OR PCS	
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER	
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
8. OVERSEAS PLANNING EVALUATIONS (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES		SIGNATURE	
<input type="checkbox"/> NO		[Signature] <b>LA/Trng</b>	
		ROOM NO & BUILDING <b>3D5317 Hqs</b>	EXT. <b>7431</b>
10. COMMENTS			
11. REPORT OF EVALUATION			
Disposition deferred until subject fulfills medical requirements.			
DATE <b>1 April 1975</b>		SIGNATURE FOR CHIEF OF MEDICAL STAFF [Signature] <b>O4S/Registrar</b>	

**SECRET**

1. NAME (Last, First, Middle) <b>Flores, Daniel</b>		2. DATE OF BIRTH [ ]	3. GRADE <b>GS-10</b>
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) <b>DDP/WIL</b> [ ]		5. PRESENT POSITION <b>0376</b>	6. EMPLOYEE EXTENSION <b>7431</b>
7. PROPOSED STATION [ ]		8. PROPOSED POSITION (Title, Number, Grade) <b>Ops Officer/0636/GS-13</b>	
9. TYPE OF COVER AT NEW STATION [ ]	10. ESTIMATED DATE OF DEPARTURE <b>Sept 71</b>	11. NO. OF DEPENDENTS TO ACCOMPANY <b>two</b>	
12. COMMENTS  Vice: [ ] Please schedule appointments week of 31 May 1971/  Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the station. [ ] [ ] <i>2576/S06 13 May 71</i>			
13. DATE OF REQUEST <b>11 Mar 71</b>	OFFICIAL [ ]	15. ROOM NUMBER AND BUILDING <b>3D 5309 Hqs</b>	16. EXTENSION <b>7431</b>
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION  15 JUN 1971  QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS [ ] (Chairman, Overseas Candidate Review Panel)			
<b>REQUEST FOR PCS OVERSEAS EVALUATION</b>			



SECRET  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST: <b>11 Mar 71</b>
2. NAME (Last, First, Middle) <b>Flores, Daniel (Dependents of)</b>	3. POSITION TITLE <b>Ops Officer</b>	4. GRADE <b>GS-10</b>
5. OFFICE DIVISION BRANCH <b>DDP/WH</b>	6. EMPLOYEE'S EXT. <b>7431</b>	

7. PURPOSE OF EVALUATION

<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/IDY
<input type="checkbox"/> ENTRANCE ON DUTY	<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT
<input type="checkbox"/> TDY STANDBY	ETD <b>September 1971</b>
<input type="checkbox"/> SPECIAL TRAINING	STATION [ ]
<input type="checkbox"/> ANNUAL	TDY OR PCS <b>PCS</b>
<input type="checkbox"/> RETURN TO DUTY	TYPE OF COVER [ ]
<input type="checkbox"/> FITNESS FOR DUTY	NO. OF DEPENDENTS TO ACCOMPANY <b>Two</b>
<input type="checkbox"/> MEDICAL RETIREMENT	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED [ ]
	<input type="checkbox"/> RETURN FROM OVERSEAS
	ETA [ ]
	STATION [ ]
	NO. OF DEP.'S [ ]

8. OVERSEAS PLANNING EVALUATION (One Mark must be checked)	9. REQUESTING OFFICER
<input checked="" type="checkbox"/> YES	SIGNATURE [ ]
<input type="checkbox"/> NO	ROOM NO & BUILDING <b>3D 5300 Eqs</b>
	EXT. <b>7431</b>

10. COMMENTS

[ ] **wife** [ ]  
**dau**

**Please schedule appointments week of 31 May 1971.**

11. REPORT OF EVALUATION  
[ ] **Quarrelled with GS PCS** **16 8 7R**

DATE [ ] SIGNATURE FOR CHIEF OF MEDICAL STAFF [ ]

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) <b>Flores, Daniel (Dependents of)</b>		<b>11 Mar 71</b>	
3. POSITION TITLE <b>Ops Officer</b>		4. GRADE <b>GS-10</b>	
5. OFFICE DIVISION BRANCH <b>DDP/WL</b>		6. EMPLOYEE'S EXT. <b>7431</b>	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/TDY	<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT	
<input type="checkbox"/> ENTRANCE ON DUTY	<input type="checkbox"/> TDY OR PCS		ETA <b>September 1971</b>
<input type="checkbox"/> TDY STANDBY	<input type="checkbox"/> SPECIAL TRAINING		STATION
<input type="checkbox"/> ANNUAL	<input type="checkbox"/> RETURN TO DUTY		<b>PCS</b>
<input type="checkbox"/> RETURN TO DUTY	<input type="checkbox"/> FITNESS FOR DUTY		TYPE OF COVER
<input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> MEDICAL RETIREMENT	NO. OF DEPENDENTS TO ACCOMPANY <b>Two</b>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> RETURN FROM OVERSEAS		
<input type="checkbox"/> NO	9. REQUESTING OFFICER		
SIGNATURE		ETA	
ROOM NO. & BUILDING <b>3D 5300 Hqs</b>		STATION	
		NO. OF DEP.'S <b>7431</b>	

10. COMMENTS		
<input type="checkbox"/>	<b>wife</b>	<input type="checkbox"/>
<input type="checkbox"/>	<b>dau</b>	<input type="checkbox"/>
<b>Please schedule appointments week of 31 May 1971.</b>		
11. REPORT OF EVALUATION		DATE
SIGNATURE FOR CHIEF OF MEDICAL STAFF		<b>16 0 71</b>

SECRET

1. PROPOSER'S NAME (Last, First, Middle Initial) [Redacted]		[Redacted]		[Redacted]	
4. OFFICE, DIVISION, BRANCH (of overseas station and [Redacted])			5. PROPOSED POSITION (Title, Number, Grade) [Redacted]		6. TELEPHONE EXTENSION [Redacted]
7. PROPOSED STATION [Redacted]			8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/0030/OS-13		
9. TYPE OF COVER AT NEW STATION [Redacted]			10. ESTIMATED DATE OF DEPARTURE [Redacted]		11. NO. OF DEPENDENTS TO ACCOMPANY [Redacted]
12. COMMENTS <b>Vico:</b> [Redacted] Please schedule appointments week of 31 May 1971/  Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.					
13. DATE OF REQUEST 11 Mar 71		14. SIGNATURE OF REQUESTING OFFICIAL [Redacted]		15. ROOM NUMBER AND BUILDING, G. EXTENSION 3D 5309 Bldg 7431	
17. OFFERED BY <b>Qualified Overseas POB</b>  11 June 1971 [Redacted] OMS/pro					
16. OFFICE OF SECURITY DISPOSITION					
18. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION					
REQUEST FOR PCS OVERSEAS EVALUATION					

**SECRET**

1. NAME (Last, First, Middle) <b>Flores, Daniel</b>		2. DATE OF BIRTH [REDACTED]	3. GRADE <b>GS-08</b>
4. OFFICE DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) <b>DDP/WII/4</b>		5. PRESENT POSITION <b>Ops Officer</b>	6. EMPLOYEE EXTENSION <b>6815</b>
7. PROPOSED STATION [REDACTED]		8. PROPOSED POSITION (Title, Number, Grade) <b>Ops Off 0376 GS-09</b>	
9. TYPE OF COVER AT NEW STATION [REDACTED]		10. ESTIMATED DATE OF DEPARTURE <b>o/a 27 April 69</b>	11. NO. OF DEPENDENTS TO ACCOMPANY <b>1</b>
12. COMMENTS  <p><b>VICE</b> [REDACTED] [REDACTED] <b>89'B ATTACHED.</b></p> <p align="right"><i>[Signature]</i> <b>10 MAR 1969</b></p>			
13. DATE OF REQUEST <b>6 March 1969</b>	14. [REDACTED]	15. ROOM NUMBER AND BUILDING <b>3D5309 Hqs.</b>	16. EXTENSION <b>6815</b>
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <b>25 MAR 1969</b> QUALIFIED [REDACTED] <b>AT</b> CHAIRMAN, OVERSEAS [REDACTED]			
<b>REQUEST FOR PCS OVERSEAS EVALUATION</b>			

**SECRET**  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST <b>6 March 1969</b>
2. NAME (Last, First, Middle) <b>Flores, Daniel (dependent)</b>		3. POSITION TITLE <b>Ops Officer</b>
4. OFFICE, DIVISION, BRANCH <b>DDP/WII/4</b>		5. EMPLOYEE'S EXT. <b>6815</b>

2. PURPOSE OF EVALUATION	
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HOUS/ TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT  <div style="border: 1px solid black; padding: 2px;">         PTD.  <b>o/a 27 April 1969</b>          STATION  <input type="text"/>          TDY OR PCS  <b>PCS</b>          TYPE OF COVER  <input type="text"/>          NO. OF DEPENDENTS TO ACCOMPANY  <b>1</b>          NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (OP 50) ATTACHED  <b>1</b> </div> <input type="checkbox"/> RETURN FROM OVERSEAS  <div style="border: 1px solid black; padding: 2px;">         LTA          STATION          NO. OF DEP.'S       </div>

6. OVERSEAS PLANNING EVALUATION (One block must be checked)  <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	9. REQUESTING OFFICER SIGNATURE <input type="text"/> <b>WII/Personnel</b> ROOM NO. & BUILDING <b>3D5309 Hqs.</b>
8. EXT. <b>6815</b>	

10. COMMENTS  Wife - <input type="text"/> - <input type="text"/>	
11. REPORT SUBJECT QUALIFIED FOR PROPOSED OS PCS	
DATE <input type="text"/>	SIGNATURE FOR CHIEF OF MEDICAL STAFF <input type="text"/>

SECRET

1. NAME (Last, First, Middle) <b>Flores, Daniel</b>		7. DATE OF BIRTH [REDACTED]	3. GRADE <b>GS-09</b>
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) <b>DDP/WI/4</b>		5. PRESENT POSITION <b>Ops Officer</b>	6. EMPLOYEE EXTENSION <b>6815</b>
7. PROPOSED STATION [REDACTED]		8. PROPOSED POSITION (Title, Number, Grade) <b>Ops Off 0376 GS-09</b>	
9. TYPE OF COVER AT NEW STATION [REDACTED]		10. ESTIMATED DATE OF DEPARTURE <b>o/a 27 April 69</b>	11. NO. OF DEPENDENTS TO ACCOMPANY <b>1</b>
12. COMMENTS  <b>VICE</b> [REDACTED] [REDACTED]  <b>83's ATTACHED.</b>			
13. DATE OF REQUEST <b>6 March 1969</b>	14. SIGNATURE OF REQUESTING OFFICIAL [REDACTED]	15. ROOM NUMBER AND BUILDING <b>3D6309 Hqs.</b>	16. EXTENSION <b>6815</b>
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <b>MEDICALLY QUALIFIED FOR PROPOSED OS PCS.</b> [REDACTED]			
<b>13 21 69</b>			
<b>REQUEST FOR PCS OVERSEAS EVALUATION</b>			

SECRET  
(When Filled In)

70

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST 6 October 1961										
2. NAME (Last, First, Middle) FIORIS, DANIEL		3. POSITION TITLE File Clerk	4. GRADE GS-04									
5. OFFICE, DIVISION, BRANCH DDP/OPER		6. EMPLOYEE'S EXT.										
7. PURPOSE OF EVALUATION												
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input checked="" type="checkbox"/> <del>XXXXXXXXXXXXXXXXXX</del>  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1"> <tr><td>ETD</td></tr> <tr><td>STATION</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS  <table border="1"> <tr><td>EIA</td></tr> <tr><td>STATION</td></tr> <tr><td>NO. OF DEPTS</td></tr> </table>		ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	EIA	STATION	NO. OF DEPTS
ETD												
STATION												
TDY OR PCS												
TYPE OF COVER												
NO. OF DEPENDENTS TO ACCOMPANY												
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED												
EIA												
STATION												
NO. OF DEPTS												
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER										
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE Chirley Wells ROOM NO. & BUILDING BOL 1016 16th Street										
		EXT. 2781										

10. REPORT OF EVALUATION	
101732 2MARI	
101732 2MARI	
DATE 22 NOV 61	SIGNATURE FOR CHIEF OF MEDICAL STAFF OFFICE OF THE CHIEF OF MEDICAL STAFF

CONFIDENTIAL  
(When Filled In)

REQUEST FOR PRE-EMPLOYMENT MEDICAL EVALUATION		1. DATE
2. NAME (Last) (First) (Middle) FLORES, DANIEL		3. SEX <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
4. ORGANIZATIONAL ASSIGNMENT DDP/OPSER	5. POSITION, TITLE AND GRADE File Clerk GS-C4	
6. MEDICAL STAFF REQUESTED TO CHECK DESIRED ACTION BELOW, RETURN ORIGINAL COPY TO OFFICE OF PERSONNEL.		
<input type="checkbox"/> Approve Processing For E. O. D.	<input checked="" type="checkbox"/> Hold Pending Receipt of Additional Medical Information (Form Letters Attached)	<input checked="" type="checkbox"/> Request Pre-Employment Medical Examination
7. REMARKS 259 Forwarded as of 6 October 1961		
SIGNATURE FOR MEDICAL STAFF		

FORM NO. 570  
1 MAY 55

Obsolete Previous Editions

CONFIDENTIAL

(4)



SECRET  
(When Filled In)

*File*

### QUALIFICATIONS UPDATE

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

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 58-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

#### SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. <b>036130</b>	NAME (Last-First-Middle) <b>Flores, Daniel</b>	DATE OF BIRTH <input type="text"/>
--------------------------------	---	---------------------------------------

#### SECTION II EDUCATION

##### HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED <input type="text"/>	ADDRESS (City, State, Country) <input type="text"/>	YEARS ATTENDED (From-To) <input type="text"/>	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--	--	--

##### COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/CTR. HRS. (Specify)
	MAJOR	MINOR				
1. <i>American University, Washington, DC</i>	<i>Political Science</i>		<i>1962-1967</i>	<i>B.A.</i>	<i>1967</i>	<i>120 hrs</i>
2.						

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

#### TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

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

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

#### SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY.				
2. NAME OF SPOUSE (Last) (First) (Middle) ( Maiden)				
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)			
5. OCCUPATION	6. PRESENT EMPLOYER			
7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	

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

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT RECORD
1	<input type="checkbox"/> ADD				
2	<input type="checkbox"/> DELETE				
3	<input type="checkbox"/> ADD				
4	<input type="checkbox"/> DELETE				

FORM 444-1 8-66

SECRET

**SECRET**  
(When Filled In)

SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK LIST		
				TRAVEL	STUDY	WORK ASSIGNMENT
			Jul 30 '58	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION VI - TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (FPM) <input type="checkbox"/>	2. SHORTHAND (W/M) <input type="checkbox"/>
3. INDICATE SHORTHAND SYSTEM USED - CHECK ALL APPROPRIATE ITEM	
<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING
<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:

SECTION VII - SPECIAL QUALIFICATIONS
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED

SECTION VIII - MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? <input type="checkbox"/> YES <input type="checkbox"/> NO	2. NEW CLASSIFICATION
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS	
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK
3. EXPIRATION DATE OF CURRENT OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED	
5. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED

MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)			
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	
			<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED

SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS			
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO

SECTION X - EMPLOYERS

21 June 1961

**SECRET**

Name: Daniel, Daniel  
 Date of Birth: 4-8-35  
 Place of Birth: San Marco, Texas

Date & Place of Birth: 4-8-35, San Marco, Texas

HS  
 P  
 F  
 X

THE AMERICAN COLLEGE  
 WASHINGTON, DISTRICT OF COLUMBIA

ADMISSION RECORD: Full Standing

PREVIOUS RECORD: San Marcos High School, Texas 5/55

TOOLS OF RESEARCH PASSED:

COMPREHENSIVE EXAMINATIONS PASSED:

CATALOG NUMBER	TITLE OF COURSE	SEM.	GRADE	CREDITS
	NEW STUDENT NUMBER			
10306	INTRO ACCOUNTING I	3	C	3
37458	ADV SPANISH II	3	A	3
53511	MODERN POLIT THEORY	3	A	3
	SUMMER 1966			
	COLLEGE OF ARTS & SCIENCES			
24931	RUSSIA SINCE 1917	3	C	3
37550	ICHRN ADV SPAN II	3	B	3
47376	PROB RELIG THOUGHT	3	C	3
	FALL 1966			
	COLLEGE OF ARTS & SCIENCES			
33450	CONTEMP INT POLIT	3	B	3
33584	LATIN AMER SEM I	9	A	27
37550	GOLDEN AGE NOVEL	3	A	3
53548	GOV & POL LAT AMER	3	C	3
	SPRING 1967			
	COLLEGE OF ARTS & SCIENCES			
33440	INTERNATL LAW & ORGANIZA	3	B	3
33529	LAT AMER INTERNATL RELA	3	A	3
37354	MODERN SPANISH DRAMA	3	B	3
37551	SPANISH 19TH C NOVEL	3	B	3
53150	U S POLITICAL SYSTEM I	3	C	3

COURSE NUMBER	TITLE OF COURSE	SEM.	GRADE	CREDITS
	FALL 62			
1100	INTRO ECONOMICS I	3	C	3
1100	ENGLISH COMP I	3	C	3
1100	BACKGROUNDS CIV I	3	D	3
1100	INTRO WORLD POL	3	C	3
	SPR 63			
1100	INTRO ECONOMICS II	3	D	3
1100	AMERICAN GOVT NATL	3	D	3
2101	ENGLISH COMP II	3	F	3
2101	BACKGROUNDS CIV II	3	C	3
	FALL 1963			
3101	COMP & READING II	3	B	3
3102	GEOM ANAL INCOME	3	F	3
	SPRING 1964			
3101	INTRO PHILOSOPHY	3	C	3
3101	WEST GOVT ST & SOC	3	F	3
	SPRING 1965			
3101	GENERAL BIOLOGY	3	C	3
3102	INTRO POL INT POWRS	3	B	3
3101	WEST GOVT PHILOSOPHY	3	C	3
3102	STATE GOVERNMENT	3	B	3
	SUMMER 1965			
3101	LANG SCIENCES	3	B	3
3102	INT & MOD INSTANT (Course cancelled by Univ.)			
	FALL 1965			
3101	INTERNATL LAW 460-48-6230			
3101	INTRO LATIN AMER	3	A	3
3101	CONTEMP POLIT	3	C	3
3101	CONTEMP GOVTS	3	C	3
3101	GOV & POL INT AMER	3	C	3
3101	GENERAL PSYCHOLOGY	3	D	3
	SPRING 1966			
	COLLEGE OF ARTS & SCIENCES			
3101	INTRO POL INT POWRS	3	A	3
3101	CONTEMP POLIT	3	A	3

TERMINATION: Summer  
 Dates: Spring 1966, Fall 1966.

REGISTRATION FEE: \$10.00

THE AMERICAN COLLEGE  
 WASHINGTON, DISTRICT OF COLUMBIA

JUL 12 1967

*John E. Brown*

SECRET

(When Filled In)

AFSA

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*llc*

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

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

SECTION I

BIOGRAPHIC AND POSITION DATA

1 EMP SER NO 086130	2 NAME (Last, First, Middle) FLORES DANIEL	3 SEX	4 DATE OF BIRTH	5 SCHEDULE GRADE STEP GS-05-04
6 SO D	7 POSITION TITLE INTELLIGENCE CLERK	8 OFFICE OF ASSIGNMENT WH	9 LOCATION (Agency, City) WASH, D.C.	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	DATE SOLA	FROM	TO
NO OVERSEAS SERVICE			

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC  
DOWNGRADING AND  
DECLASSIFICATION

BT MAY ENIC

28711

**SECRET**

When Filled In

SECTION III							EDUCATION (Cont'd)		
HIGH SCHOOL									
LAST HIGH SCHOOL ATTENDED		ADDRESS (City, State, County)		YEARS ATTENDED FROM TO	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO				
COLLEGE OR UNIVERSITY STUDY									
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM / QTR (MOS. (Specify))			
	MAJOR	MINOR							
1 The American University Washington, D.C.	Pol.Sci.	Spanish Literature	1962 - 1967	A degree will be conferred in July 1967.		11 1/2 Sem. Hrs.			
2									
3									
4									
5 IF A GRADUATE DEGREE HAS BEEN LISTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT									
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS									
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS				
1									
2									
3									
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE									
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS				
1									
2									
3									
4									
5									
AGENCY SPONSORED EDUCATION									
Specify which, if any, of the education shown in Section III was Agency sponsored									
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS				
1									
2									
3									
4									
5									

SECRET

(When Filled In)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			CHECK IF WORK ASSIGNMENT
				RESEARCH	TRAVEL	STUDY	
Bolivia	Economic, topographic, cultural and political.	Nov. 1959- Jan. 1960	American Univ. 1962-1967	X		X	
Peru	Topographic, cultural, and political.	Jan. 1960- Nov. 1960	American Univ. 1962-1967	X		X	
Latin America in general.	Economic, topographic, cultural, and political.		American Univ. 1962-1967			X	

**SECTION V TYPING AND STENOGRAPHIC SKILLS**

1. TYPING (WPM) 45      2. SHORTHAND (WPM) \_\_\_\_\_      3. INDICATE SHORTHAND SYSTEM USED. CHECK IN APPROPRIATE ITEM

GREGG       SPEEDWRITING       STENOTYPE       OTHER SPECIFY \_\_\_\_\_

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comparator, mimeograph, card punch, etc.)

**SECTION VI SPECIAL QUALIFICATIONS**

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, sending & receiving), OFFSET PRESS, TURRET LATHE, LDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.

3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PROF. ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC?  YES  NO

4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number, if known)

5. FIRST LICENSE/CERTIFICATE year of issue \_\_\_\_\_

6. LATEST LICENSE/CERTIFICATE year of issue \_\_\_\_\_

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

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

9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

SECRET  
- 3 -



SECRET  
(When Filled In)

LANGUAGE DATA RECORD			
PART I-GENERAL			
1. NAME (Last-First-Middle) <i>FLORES, RONIEV</i>		2. DATE OF BIRTH (2-1-10) MONTH DAY YEAR	
3. LANGUAGE (11-33) <i>SPANISH 720</i>		4. TODAY'S DATE (14-12) MONTH DAY YEAR <i>MARCH 12 1962</i>	
		<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
<input checked="" type="radio"/> 2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS; NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.			
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.			
<input checked="" type="radio"/> 3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.			
5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
<input checked="" type="radio"/> 1. MY PRONUNCIATION IS NATIVE.			
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.			
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			



CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

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

SECTION E.

Understanding (44)

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

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

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

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

PART IV—CERTIFICATION

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

DATE SIGNED

March 13, 1962

SIGNATURE

David E. Lee

1461

1471

DO NOT USE THIS SPACE		PERSONAL HISTORY STATEMENT		THIS DATE: 8 SEP 69, 1961	
INSTRUCTIONS					
<p>1. Answer all questions completely or check appropriate box. If question is not applicable, write "NA". Write "Unknown" only if you do not know the answer and it cannot be determined from personal records. Use blank space at end of form for extra details on any question for which you have insufficient space.</p> <p>2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.</p> <p>3. Consider your answers carefully. Your signature at the end of this form will certify to their correctness. Careful completion of all applicable questions will permit review of your qualifications to the best advantage.</p>					
SECTION I GENERAL PERSONAL AND PHYSICAL DATA					
1. FULL NAME (Last-First-Middle)		2. AGE		3. SEX	
FLORES, Daniel		26		<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
4. HEIGHT	5. WEIGHT	6. COLOR OF EYES	7. COLOR OF HAIR	8. TYPE COMPLEXION	9. TYPE BUILD
5' 8"	165 lbs.	Brown	Black	Dark	Medium
10. SCARS (Type and Location) Right cheek, one-half inch scar; left upper lip, one-quarter inch scar; both received playing football					
11. OTHER DISTINGUISHING PHYSICAL FEATURES					
None					
12. CURRENT ADDRESS (No., Street, City, Zone, State and Country)			13. PERMANENT ADDRESS (No., Street, City, Zone, State and Country) AND PHONE NO.		
Washington S, D. C.			- Washington O, D.C.		
14. CURRENT PHONE NO.		15. OFFICE PHONE NO. (EXT.)		16. LEGAL RESIDENCE (State, Territory or Country)	
265-8322		None		Washington, District of Columbia	
17. NICKNAMES		18. OTHER NAMES YOU HAVE USED			
Dan		None			
19. INDICATE CIRCUMSTANCES (including Length of Time) UNDER WHICH YOU HAVE EVER USED THESE NAMES					
Personal acquaintances - twelve years					
20. IF LEGAL CHANGE, GIVE PARTICULARS (Date and by what authority)					
NA					
SECTION II POSITION DATA					
1. INDICATE THE TYPE OF WORK OR POSITION FOR WHICH YOU ARE APPLYING					
Any phase of communications; administration; or personnel work.					
2. INDICATE THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT (You will not be considered for any position with a lower entrance salary).			3. DATE AVAILABLE FOR EMPLOYMENT		
\$ 4,250.00			Immediately		
4. INDICATE YOUR WILLINGNESS TO TRAVEL					
<input type="checkbox"/> OCCASIONALLY <input checked="" type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY <input type="checkbox"/> OTHER					
5. INDICATE YOUR WILLINGNESS TO ACCEPT ASSIGNMENT IN THE FOLLOWING LOCATIONS (Check (X) each item applicable)					
<input checked="" type="checkbox"/> WASHINGTON, D. C.		<input type="checkbox"/> ANYWHERE IN U.S.		<input type="checkbox"/> CERTAIN LOCATIONS ONLY (Specify)	
<input checked="" type="checkbox"/> OUTSIDE CONTINENTAL U.S.					
6. INDICATE WHAT RESERVATIONS YOU WOULD PLACE ON ASSIGNMENTS OUTSIDE THE WASHINGTON, D. C. AREA.					
I would be willing to travel within the United States provided said travel would not involve a permanent move whereby my legal residence would be changed. However, it is my wish to live overseas on a permanent basis.					



FORM 444 USE PREVIOUS EDITION.  
11-68

**JOY COONEY**



SECTION IV CONTINUED FROM PAGE 3

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

NA

6. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
NA				

7. MILITARY TRAINING (FULL TIME DUTY IN SPECIALIZED SCHOOLS SUCH AS ORDONANCE, INTELLIGENCE, COMMUNICATIONS, ETC.)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
Marine Security Guard School - Handerson Hall Hq. Marine Corps, Washington 25, D.C.	Security Guard Training	9/22/58	10/31/58	(5 wks)

8. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE.

Weapons Training in Marine Corps.  
Acted as partisan during cold weather training at Bridgeport, California (Pickle Meadows - USMC).

SECTION V FOREIGN LANGUAGE ABILITIES

1. LANGUAGE (List below each language in which you possess any degree of competence. Indicate competence in Read, Write or Speak by placing a check (X) in the appropriate boxes.)	2. COMPETENCE - IN ORDER LISTED R-Read, W-Write, S-Speak							3. HOW ACQUIRED				
	EQUI-VALENT TO NATIVE FLUENCY	FLUENT BUT NOT EQUI-VALENT	ADEQUATE FOR RESEARCH	ADEQUATE FOR TRAVEL	LIMITED KNOWLEDGE	NATIVE OF COUNTRY	PRO-LONGED RES-IDENCE	CONTACT WITH NATIVE SPEAKERS (etc.)	ACADEMIC STUDY (all levels)			
									N	A	S	A
Spanish	X	X	X							X		

2. IF YOU HAVE CHECKED "ACADEMIC STUDY" UNDER "HOW ACQ.," INDICATE LENGTH AND INTENSIVENESS OF STUDY.

NA

3. IF YOU HAVE CHECKED "FLUENT" FOR A LANGUAGE, HAS THIS FLUENCY DIFFERENCES IN SPORADIC AND OCCASIONAL USE?

NA

4. DESCRIBE HOW AS LITERAL INTERPRETER YOU WOULD BE ABLE TO ASSIST IN COMMUNICATIONS AND TRANSLATIONS IN THE SCIENTIFIC, ENGINEERING, TECHNICAL, COMMERCIAL, MEDICAL, EDUCATIONAL, SPECIALIZED, ETC.

Could act as literal interpreter at almost any level.

5. IF YOU HAVE CHECKED "FLUENT" FOR A LANGUAGE, HOW WOULD YOU BE ABLE TO ASSIST IN COMMUNICATIONS AND TRANSLATIONS IN THE SCIENTIFIC, ENGINEERING, TECHNICAL, COMMERCIAL, MEDICAL, EDUCATIONAL, SPECIALIZED, ETC. (YOU MUST BE SPECIFIC.)



SECTION VIII CONTINUED FROM PAGE 1

6. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY OF THE FOLLOWING PROFESSIONS OR SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, OR MEDICAL TECHNICIAN, ETC. YES NO

7. IF YOU HAVE ANSWERED "YES" TO ABOVE, INDICATE KIND OF LICENSE AND STATE (Include License/Registry Number, if known).

NA

8. FIRST LICENSE OR CERTIFICATE (Year of Issuance) LASTEST LICENSE OR CERT. (Year of Issuance)

NA NA

9. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not include unless requested). INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-Fiction or Scientific articles, Technical literature, Novels, Short Stories, Etc.).

None

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

None

11. LIST PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

Have spoken in my father's church and other churches approximately 150 times. Met and assisted public in Embassies during my tour of duty with the Marine Security Guard.

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

None

**SECTION IX EMPLOYMENT HISTORY**

NOTE: (LIST LAST POSITION FIRST.) Indicate chronological history of employment for last 15 years. Account for all periods including casual employment and all periods of unemployment. Give address and state what you did during periods of unemployment. List all civilian employment by a foreign government, regardless of date. In completing item 7, "Description of Duties" consider and describe carefully and describe meaningful, in a true statement.

1. INCLUSIVE DATES (From and To. Do not use "or")	3. NAME OF EMPLOYER (Do not use "a/c")
From 1949 to 1953	Walburn's Drug Store
2. ADDRESS (No. street, City, State, Country)	
San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Drug Store	Mr. [redacted]
6. TITLE OF JOB	7. SALARY OR BASIC PAY CLASS GRADE (If Federal Service, list grade)
Fountain Attendant	\$122.00 per month
8. DESCRIPTION OF DUTIES	
Employee at soda counter	
9. REASONS FOR LEAVING	
To participate in school events (football).	

SECTION IX CONTINUED FROM PAGE 1

SECTION II - EMPLOYER KNOWLEDGE	
1. INCLUSIVE DATES (From and To - By No. and St.) July 1955 - June 1956	2. NAME OF EMPLOYING FIRM OR AGENCY Diamond Grocery Store
3. ADDRESS (No., Street, City, State, Country) South Guadalupe St. San Marcos, Texas	4. NAME OF SUPERVISOR Mr. [REDACTED]
5. KIND OF BUSINESS Grocery Store	6. TITLE OF JOB Butcher
7. SALARY OR EARNINGS \$20.00 PER WEEK	8. CLASS GRADE (If Federal Service)
9. DESCRIPTION OF DUTIES Slaughtering and preparing meat for sale as well as actual selling.	
10. REASONS FOR LEAVING To attend college?	
1. INCLUSIVE DATES (From and To - By No. and St.) May, 1955 - September, 1955	2. NAME OF EMPLOYING FIRM OR AGENCY San Marcos Baptist Academy
3. ADDRESS (No., Street, City, State, Country) San Marcos, Texas	4. NAME OF SUPERVISOR Mr. [REDACTED]
5. KIND OF BUSINESS Private School	6. TITLE OF JOB Painter's Assistant
7. SALARY OR EARNINGS \$15.00 PER WEEK	8. CLASS GRADE (If Federal Service)
9. DESCRIPTION OF DUTIES Painted dormitories in the Academy	
10. REASONS FOR LEAVING To attend school	
1. INCLUSIVE DATES (From and To - By No. and St.) September, 1955 - July, 1957	2. NAME OF EMPLOYING FIRM OR AGENCY Economy Department Stores
3. ADDRESS (No., Street, City, State, Country) San Marcos, Texas	4. NAME OF SUPERVISOR Mr. [REDACTED]
5. KIND OF BUSINESS Clothing Store	6. TITLE OF JOB Sales Clerk
7. SALARY OR EARNINGS \$30.00 PER WEEK	8. CLASS GRADE (If Federal Service)
9. DESCRIPTION OF DUTIES Assisted customers in selecting and buying goods.	
10. REASONS FOR LEAVING To join the Marine Corps.	
1. INCLUSIVE DATES (From and To - By No. and St.) July 25, 1957 - July 25, 1961	2. NAME OF EMPLOYING FIRM OR AGENCY United States Marine Corps
3. ADDRESS (No., Street, City, State, Country) Marine Corps Schools, Quantico, Virginia	4. NAME OF SUPERVISOR [REDACTED]
5. KIND OF BUSINESS Military	6. TITLE OF JOB Marine Corps Museum Attendant
7. SALARY OR EARNINGS \$100.00 PER MONTH Sp1. (E-4)	8. CLASS GRADE (If Federal Service)
9. DESCRIPTION OF DUTIES [REDACTED]	
10. REASONS FOR LEAVING [REDACTED]	

SECTION II (CONTINUED FROM PAGE 1)

6. DESCRIPTION OF DUTIES Acted as guide to all visitors entering Museum, explaining Marine Corps history, etc. Also on several occasions acted as interpreter for visiting military personnel from Latin America.		
10. REASONS FOR LEAVING Discharged		
1. EMPLOYER'S NAME (From and To: M, Do and Yr.) July 29, 1961 - August 30, 1961		2. NAME OF EMPLOYING BUSINESS OR AGENCY Ohio Valley Engineering Company
3. ADDRESS (No., Street, City, State, Country) 3. Capital and I Streets, E. W., Washington, D. C.		
4. KIND OF BUSINESS Construction		5. NAME OF SUPERVISOR Mr. [redacted]
6. TITLE OF JOB Laborer		7. SALARY OR EARNINGS 2.17 per hour
8. CLASS. GRADE (If Federal Service)		
9. DESCRIPTION OF DUTIES Handyman for Company		
10. REASONS FOR LEAVING Temporary work while seeking permanent employment.		
1. EMPLOYER'S NAME (From and To: M, Do and Yr.)		2. NAME OF EMPLOYING BUSINESS OR AGENCY
3. ADDRESS (No., Street, City, State, Country)		
4. KIND OF BUSINESS		5. NAME OF SUPERVISOR
6. TITLE OF JOB		7. SALARY OR EARNINGS PER
8. CLASS. GRADE (If Federal Service)		
9. DESCRIPTION OF DUTIES		
10. REASONS FOR LEAVING		
11. IF PRIOR SERVICE WITH THE FEDERAL GOVERNMENT IS NOTED ABOVE, INDICATE THE NUMBER OF YEARS CREDITABLE TOWARD U.S. CIVIL SERVICE RETIREMENT, IF ANY: 7 1/2 years		
12. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
13. HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
IF YOUR ANSWER TO EITHER OR BOTH QUESTIONS IS "YES", GIVE DETAILS Honorably discharged from United States Marine Corps.		



SECTION X		MILITARY SERVICE					
1. CURRENT DRAFT STATUS							
1. ARE YOU REGISTERED FOR THE DRAFT UNDER THE UNIVERSAL MILITARY TRAINING AND SERVICE ACT OF 1964 (As amended)?		2. SELECTIVE SERVICE CLASSIFICATION		3. SELECTIVE SERVICE NO.			
X YES NO		1-A 1-B		12-35-15-157			
6. IF DEFERRED, GIVE REASON		7. LOCAL DRAFT # AND NO. OR DESIGNATION AND ADDRESS					
NA		55 - 100 1/2 E. San Antonio St.,					
2. MILITARY SERVICE RECORD							
3. CURRENT AND OR PAST ORGANIZATIONAL MEMBERSHIP							
CHECK IN AS APPROPRIATE	ARMY	NAVY	MARINE CORPS	AIR FORCE	COAST GUARD	NAVY MARINE CORPS GUARD	FOREIGN ORGAN OR MIL. SERVICE (Specify)
HAVE SERVED		X					
NOW SERVING							None
4. BRANCH OR CORPS OF ABOVE CHECKED ORGANIZATION(S)							
Personnel Administration							
5. DATE SEPARATED FROM EXTENDED ACTIVE DUTY (Past service)		6. TOTAL LENGTH OF EXTENDED ACTIVE DUTY IN U.S. ARMED FORCES (Past or current service)					
25 July, 1961		12 MONTHS					
8. DATE ENTERED ACTIVE DUTY		9. PAST SERVICE		10. CURRENT SERVICE			
26 July, 1957							
7. RANK, GRADE OR RATE		9. PAST SERVICE		10. CURRENT SERVICE			
Cpl. (2-4)							
9. PRIMARY MILITARY OCC. SPECIALTY (Use of Designation) AND TITLE		PAST SERVICE		CURRENT SERVICE			
		Cpl. - Chief Clerk					
10. SECONDARY MIL. OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		PAST SERVICE		CURRENT SERVICE			
		None					
11. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate whether applicable to each of current service)							
Past Service: Clerk - Maintained personnel service records. 2 years as Security Guard in the American Embassies in La Paz, Bolivia and Lima, Peru.							
12. CHECK (X) TYPE OF SEPARATION FROM ACTIVE DUTY							
X HONORABLE DISCHARGE		RETIREMENT FOR SERVICE		UNCLE SAM'SHIP			
X RELEASE TO INACTIVE DUTY		RETIREMENT FOR COMBAT DISABILITY		OTHER:			
RETIREMENT FOR AGE		RETIREMENT FOR PHYSICAL DISABILITY					
13. CHECK (X) COMPONENT IN WHICH YOU SERVED							
X REGULAR		X RESERVE (Including the National and Air National Guard)		OTHER (Including ACSI)			
3. MILITARY RESERVE, NATIONAL GUARD AND ROTC STATUS							
1. DO YOU NOW HAVE RESERVE STATUS?		2. ARE YOU NOW A MEMBER OF THE NATIONAL GUARD OR AIR NATIONAL GUARD?		3. ARE YOU NOW A MEMBER OF THE ROTC?			
X YES NO		X YES NO		X YES NO			
4. IF YOU HAVE ANSWERED "YES" TO ITEMS 1, 2 OR 3 ABOVE, CHECK COMPONENT MEMBERSHIP BELOW							
ARMY	X MARINE CORPS	NAT. GUARD	COAST GUARD	NAVY ROTC	IND. CAT. ROTC CATEGORY NUMBER		
		AIR FORCE	AIR NAT'L GUARD	ARMY ROTC	AIR FORCE ROTC		
8. CURRENT RANK, GRADE OR RATE		9. DATE OF APPOINTMENT IN CURRENT SERVICE		10. EXPIRATION DATE OF CURRENT RESERVE OBL. CONTRACT			
Cpl. (2-4)		May, 1959		January 22, 1962			
9. CHECK (X) CURRENT RESERVE CATEGORY							
READY RESERVE    STANDBY ACTIVE    STANDBY INACTIVE    RETIRED							
X STANDBY ACTIVE							
9. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		10. SECONDARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE					
O111		None					
11. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES							
None							
12. ARE YOU CURRENTLY ASSIGNED OR ATTACHED TO A RESERVE, NAT'L GUARD OR ROTC TRAINING UNIT?		YES		13. IF YOU HAVE ANSWERED "YES" TO ITEM 12, GIVE UNIT OR AGENCY AND ADDRESS			
NO		NO					
14. HAVE YOU A MILITARY MOBILIZATION ASSIGNMENT?		YES		15. IF YOU HAVE ANSWERED "YES" TO ITEM 14, GIVE UNIT OR AGENCY AND ADDRESS			
NO		NO					
16. INDICATE TOTAL MILITARY SERVICE YEARS MONTHS FOR LONGEVITY PURPOSES INCLUDING ACTIVE AND INACTIVE DUTY		7    7		17. WHERE ARE YOUR SERVICE RECORDS KEPT?			
				Washington, D.C.			

SECTION XI		FINANCIAL STATUS	
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?		YES	<input checked="" type="checkbox"/> NO
2. IF YOUR ANSWER IS "NO" TO THE ABOVE QUESTION, GIVE THE SOURCE OF OTHER INCOME			
Wife's Income			
3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS			
NAME OF INSTITUTION		ADDRESS (No., Street, City, State, Country)	
The Bank of California, N.A.		330 S.W. 5th Avenue, Portland, Oregon	
Union Trust Company		15 and H Streets, N.W., Washington, D.C.	
4. HAVE YOU EVER BEEN IN OR DEPORTED FOR ANARCHISM?		YES	<input checked="" type="checkbox"/> NO
5. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE PARTICULARS INCLUDING COURT AND DATE(S)			
6. GIVE THREE CREDIT REFERENCES IN THE UNITED STATES			
NAME		ADDRESS (No., Street, City, State)	
General Motors Acceptance Corp.		1310 S.W. Yamhill Street, Portland 5, Oregon	
Gulf Oil Corporation		P.O. Box 7215, Atlanta 9, Georgia	
Hinde Furniture Company		917 Carolina Street, Fredericksburg, Virginia	
7. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION OR COMPENSATION FOR MILITARY OR NAVAL SERVICE?		YES	<input checked="" type="checkbox"/> NO
8. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS			
9. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTIONS WITH, U.S. CORPORATIONS OR BUSINESSES, OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS?			
<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO (If answer "YES," furnish details on separate sheet.)	
SECTION XII		MARITAL STATUS	
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, or Annulled) SPECIFY MARITAL			
2. STATE DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS			
NA			
WIFE, HUSBAND OR FIANCEE If you have been married more than once - including annulments - use a separate sheet for former wife or husband giving data required below for all previous marriages. If marriage contemplated, fill in appropriate information for fiancee.			
3. NAME (First) (Middle) (Last)		Flores	
4. STATE ANY OTHER NAMES EVER USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH ANY OF THESE NAMES WERE USED. IF LEGAL CHANGE, GIVE PARTICULARS (Date and by what authority). USE EXTRA SPACE PROVIDED ON PAGE 10 OF THIS FORM TO RECORD THIS INFORMATION.	
5. DATE OF MARRIAGE		6. PLACE OF MARRIAGE (City, State, Country)	
November 14, 1960		Lima, Peru	
7. HIS (OR HER) ADDRESS BEFORE MARRIAGE (No. Street, City, State, Country)			
American Embassy, La Paz, Bolivia			
8. LIVING		9. DATE OF DEATH	
<input checked="" type="checkbox"/> YES			
10. CURRENT ADDRESS (Give full address if appropriate)			
Washington 5, D.C.			
11. DATE OF BIRTH		12. PLACE OF BIRTH (City, State, Country)	
		Portland, Oregon	
		13. CITIZENSHIP	
		United States of A.	

SECTION XII CONTINUED FROM PAGE 9

14. IF BORN OUTSIDE U.S. - DATE OF ENTRY		15. PLACE OF ENTRY		
NA		NA		
16. FORMER CITIZENSHIP(S) (Country, Date)		17. DATE U.S. CITIZENSHIP WHERE ACQUIRED (City, State, Country)		
NA		NA		
18. OCCUPATION		19. PRESENT EMPLOYER (Name, Address, City, State, Country) or if spouse deceased or unemployed (Date last employed)		
Legal Secretary		Boykin and De Francis Formerly Department of State		
21. EMPLOYER'S OR BUSINESS ADDRESS (No. Street, City, State, Country)				
1000 16th St., N.W., Suite 601, Washington 25, D.C.				
22. DATES OF MILITARY SERVICE (From and to - If No. and 17)				
None				
23. BRANCH OF SERVICE		24. COUNTRY OF WHICH MILITARY SERVICE AFFILIATED		
25. DETAILS OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN (Foreign Service - Jan., 1953 - Oct., 1960; Civil Service - Jan., 1953 - June, 1952)				
Foreign Service - Jan., 1953 - Oct., 1960; Civil Service - Jan., 1953 - June, 1952				
SECTION XIII CHILDREN AND OTHER DEPENDENTS				
1. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	ADDRESS
None				
2. NUMBER OF CHILDREN (including non-children and adopted children) who are UNMARRIED, UNDER 21 yrs. OF AGE, AND NOT SELF-SUPPORTING.		3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, etc.) who are UNMARRIED, UNDER 21 yrs. OF AGE, AND NOT SELF-SUPPORTING.		
0		0		
SECTION XIV FATHER (Give same information as for Statistler and use separate sheet)				
1. FULL NAME (Last-First-Middle)		2. LIVING		
		Y YES NO		
3. STATE OTHER NAMES HE HAS USED		4. DATE OF DEATH		
None				
5. INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS BEEN USED THESE NAMES. IF CLASS CHANGE, GIVE PARTICULARS. WHERE AND BY WHOM AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.				
6. CURRENT ADDRESS - Give last address, if deceased (No. Street, City, State, Country)				
San Marcos, Texas				
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP		
	May 7, 1913	USA		
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY		
May 24, 1913		Mexico		
12. FORMER CITIZENSHIP(S) (Country, Date)		13. DATE U.S. CITIZENSHIP WHERE ACQUIRED (City, State, Country)		
Mexican		1957		
14. OCCUPATION		15. PRESENT EMPLOYER (Name, Address, City, State, Country) or if spouse deceased or unemployed (Date last employed)		
Baptist Minister		Mexican Baptist Church		
16. EMPLOYER'S BUSINESS ADDRESS (No. Street, City, State, Country)				
San Marcos, Texas				
17. ADDRESS OF MILITARY SERVICE (Branch of Service) (If No. and 17)			18. COUNTRY	
To my knowledge never served in any military branch of service.				
19. DATES OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN				

SECTION XV MOTHER (Give name and address for Stepmother in separate sheet)			
1. FULL NAME (Last-First-Middle)	2. LIVING YES <input type="checkbox"/> NO <input type="checkbox"/>	3. DATE OF DEATH	4. CAUSE OF DEATH
		UNKNOWN	
5. STATE OTHER NAMES SHE HAS USED		INDICATE CIRCUMSTANCES INCLUDING LENGTH OF TIME UNDER WHICH SHE HAS EVER USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS THEREOF and by what authority. USE EXTRA SPACE PROVIDED ON PAGE 18 OF THIS FORM TO RECORD THIS INFORMATION.	
None to my knowledge			
6. CURRENT ADDRESS - GIVE LAST ADDRESS, IF DECEASED (No., Street, City, State, Country)			
San Marcos, Texas			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
	Mar y Noriega, Nuevo Leon, Mexico	Mexican	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY	
Unknown		Unknown	
12. FORMER CITIZENSHIP(S) (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION		16. PRESENT EMPLOYER (Give last employer, if mother is deceased or unemployed)	
Housewife		NA	
17. EMPLOYER'S BUSINESS ADDRESS OR MOTHER'S BUSINESS ADDRESS IF SELF EMPLOYED			
NA			
18. DATES OF MILITARY SERVICE (From-and-To)		19. BRANCH OF SERVICE	20. COUNTRY
NA		NA	NA
21. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN			
NA			
SECTION XVI BROTHERS AND SISTERS (Including Half-, Step- and Adopted Brothers and Sisters)			
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
Semin, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	11
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	39
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Marcos, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	24
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
Semin, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	22
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	27
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
703 S. Brown St. Semin, Texas, Zip 79151		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	24
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
Semin, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	27
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
Semin, Texas		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	27

SECTION XVII FATHER-IN-LAW			
1. FULL NAME (Last-First-Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
Ray	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
5. STATE OTHER NAMES HE HAS USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS BEEN USED THESE NAMES, IF LEGAL CHANGE OF NAME BY LAW, FATHER AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 15 OF THIS FORM TO RECORD THIS INFORMATION.	
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
Milwaukee, 22, Oregon			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
	Minot, North Dakota	U.S. of America	
12. IF BORN OUTSIDE U.S. - DATE OF ENTRY		13. PLACE OF ENTRY	
NA		NA	
12. FORMER CITIZENSHIP(S) (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if Father-in-Law is deceased or unemployed)		
Warehouse Foreman	Rudy Wilhelm Inc., Portland, Ore. on		
SECTION XVIII MOTHER-IN-LAW			
1. FULL NAME (Last-First-Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
5. STATE OTHER NAMES SHE HAS USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH SHE HAS BEEN USED THESE NAMES, IF LEGAL CHANGE OF NAME BY LAW, FATHER AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 15 OF THIS FORM TO RECORD THIS INFORMATION.	
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
Portland 36, Oregon			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
	Portland, Oregon	U.S. of America	
12. IF BORN OUTSIDE U.S. - DATE OF ENTRY		13. PLACE OF ENTRY	
NA		NA	
12. FORMER CITIZENSHIP(S) (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)		
Homemaker			
SECTION XIX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO EITHER (1) LIVE ABROAD, (2) ARE NOT U.S. CITIZENS OR (3) WORK FOR A FOREIGN GOVERNMENT			
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	
None to my knowledge			
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		5. EMPLOYED BY	
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	

SECTION XIX CONTINUED FROM PAGE 12

8. SPECIAL REMARKS, IF ANY, CONCERNING RELATIVES NOTED IN SECTION XIX ABOVE

NA

SECTION XX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO ARE IN THE MILITARY OR CIVIL SERVICE OF THE UNITED STATES

1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[Redacted]	Bro-in-law	24	U.S. of America
5. ADDRESS (No., Street, City, State, Country)			
[Redacted] Pueblo, Colorado			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[Redacted]	2nd Cousin	None	U.S. of America
5. ADDRESS (No., Street, City, State, Country)			
[Redacted] Virginia Aviation - 1st S. Lt. USAF			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[Redacted]			
5. ADDRESS (No., Street, City, State, Country)			
[Redacted]			

SECTION XXI REFERENCES, ACQUAINTANCES, AND NEIGHBORS

1. LIST FIVE CHARACTER REFERENCES NOT RELATIVES IN THE U.S. WHO KNOW YOU INTIMATELY

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Mr. and Mrs. [Redacted]	San Marcos, Texas	San Marcos, Texas
Rev. [Redacted]	Austin, Texas	Austin, Texas
Mr. [Redacted]	Alexandria, Virginia	Alexandria, Virginia
Mr. [Redacted]	Washington, D.C.	Washington, D.C.
Col. [Redacted]	Waco, Texas	Waco, Texas

2. LIST FIVE PERSONS IN THE U.S. WHO KNOW YOU SOCIALLY, NOT RELATIVES, SUPERVISORS OR EMPLOYERS

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Mr. [Redacted]	Washington, D.C.	Washington, D.C.
Mr. [Redacted]	Washington, D.C.	Washington, D.C.
Miss [Redacted]	Washington, D.C.	Washington, D.C.
Miss [Redacted]	Denver, Colorado	Denver, Colorado
Mrs. [Redacted]	Fredericksburg, Virginia	Fredericksburg, Virginia

3. LIST THREE NEIGHBORS AT YOUR MOST RECENT NORMAL RESIDENCE IN THE U.S.

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Miss [Redacted]		Fredericksburg, Virginia
Lt. and Mrs. [Redacted]		Waco, Texas

**SECTION XXII CLUBS, SOCIETIES AND OTHER ORGANIZATIONS**

NOTE: List names and addresses of all clubs, societies, professional societies, employee groups or organizations of any kind (in case membership in or support of any organization having been quarters or branch in a foreign country) to which you belong or have belonged.

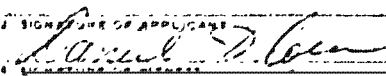
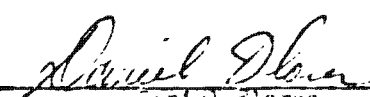
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATES OF MEMBERSHIP	
		FROM	TO
Spanish Club	San Marcos High School, San Marcos, Texas	Sept., 1951	May, 1953
Distributive Education Club	San Marcos High School, San Marcos, Texas	Sept., 1951	May, 1953
Baptist Youth Organization	First Mexican Baptist Church, San Marcos, Tex.	Jan., 1957	May, 1957

**SECTION XXIII RESIDENCES FOR THE PAST 15 YEARS**

ADDRESS - LAST RESIDENCE FIRST (Number, Street, City, State, Country)	INCLUSIVE DATES	
	FROM	TO
4716 Kenners Ave., #201, Alexandria, Virginia	March, 1961	Aug., 1961
102 Haxover St., Fredericksburg, Virginia	Dec., 1960	Mar., 1961
172 Bartolomea Herrera, Miraflores, Lima, Peru Calle Pototí,	Jan., 1959	May, 1960
ESIS Building, 3rd & 14th Floors, La Paz, Bolivia	Nov., 1958	Jan., 1960
47th Company, Headquarters Marine Corps, Henderson Hall, Washington 25, D.C.	Sept., 1958	Nov., 1960
Cold Weather Training Battalion, Pickle Weavers, Ft. Ord, California	Jan., 1958	Aug., 1960
Marine Corps Base, 29 Palms, California	Dec., 1957	Jan., 1958
Marine Corps Recruit Depot, San Diego, California	July, 1957	Nov., 1957
Marine Corps Base, Camp Pendleton, California	Nov., 1957	Dec., 1957
501 S. Guadalupe St., San Marcos, Texas	May, 1956	July, 1957
Howard Payne College, Brownwood, Texas	Sept., 1955	May, 1956
501 S. Guadalupe St., San Marcos, Texas	1956	Sept., 1955

SECTION XXIV		ADDITIONAL INFORMATION		
1. DO YOU AVOW OR HAVE YOU EVER AVOWED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU EVER SUPPORTED OR BEEN ASSOCIATED WITH ANY POLITICAL PARTY, ORGANIZATION OR UNION, LEAGUE WHICH ADVOCATES OR PRACTICES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES, BY FORCE OR VIOLENCE OR OTHER UNLAWFUL MEANS, OR WITH ANY GROUP OR PERSON OR PERSONS WHOSE PURPOSE IS TO DENY OR VIOLATE THE RIGHTS OF ANY PERSON OR PERSONS OR TO DENY OR VIOLATE THE RIGHTS OF ANY PERSONS UNDER THE CONSTITUTION OF THE UNITED STATES?				YES NO
2. IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION, EXPLAIN				
3. DO YOU USE OR HAVE YOU EVER USED "INTOXICANTS"?	YES NO	4. IF SO, TO WHAT EXTENT?		
5. DO YOU USE OR HAVE YOU EVER USED "NARCOTICS"?	YES NO	6. IF SO, TO WHAT EXTENT?		
7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE ORGANIZATION OR ITS ACTIVITIES?				YES NO
8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1945				
I served 4 years in the United States Marine Corps.				
9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME OF THE AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION.				
An investigation ( I do not know by whom) was conducted prior to my departure for Bolivia where I was assigned to the American Embassy. This investigation took place during August and September of 1953.				
NOTE SPECIAL: If your answer to "YES" to the following Questions 10, 11 or 12, provide the information requested for each question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.				
10. HAVE YOU, OR TO YOUR KNOWLEDGE, HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A VIOLATION OF TRAFFIC LAWS IN THE UNITED STATES OR ABROAD?				YES NO
IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE				
11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.				YES NO
12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.				YES NO
SECTION XXV		PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
1. NAME (First-Middle-Last)		2. RELATIONSHIP		
Mrs. Daniel Flores		Wife		
3. HOME ADDRESS (No. Street, City, Zone, State, Country)		4. HOME PHONE NO.		
Washington 8, D.C.		365-8182		
5. BUSINESS ADDRESS (No. Street, City, Zone, State, Country) - INDICATE NAME OF FIRM OR 6. BUSINESS PHONE NO. & EXT.				
Boydin and De Francis 1000 15th St., Suite 603, Washington 5, D.C.		DI 7-5444		
7. IN CASE OF EMERGENCY OTHER CLOSE RELATIVES (Mother, Father) MAY ALSO BE NOTIFIED IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS. PLEASE INDICATE.				
In all cases wife: Relative, Mrs. [redacted] Seguin, Texas Telephone FR 9-1007				



SECTION XVI	CERTIFICATION						
<p><b>YOU ARE INFORMED THAT THE CORRECTNESS OF ANY STATEMENT MADE IN THIS APPLICATION WILL BE INVESTIGATED.</b></p> <p><small>I have read and understand the instructions. I certify that the foregoing answers are true and correct to the best of my knowledge and belief. I agree that any misstatement or omission is to a material fact will constitute grounds for immediate dismissal or rejection of my application. I also understand that any false statement made herein may be punishable by law (U.S. Code, Title 18, Section 1001).</small></p>							
<p><small>DATE OF SIGNATURE</small>  <i>September 5, 1961</i></p> <p><small>SIGNED AT (City and State)</small>            Washington, District of Columbia</p>	<p><small>SIGNATURE OF APPLICANT</small>  </p>						
<p><small>NOTE: Use the following space for extra details. Refer to each continued item by section/item number to which it relates. Sign your name at the end of the added material. If additional space is required use extra pages the same size as this page and sign each such page.</small></p>							
<p><b>MARITAL STATUS:</b> Item #4, Section XII            September 1, 1956 to October 6, 1956. Married to Lt. Col. <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span>  <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> in Portland, Oregon, by Circuit Court Judge. Used name of Moran until November 14, 1960, when changed to Flores.</p> <p><b>FATHER-IN-LAW:</b> Item #5, Section XVII            Short name for Raymond</p> <p><b>GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL:</b> Item #1, Section VI</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Argentina</td> <td style="width: 30%;">2 July 1959 to 3 July 1959</td> <td style="width: 40%;">Travel</td> </tr> <tr> <td>Panama</td> <td>10 November 1958 to 13 November 1958</td> <td>Travel</td> </tr> </table> <p style="text-align: center; margin-top: 10px;">SEE ATTACHED SHEET FOR PERTINENT INFORMATION RELATIVE TO STEP-MOTHER.</p> <p style="text-align: center; margin-top: 20px;">Signed at Washington, D. C., this <u>5<sup>th</sup></u> day of September, 1961.</p> <p style="text-align: center; margin-top: 10px;">             Daniel Flores         </p>		Argentina	2 July 1959 to 3 July 1959	Travel	Panama	10 November 1958 to 13 November 1958	Travel
Argentina	2 July 1959 to 3 July 1959	Travel					
Panama	10 November 1958 to 13 November 1958	Travel					

ATTACHMENT TO FORM NO. 144 - PERSONAL HISTORY STATEMENT

Section XV - STEPMOTHER

Full name: [REDACTED]  
Living: Yes  
Other Names She Has Used: None to my knowledge  
Current Address: [REDACTED] San Marcos, Texas  
Date of Birth: [REDACTED]  
Place of Birth: Mexico  
Citizenship: Mexican  
If Born Outside U.S. - Date of Entry: December 8, 1922  
Place of Entry: Unknown  
Former Citizenships: None  
Occupation: Homemaker and Missionary  
Present Employer: Mexican Baptist Church, San Marcos, Texas  
Never served in Military or other Government service to my knowledge.

This paper is attached to and hereby made a part of Form No. 144.

  
Daniel Flores

CONFIDENTIAL  
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 19 January 1962

YOUR REFERENCE: 07100 OPEER

CASE NO. : 195221

TO : Director of Personnel

FROM : Director of Security

SUBJECT : FLORES, Daniel

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

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

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

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

3. As part of the entrance on duty processing:

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

A personal interview is not necessary.

FOR THE DIRECTOR OF SECURITY:

[Signature Box]

Chief, Personnel Security Division

OFFICE OF PERSONNEL SECURITY

*2/1/62  
OK to look  
see with R.  
AP*