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18 June 1974

RETURN TO CIA

## ADMINISTRATIVE - INTERNAL USE ONLY

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| `/  | •  | -       | TRAVEL BRIEFIN     | G DA   | TA                                      |        |             | UO M              | on Heproc                              | iucs -  |         |  |  |
|---|--|---------|--------------------|--------|---|--------|-------------|-------------------|--|---------|---------|--|--|
| NAME .  | BUSTOS-VIDELA, Charlotte   |         |                    |        |   |        |             | FILE NUMBER       |  |         |         |  |  |
| OFFICE  | PHONE  |         |                    |        |   |        |             | RANK OR GRADE     |  |         |         |  |  |
| L   | WH x7811   |         |                    |        |   |        |             | GS-14 og          |  |         |         |  |  |
| DEPARTURE DATE  |  |         |                    |        |   |        |             |                   | COVER                                  |         |         |  |  |
|   | 30 June 1974   | I       | PCS                |        |   |        |             |                   |  |         |         |  |  |
|   |  |         |                    |        |   |        |             | DEPENDENTS BRAFED |  |         |         |  |  |
| DESTINATION(s) Trinidad   |  |         |                    |        |   |        |             |                   |  |         | NO      |  |  |
|   |  |         | PREVIOUS TRA       | /EL    |   |        |             | <del></del>       |  | <u></u> | 4       |  |  |
| AREA  | annya amin'ny fivondronana amin'ny fivondronana amin'ny taona amin'ny taona amin'ny taona amin'ny faritr'i A |         | COVER              | — у    | ₽5                                      |        |             | YEARS             |  |         | ·       |  |  |
| •   |  |         |                    |        |   |        |             |                   |  |         |         |  |  |
| AREA COVER  |  |         |                    |        |   |        |             | YEARS             |  |         |         |  |  |
|   |  |         |                    |        |   |        |             |                   |  |         |         |  |  |
| AREA  | COVER  |         |                    |        |   |        |             |                   |  | YEARS   |         |  |  |
| EXPERIENCED TRAVEL . Formal briefing wai                              |  |         | ived               | YES NO |   |        | NO          |                   |  |         |         |  |  |
| <del>, , , , , , , , , , , , , , , , , , , </del>                     |  | RISK    | OF CAPTURE TRAV    | EL BR  | IEFING                                  |        |             |                   | ************************************** |         | ·       |  |  |
| CATEGORY .  | Α 37   | В       |                    | С      | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ····   | <del></del> | D                 |  |         |         |  |  |
| CAIEGORY .  | X  |         |                    |        |   |        |             |                   |  |         |         |  |  |
|   |  |         | SPECIAL BRIEFING   | PROBI  | LEM_                                    |        |             |                   |  | YES     | NO      |  |  |
| ТУРЕ  |  |         |                    |        | CIA VON A-Z                             |        |             |                   |  |         |         |  |  |
| ·   |  |         |                    |        | WHO'S WHO IN CIA                        |        |             |                   |  |         |         |  |  |
| •   |  |         |                    |        | HIJACKING NOTICE                        |        |             |                   |  |         |         |  |  |
|   |  |         |                    | ОТН    | ER                                      |        |             |                   |  |         | <u></u> |  |  |
| SECURITY APPROVAL FOR TRAVEL VERIFIED IN SUBJECT FILE                 |  |         |                    |        |   |        |             | YES               |  | NO      |         |  |  |
| SECURITY APPROVAL FOR TRAVEL BASED ON FILE REVIEW BY BRIEFING OFFICER |  |         |                    |        |   |        |             | YES               |  | NO      |         |  |  |
| SECURITY FILE AVAILABLE FOR REVIEW BEFORE BRIEFING                    |  |         |                    |        |   |        |             | YES               |  | NO.     |         |  |  |
| EMERGENCY .   | CONTACTS (met on arrival   | , phone | e no., alternate a | tion   | to make c                               | ontaci | · )         |                   |  | L       |         |  |  |
|   | EGULATIONS (operational  |         |                    |        |   |        |             |                   |  |         |         |  |  |
|   | CAUTIONS (recognition ov   |         |                    |        |   |        | nge)        |                   |  |         |         |  |  |
| PERSONAL A  | FFAIRS (charge accounts,   | traff   | ic tickets, litiga | ion,   | neighbors                               | )      |             |                   | -                                      |         |         |  |  |
| PERSONAL CORRESPONDENCE (limitations, home address, shop talk)        |  |         |                    |        |   |        |             |                   |  |         |         |  |  |
|   | ONDUCT (morals, drinking   |         |                    |        |   |        |             |                   |  |         |         |  |  |
| ASSOCIATION WITH FOREIGNERS (overseas briefing, phase out on return)  |  |         |                    |        |   |        |             |                   |  |         |         |  |  |
|   | HOSTILE AUDIO SURVEILLANCE (microphones, shop talk at home-hotels, report to security)   |         |                    |        |   |        |             |                   |  |         |         |  |  |
|   | COVER PROBLEMS (adequacy, request for briefing on arrival, family knowledge)  RESPONSIBILITY ABROAD (local customs, traditions, religion, responsibility for dependents)   |         |                    |        |   |        |             |                   |  |         |         |  |  |
| RESPONSIBI  | LITY ABROAD (local custo   | ms, tr  | aditions, religion | , resp | onsibilit                               | y for  | depen       | aents)            |  |         |         |  |  |
| OTHER<br>TRA  | UKCIMG   | w/      | 1 s pous E         |        |   |        |             | ٠                 |  |         | _       |  |  |
|   | TO CENTRAL COVER   |         |                    |        | - Combatting age                        |        |             |                   | YES                                    |         | NO      |  |  |
| EM  | ERC.DES  | Spo     | HEN PRO            | FA     | 10T P                                   | es s   | 100         | =                 |  | ıI      |         |  |  |
| DATE BRIEF  | EN C.DES   |         | BY                 |        | 1/                                      | 84     | ud          | ly                |  |         |         |  |  |
|   | , /  |         |                    |        |   | SEEDRI | TY OF       | FICER             |  |         |         |  |  |

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