

UNCLASSIFIED INTERNAL USE ONLY CONFIDENTIAL SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)
 Contract Information & Check List - (Enilio Americo RODRIGUEZ) ⁰⁴

FROM: Chief, WE/L/Personnel, 2004 Qtrs. Eye *Huf*

DATE: 26 JUL 1961

| TO: (Officer designation, room number, and building) | DATE | | OFFICER'S INITIALS | COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.) |
|--|-------------------|-----------|--------------------|---|
| | RECEIVED | FORWARDED | | |
| 1. Chief, WE/L/Support | <i>27 July 61</i> | | <i>Huf</i> | Your Signature, please, as Contract Approving Officer. |
| 2. | | | | |
| 3. Contract Personnel Divn., 2125 Eye Bldg. | | | <i>Huf</i> | TO CASE OFFICER |
| 4. WH-6-Pers | | | <i>Huf</i> | 1) A COPY OF THE CHECK LIST MUST BE FILED IN THE |
| 5. Dick | | | <i>Huf</i> | 2) SEE |
| 6. DC/WH/4 | | | <i>Huf</i> | RECORDS SECTION, DEPARTMENT OF THE ARMY, FEDERAL BUREAU OF INVESTIGATION |
| 7. | | | | |
| 8. C/WH/4/FI- | | | | 4-5 Will you assist on #313A Rls - then pass to DC/WH/4 |
| 9. | | | | NOTE: #11, b seems improper - Held |
| 10. | | | | 4-6 FYI |
| 11. | | | | |
| 12. | | | | |
| 13. | | | | |
| 14. | | | | (8) I will be glad to assist with 313a - para 11 b. as program |
| 15. | | | | send copies of benefits |

FORM 1 DEC 58 610 USE PREVIOUS EDITIONS SECRET CONFIDENTIAL INTERNAL USE ONLY UNCLASSIFIED

470

| CONTRACT INFORMATION AND CHECK LIST | | DATE OFFICER | DIVISION |
|---|--|---|--|
| INSTRUCTIONS: Use Form 1000-1 for guidance. Complete all items, including "11" when items are not applicable. Forward original and 100 copies for preparation of contract. | | R. G. Seehefer | WH/4 |
| | | TELEPHONE EXTENSION | DATE |
| | | 4803 | 26 July 1961 |
| SECTION I GENERAL | | | |
| 1. NAME <input type="checkbox"/> PALLET <input checked="" type="checkbox"/> TRACE | 2A. PROJECT | 3. ALLOTMENT NO. | 4. SLOT NO. |
| (Emilio AMERICO Rodriguez) | JMATE | 25355000-8021 | |
| | 2B. PERMANENT STATION | 3A. FUNDS | |
| | Headquarters | <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| 5. PREVIOUS CIA PSEUDONYM OR ALIASES | 6. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY "TION TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) | | |
| | Contract agent (MOG) at \$9,600 per annum | | |
| 7. SECURITY CLEARANCE (Type and date) | 7A. MEDICAL CLEARANCE | | 8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| OA granted 30 June 1960 | <input type="checkbox"/> OBTAINED <input type="checkbox"/> IMPROVED <input checked="" type="checkbox"/> NOT REQ'D. | | |
| 9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | 10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) |
| | | | Contract agent |
| SECTION II PERSONAL DATA | | | |
| 11. CITIZENSHIP | 12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO | 13. AGE | 14. DATE OF BIRTH (Month, day, year) |
| U.S. | | 33 | (27 Jan 1928) A |
| 15. LEGAL RESIDENCE (City and state or country) | | 16. CURRENT RESIDENCE (City and state or country) | |
| (Edenton, North Carolina) 10 | | (Edenton, North Carolina) 10 | |
| 17. MARITAL STATUS (Check as appropriate) | | | |
| <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED | | | |
| 18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE: | | 19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | |
| Five (5): wife and four children | | | |
| SECTION III U.S. MILITARY STATUS | | | |
| 20. RESERVE | 21. VETERAN | 22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat) | |
| NA | NO | | |
| 23. BRANCH OF SERVICE | 24. RANK OR GRADE | 25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | 26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| NA | NA | | |
| SECTION IV COMPENSATION | | | |
| 27. BASIC SALARY | 28. POST DIFFERENTIAL | 29. COVER (Breakdown, if any) | 30. FEDERAL TAX WITHHOLDING |
| \$9,600 | NA | NA | COVER: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO; CIA: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES) | | | |
| 31. QUARTERS | 32. POST | 33. OTHER | |
| | | NA | |
| 34. COVER (Breakdown, if any) | | | |
| NA | | | |
| SECTION VI TRAVEL | | | |
| 35. TYPES <input type="checkbox"/> PCS <input type="checkbox"/> DOMESTIC OPERATIONAL <input checked="" type="checkbox"/> FOREIGN OPERATIONAL | | | 36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| 37. HME TO BE SHIPPED <input type="checkbox"/> YES <input type="checkbox"/> NO | 37A. HME TO BE STORED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | 38. PERSONAL VEHICLE TO BE SHIPPED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | 39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| | | | |
| 40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH | | | |
| <p>Wife - (Pauline Juanita Ross Rodriguez) ⁰⁶ 37 yrs old, U.S.</p> <p>Children - (Emilio Americo Rodriguez, Jr.) ⁰⁶ 10 yrs old, U.S.</p> <p>⁰⁶ (Joseph Ross Rodriguez) 8 yrs old, U.S.</p> <p>⁰⁶ (Patti Michelle Rodriguez) 6 yrs old, U.S.</p> <p>⁰⁶ (Paul Marshal Rodriguez) 3 yrs old, U.S.</p> | | | |
| 41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES | | | |
| SECTION VII OPERATIONAL EXPENSES | | | |
| 42. PURCHASE OF INFORMATION | 43. ENTERTAINMENT | 44. OTHER | |
| Yes | Yes | 201-(274049)08 | |
| 45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES | | | |

26 Jul '61

CO/170

CONTRACT IN OPERATION AND CHECK LIST
(CONTINUED)

W. G. Seaberg

W/G

NOTE: SEE INSTRUCTIONS ON REVERSE PAGE

SECTION VIII OTHER BENEFITS 4803 26 July 1961

48. BENEFITS (See E 22-915, E 20-920, E 20-970, E 20-1000, and HR 20-620-1, HR 20-1246-1 and or successor regulations for benefits applicable to various categories of contract personnel.)

Injury and death benefits (in line of duty) not to exceed \$5,000.

SECTION IX COVER ACTIVITY

| | | | | | | |
|--------------------|---|------------------|--------------------------------------|--------------------------------------|--|----------------------------------|
| 47. STATUS (Check) | <input checked="" type="checkbox"/> ESTABLISHED | 48. TYPE (Check) | <input type="checkbox"/> PROPRIETARY | <input type="checkbox"/> CULTURAL | <input checked="" type="checkbox"/> COMMERCIAL | <input type="checkbox"/> TOURIST |
| | | | <input type="checkbox"/> SUBSIDIZED | <input type="checkbox"/> EDUCATIONAL | <input type="checkbox"/> MILITARY | <input type="checkbox"/> OTHER |

49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS:

YES NO COMPLETE PARTIAL

SECTION X OFFSET OF INCOME

50. OFFSET OF INCOME AND OTHER ENJOYMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.)

TOTAL PARTIAL NONE

SECTION XI TERM

| | | |
|-------------------|--------------------|---|
| 51. DURATION | 52. EFFECTIVE DATE | 53. RENEWABLE |
| DAYS MONTHS YEARS | 15 July 1961 | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

54. TERMINATION NOTICE (Number of days) 30 days

55. DEFERRAL OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION YES NO

SECTION XII FUNCTION

56. PRIMARY FUNCTION (CI, FI, PP, other) FI

SECTION XIII DUTIES

57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED

Development, recruitment and handling of FI agents.

SECTION XIV QUALIFICATIONS

58. EXPERIENCE

Subject was one of the principal agents of the FI net in Cuba after the break in diplomatic relations.

59. EDUCATION (Check Highest Level Attained)

| | | |
|--------------------------|--|---|
| GRADE SCHOOL | HIGH SCHOOL GRADUATE | TRADE SCHOOL GRADUATE |
| BUSINESS SCHOOL GRADUATE | COMMERCIAL SCHOOL GRADUATE | |
| COLLEGE (No degree) | <input checked="" type="checkbox"/> COLLEGE DEGREE | <input checked="" type="checkbox"/> POST GRADUATE |

60. LANGUAGE COMPETENCY (Check Appropriate Degree Competency)

| LANGUAGE | SPEAK | | | WRITE | | | READ | | | 61. INDIVIDUAL'S COUNTRY OF ORIGIN |
|------------|-------------------------------------|---------|-------------------------------------|-------------------------------------|---------|-------------------------------------|-------------------------------------|---------|-------------------------------------|------------------------------------|
| | FLUENT | AVERAGE | POOR | FLUENT | AVERAGE | POOR | FLUENT | AVERAGE | POOR | |
| Spanish | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | Cuba |
| Portuguese | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | |
| French | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | |

62. AREA KNOWLEDGE

| | | | |
|---------|-------------------------------------|-------------------------------------|-------------------------------------|
| Italian | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|---------|-------------------------------------|-------------------------------------|-------------------------------------|

Very good; was born in Cuba and lived there many years.

SECTION XV EMPLOYMENT PRIOR TO CIA

63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING

1954-1960 was manager of a (combined Havana District Sales office for various U.S. firms.) income estimated at about \$10,000 yearly.

SECTION XVI ADDITIONAL INFORMATION

64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)

NA

APPROVAL

| | | | |
|--------------|---|--------------|--|
| DATE | TYPED NAME & SIGNATURE OF REQUESTING OPERATOR | DATE | TYPED NAME & SIGNATURE OF CONTRACT APPROVING OFFICER |
| 26 July 1961 | [Signature] | 27 July 1961 | [Signature] |

2/mj