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104-10110-10296	FORM DS 1032	T BERCHMAN ARTICL	3684	JOURNAL NUMBER
	(Exception as 31 30 approved by RULIFIGATIUN OF CSC and B. of E. july 19627	PERSONNEL ACTION		FO
	PS BUSTOS- YIDELA	The contraction of the contracti		MI.B # 1178
	1. NAME (CAPS) LAST-FIRST-MIDDLE MRMISS-MRS.	2. EMPLOYEE NO. & SEX	3. BIRTH DATE IMO. Da. Yr.	4. SOCIAL SECURITY AND
	SUSTOS-VIDELA, CHARLOTTE Z MAS	993732 P 6. TENURE CODE	91-12-29 7. SERVICE COMP. DATE	B PHYSICAL HANDICAP NO.
	9 - PBGLI	(3) 06	08-27-51 10A MO. B YR OF GRADE	. 00
	11-COVERED - 9 WAVER 12. NATURE OF ACTION	1 - CS 4 - NONE 2 - FICA 8 - OTHER 13. EFFECTIVE DATE	96-74	
	317 RESIGNATION	92-25-77		
	15. FROM: POSITION TITLE AND NUMBER \$-0000-00 REASSIGNMENT	16. PAY PLAN AND OCCUPATION CODE	17. GRADE	IB. SALARY
	Ot •	PR-9787E		A829, 180.00
	19. NAME AND LOCATION OF EMPLOYING OFFICE DEPARTMENT OF S	STATE, WASHINGTON, D	. C. 20520	
	NISCELLANEOUS ASSIGNMENTS			
	20. TO: POSITION TITLE AND NUMBER	21. PAY PLAN AND	22. GRADE	23. SALARY WORK
	GPL CODE	OCCUPATION CODE	The second secon	SCHED.
	24. NAME AND LOCATION OF EMPLOYING OFFICE DEPARTMENT OF	NEXT PSI DUE	C 20520	
	DEPARTMENT OF	SIAIE, WASHINGTON, D.		
		We think pain the state of the		
	25. DUTY STATION (City-County-State)			26. LOCATION CODE
	27. APPROPRIATION	28. POSITION OCCUPIED 1 - COMPETITIVE	29. APPORTIONED POSITION	1100 1900 1 TO: STATE
	0113.6-1097-292608-000	2 - EXCEPTED SERVICE	1 - PROVED - 1 2 - WAIVED - 2	
	30. REMARKS: A SUBJECT TO COMPLETION OF 1 YEAR PROBATIONARY (OR TR B. SERVICE COUNTING TOWARD CAREER (OR PERMANENT) TENURE FE	HAL) PERIOD COMMENCING		- 1 (4位的 1984)
	SEPARATIONS: SHOW REASON BELOW AS REQUIRED. CHECK IF APPLICABLE:	C. DURING PROBATION	D. FROM APPOINTM	IENT OF 6 MONTHS OR LESS
	This action is subject to all applicable laws, rules and regulations and may be subject to Department. This action may be corrected or conceled if not in occordance with all retained and the position to which you are officially assigned may be exceeded and con-	quirements.	by the United States Civil Se	
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	FEGLI COVERAGE-REGULAR AND OPTIONAL			
e e	P. O. BOX 3038	u.		
	FALLS CHRCH, VIRGINIA 22043 31. DATE OF APPOINTMENT AFFIDAVIT (Accressions entry)	34. SIGNATURE 10r other auth	pentications AND TITLE	
	32. OFFICE MAINTAINING PERSONNEL FOLDER (If different from employing affice)	8°° 8°° 8°° 8°° 8°° 8°° 8°° 8°° 8°° 8°°	ül C.I	60 em coo
1	33. CODE EMPLOYING DEPARTMENT OR AGENCY	Harman Albandar		ne to see the see
	STATE DEPARTMENT OF STATE	35 DATE 03-16-7	7 SUBM	ITTING OFFICE NO. 2951
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