

FROM:

### EXTENSION

NO.

DATE \_\_\_\_\_

TO: (Officer designation, room number, and building)

DATE \_\_\_\_\_

RECEIVED

**FORWARDED**

OFFICER'S  
INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. Mrs. Faber  
H-E-21 Hls

Ref

Copy of termination  
Clearance sheet for  
Crozier for your record.  
J. Forslund

B. F. L. in  
Ross L. CROZIER

**RETURN TO CIA**  
**Background Use Only**  
**Do Not Reproduce**

SECRET

CLEARANCE SHEET FOR TERMINATION OF CONTRACT PERSONNEL				DATE
THIS FORM MUST BE SIGNED AND SUBMITTED IN DUPLICATE				30 Aug. 1963
PERSONAL DATA				
NAME (Last, First, Middle - true or pseudonym)		OFFICE AND BRANCH OF ASSIGNMENT		
Crozier, Ross L.		Special Affairs Staff		
LOCAL ADDRESS		PERMANENT ADDRESS		
Apt. 9 1607 So 26th St Arlington Va		Same		
PERMANENT STATION OR BASE		POSITION OR FUNCTIONAL TITLE		
Washington D.C.		Ops Officer		
CONTRACT DATA				
DATE CONTRACT EFFECTIVE	DATE CONTRACT LAST RENEWED	DATE CONTRACT EXPIRES	DATE OF CONTRACT TERMINATION	
1 June 1957	original contract	contract for	28 November 63	
REASON FOR CONTRACT TERMINATION				
indefinite term				
RESIGNATION				
INTERNAL STAFF OR DIVISION CLEARANCES (Add or delete as applicable)				
COMPONENT	CLEARED BY	DATE	REMARKS	
FINANCE	<i>[Signature]</i>	8/30/63		
LOGISTICS	<i>[Signature]</i>	8/30/63		
PERSONNEL	<i>[Signature]</i>	8/30/63		
CONTRACT APPROVING OFFICER		CLEARED BY (Signature)	DATE	
		<i>[Signature]</i>	30 Aug 63	
SCHEDULE OF INTERVIEWING OFFICES				
(OFFICES NOT REQUIRING INTERVIEW WILL SO INDICATE)				
OFFICE	SCHEDULE			INTERVIEWING OFFICIAL
	DATE	TIME	LOCATION	
CENTRAL COVER DIVISION			already briefed	CLEARED BY (Signature)
			no interview nec	<i>[Signature]</i>
				DATE
				23 Sept '63
OFFICE OF SECURITY SSD			no interview	CLEARED BY (Signature)
			necessary	<i>[Signature]</i>
				DATE
				9/30/63
OFFICE OF PERSONNEL CPD				CLEARED BY (Signature)
				<i>[Signature]</i>
				DATE
				Aug. 30, 1963
REMARKS (Please initial)				
STAFF OR DIVISION AND BRANCH OF ASSIGNMENT		SIGNATURE OF STAFF OR DIVISION RESPONSIBLE OFFICER		DATE
SAS/EOR		<i>[Signature]</i>		30 Aug 63
		SAS/CONTRACT APPROVING OFFICER		