

MATERIAL REVIEWED AT CIA HEADQUARTERS BY  
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME:

Personnel file:

Thomas B. CASASIN (*J. Richardson*)

INCLUSIVE DATES:

CUSTODIAL UNIT/LOCATION:

ROOM:

DELETIONS, IF ANY:

Sources and methods

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
04/19/78	7/10/78	Betsy WOLF	<i>Betsy Wolf</i>

RICHARDSON, JACQUES C. 006102

SECRET

(When Filled In)

1. SERIAL NUMBER <b>006102</b>		2. NAME (Last-First-Middle) <b>Richardson, James</b>		DATE PREPARED <b>5 April 1972</b>	
3. NATURE OF PERSONNEL ACTION <b>RESIGNATION</b>			4. EFFECTIVE DATE REQUESTED MONTH <b>05</b> DAY <b>14</b> YEAR <b>72</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6. FUNDS 	V TO V <input type="checkbox"/>	V TO CF <input type="checkbox"/>	7. FINANCIAL ANALYSIS NO. CHARGEABLE <b>9136-1231</b>	8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/EUROPEAN DIVISION, FOREIGN FIELD FRENCH AREA</b>			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE <b>OPS OFFICER</b>			12. POSITION NUMBER <b>0668</b>		13. CAREER SERVICE DESIGNATION <b>D</b>
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>15 8</b>	
17. SALARY OR RATE <b>\$31,554</b>					
18. REMARKS  <b>24065</b>  <b>OKS</b>					
DATE SIGNED		18a. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
Pers <b>8 Aug 72</b>				<b>9 Aug 72</b>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE <b>45</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTEGREE CODE
24. MONTHS CODE <b>3</b>	25. DATE OF BIRTH MO. <b>01</b> DA. <b>20</b> YR. <b>54</b>	26. DATE OF GRADE MO. DA. YR.		27. DATE OF LIT MO. DA. YR.	
28. NTE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-CYC 2-ORGR 3-FILA 4-NONE		31. SEPARATION DATA CODE <b>ANNE</b>	32. CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.
33. VET PREFERENCE CODE 0-NONE 1-5 PT. 2-10 PT.		34. SERV. COMP. DATE MO. DA. YR.	35. LONG. COMP. DATE MO. DA. YR.	36. CAREER CATEGORY CAR/RES PROV/TEMP	37. FEGLI/HEALTH INSURANCE CODE CODE 0-WAIVER 1-REG 2-REG/OPT 3-INELIGIBLE
38. SOCIAL SECURITY NO.		40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE 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 NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE
45. POSITION CONTROL CERTIFICATION  <b>8-9-72</b> <b>MW</b>		46. O.P. APPROVAL  <b>Dow H. Luster</b>			DATE APPROVED <b>9 AUG 1972</b>

FORM 1152 USE PREVIOUS EDITION

SECRET

10 AUG 1972

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

(4)

SECRET

(When filled in)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 006102		2. NAME (Last-First-Middle) H. H. H. H. H. H.		10 JULY 1970	
3. NATURE OF PERSONNEL ACTION EXTENSION OF PRA NTE 24 FEB 1971			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 20 71		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V XX CF TO CF		7. FINANCIAL ANALYSIS NO. CHARGEABLE 1136-1231		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD FRENCH AREA			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE OPS OFFICER (14)			12. POSITION NUMBER 0668		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, FS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 7	
17. SALARY OF RATE \$ 27,463		18. REMARKS cc: PAYROLL NTE 24 FEB 1971 * PRA Pw HRA 20-17 e(1)(6)			
19. SIGNATURE OF REQUESTING OFFICIAL H. H. H. H. H. H.		DATE SIGNED 7/12/70		100. SIGNATURE OF CAREER SERVICE APPROVING OFFICER 14 JUL 1970	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 446.20 EGR	22. STATION CODE 5-106	23. INTEGRITY CODE 3	24. ROOTS CODE 3
25. DATE OF BIRTH MO. DA. YR. 07 20 71		26. DATE OF GRADE MO. DA. YR. 07 20 71		27. DATE OF LST MO. DA. YR.	
28. NET EXPENSE MO. DA. YR. 07 20 71		29. SPECIAL REFERENCE 82		30. RETIREMENT DATA CODE	
31. SEPARATION DATA CODE TYPE MO. DA. YR.		32. CORRECTION CANCELLATION DATA MO. DA. YR.		33. SECURITY RES. SER.	
34. NET PREFERENCE CODE 0-NONE 1-5 PT. 2-10 PT.		35. SERV. COMP. DATE MO. DA. YR.		36. LONG COMP. DATE MO. DA. YR.	
37. CAREER CATEGORY CODE 1-YES 2-NONE		38. FEEDBACK INSURANCE CODE 0-NONE 1-YES 2-NONE		39. SOCIAL SECURITY NO.	
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		41. LEAVE CAT. CODE		42. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NONE	
43. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NONE		44. TAX EXEMPTIONS CODE 1-YES 2-NONE		45. TAX STATE CODE	
46. POSITION CONTROL CERTIFICATION 7-28-70 mw			47. OFF. APPROVAL D. H. H. H. H. H.		48. DATE APPROVED 7-21-70

SECRET

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 006102				2 NAME (Last-First-Middle) Richardson, Richard	
3 NATURE OF PERSONNEL ACTION EXTENSION OF PRA NTE: 1 year			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02/25/69		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CF TO V XX CF TO CF			7 FINANCIAL ANALYSIS NO. CHARGEABLE 9136 1231		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD CENTRAL REGION			10 LOCATION OF OFFICIAL STATION		
11 POSITION TITLE OPS OFFICER			12 POSITION NUMBER 0668		13 CAREER SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, F.B., etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 15 8 7	
17 SALARY OR RATE 2,373.34 - \$ 23,075					
18 REMARKS					
18A SIGNATURE OF REQUESTING OFFICER C/E/Pers		DATE SIGNED 2/26/69		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER 3-4-69	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 44 LMC EUR	22 STATION CODE 24065	23 INGREE CODE 3	24 MONTHS 01/20/24
25 DATE OF BIRTH MO. DA. YR. 02/24/70	26 DATE OF GRADE MO. DA. YR. 02/24/70	27 DATE OF LEI MO. DA. YR. 02/24/70	28 DATE OF BIRTH MO. DA. YR. 02/24/70	29 DATE OF GRADE MO. DA. YR. 02/24/70	30 DATE OF LEI MO. DA. YR. 02/24/70
31 SPECIAL REFERENCE NO. DA. YR. 02/24/70	32 RETIREMENT DATA NO. DA. YR. 02/24/70	33 SEPARATION DATA CODE TYPE EOD DATA	34 CORRECTION CANCELLATION DATA MO. DA. YR. 02/24/70	35 SECURITY REQ. NO.	36 SEX
37 VET. PREFERENCE CODE 0-NO 1-5 PT 2-10 PT	38 SERV COMP DATE MO. DA. YR. 02/24/70	39 LONG COMP DATE MO. DA. YR. 02/24/70	40 CAREER CATEGORY CAR RESY PROV. TEMP	41 FEGLI HEALTH INSURANCE CODE 0-BAIWER 1-YES	42 SOCIAL SECURITY NO.
43 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)	44 LEAVE CAT. CODE FORM EXECUTED 1-YES 2-NO	45 FEDERAL TAX DATA CODE NO. TAX EXEMPTIONS	46 STATE TAX DATA FORM EXECUTED 1-YES 2-NO	47 SOCIAL SECURITY NO.	48 DATE APPROVED 3/7/69
49 POSITION CONTROL CERTIFICATION 3-7-69			50 OP APPROVAL DATE APPROVED 3/7/69		

SECRET



SECRET

(If New Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 006102				2. NAME (Last, first - Middle) Williamson, Eugene	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 26 67		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V			7. FINANCIAL ANALYSIS NO. CHARGEABLE 7136-1231		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD CENTRAL REGION			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE OPS OFFICER (14)			12. POSITION NUMBER 0608		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (G.S. I.B. etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15-6
17. SALARY OR RATE \$ 20,585			18. REMARKS XTRA-per HR-21c (2) for duration of present tour. 21-17D(B) Slotting for new T/O.		
19. SIGNATURE OF REQUESTING OFFICIAL [Signature]			DATE SIGNED [Date]		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]
DATE SIGNED 2 MAR 1967			DATE SIGNED 2 MAR 1967		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37 10	20. EMPLOY CODE 44 600	21. OFFICE CODING NUMERIC ALPHABETIC 82	22. STATION CODE 24 65	23. INTEGREE CODE	24. MOOTS CODE 3
25. DATE OF BIRTH MO. DA. YR. 01 20 24	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.	28. NTE EXPIRES MO. DA. YR. 03 15 69	29. SPECIAL REFERENCE 1-ENC 3-FICA 5-NOW	30. RETIREMENT DATA CODE
31. SEPARATION DATA CODE TYPE	32. CORRECTION/CANCELLATION DATA MO. DA. YR.	33. SECURITY REQ. NO.	34. SEX	35. NET 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 CODE	39. FEGLI HEALTH INSURANCE CODE 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 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED 1-YES 2-NO	45. POSITION CONTROL CERTIFICATION 3-3-67 [Signature]	46. OP APPROVAL [Signature]	DATE APPROVED	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

(4)

SECRET

(When Filled In)

P 55

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
XXB				29 March 1966	
1. SERIAL NUMBER 006102		2. NAME (Last, First, Middle) Richardson, Jeffrey			
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 10 66		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	V TO CF	7. COST CENTER NO. CHARGE ABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203	
	CF TO V	X CF TO CF	6136-1231		
9. ORGANIZATIONAL DESIGNATIONS DIE/WE FOREIGN FIELD INTERNAL OPERATIONS SECTION			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0885	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (G.S., F.H., etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 15 5	17. SALARY OR RATE \$19,415	
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION.					
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 28	23. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 5060A LWC	22. STATION CODE 24065	23. INTEGRITY CODE 3	25. DATE OF BIRTH MO. DA. YR. 03 12 23
26. DATE OF GRADE MO. DA. YR. 02 03 63	27. DATE OF LSI MO. DA. YR. 07 31 65	29. SPECIAL REFERENCE 82	30. RETIREMENT DATA 1-CSE 2-FRA 3-MORE	31. SEPARATION DATA CODE TYPE MO. DA. YR.	32. CORRECTION CANCELLATION DATA EOD DATA
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 CODE 0-WAITER 1-YES
39. FEGLI-HEALTH INSURANCE CODE 0-WAITER 1-YES	40. SOCIAL SECURITY NO.	41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO PREVIOUS 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 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED 1-YES 2-NO
45. POSITION CONTROL CERTIFICATION 04-01-0101			46. OP APPROVAL See memo signed by /Pers dated 31 MAR 1966 Daw H. Lurticher		
			DATE APPROVED 31 MAR 1966		

FORM 1152 USE PREVIOUS EDITION

OP-2  
1-68

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 006102		2. NAME (Last-First-Middle) <i>Richard J. Jones</i>			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 15 64		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V CC CF TO CF		7. COST CENTER NO. CHARGEABLE 4136-6250-1012		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP WE INTERNAL OPERATIONS SECTION			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0885		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 4	
				17. SALARY OR RATE \$ 17,210	
18. REMARKS FROM: DDP WE/ 0886. PRA IN ACCORDANCE WITH HR 20-21c (2) FOR DURATION OF TOUR. NTE <i>12/14/66</i> 03/14/66					
19. ACTION CODE 31 10		20. EMPLOY CODE 50600 WE		21. OFFICE CODING NUMERIC ALPHABETIC 54065	
22. STATION CODE 4065		23. INTEREST CODE 3		24. INDOTRS CODE 61/22/24	
25. DATE OF BIRTH MO. DA. YR. 01 15 24		26. DATE OF GRADE MO. DA. YR.		27. DATE OF LEI MO. DA. YR.	
28. NTE EXPIRES 03 14 66 11 30 67		29. SPECIAL REFERENCE 1-ESC 3-FICA 5-NONE 182		30. RETIREMENT DATA CODE	
31. SEPARATION DATA CODE		32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REQ. NO.	
34. SER. COMP. DATE MO. DA. YR.		35. LONG. COMP. DATE MO. DA. YR.		36. CAREER CATEGORY CODE	
37. FEGLI HEALTH INSURANCE CODE		38. SOCIAL SECURITY NO.		39. STATE TAX DATA CODE	
40. PREVIOUS GOVERNMENT SERVICE DATA 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)		41. LEAVE CAT. CODE		42. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO	
43. POSITION CONTROL CERTIFICATION		44. OP APPROVAL		45. DATE APPROVED	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

14.

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>11 AUGUST 1963</b>	
1. SERIAL NUMBER <b>xxB</b> <b>604-102</b>		2. NAME (Last-First-Middle) <b>Richardson, Reginald</b>					
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>10 13 63</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6. FUNDS ▶ <b>V TO V</b> <b>CF TO V</b>		<b>V TO CF</b> <b>CC</b> <b>CF TO CF</b>		7. COST CENTER NO. CHARGEABLE <b>4136-6250-1012</b>		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP WE</b> <b>EXTERNAL OPS SECTION</b>				10. LOCATION OF OFFICIAL STATION			
11. POSITION TITLE <b>OPS OFFICER</b>				12. POSITION NUMBER <b>0086</b>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>15 4</b>		17. SALARY OR RATE <b>16,005</b>	
18. REMARKS  FROM: DDP SR FOREIGN FIELD/WE AREA, <b>0240</b> PRAed IN ACCORDANCE WITH HR 20-580, PARA 4 (b). <i>for 2 yrs.</i> COPIES SENT TO FINANCE AND SECURITY.  <div style="text-align: right;">RECEIVED CDD <i>cm</i></div>							
19. DATE SIGNED <b>AC/WE/PT</b>		189. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED <b>15 Oct 63</b>			
NOTE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. ACTION CODE <b>2710</b>	21. EMPLOY CODE <b>5060 WE</b>	22. OFFICE CODING NUMERIC ALPHABETIC <b>24025</b>	23. STATION CODE <b>3</b>	24. MONTHS <b>3</b>	25. DATE OF R 9th MO. DA. YR. <b>10 13 63</b>	26. DATE OF R 9th MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. NTE EXPIRES MO. DA. YR. <b>10 12 65</b>	29. SPECIAL REFERENCE <b>34</b>	30. RETIREMENT DATA 1 - CCC 3 - FICA 5 - NONE	31. SEPARATION DATA CODE TYPE MO. DA. YR.	32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR.	33. SECURITY REQ. 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 CAR/RESV PROV/TEMP	39. FECLTY/HEALTH INSURANCE CODE 0 - NONE 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 EXECUTED 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO		
45. POSITION CONTROL CERTIFICATION <b>W. Kearney 10/22/63</b>				46. C.P. APPROVAL <b>Nathan D. ...</b>		DATE APPROVED <b>15 Oct 63</b>	

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 23 January 1963	
1. SERIAL NUMBER <del>00000</del> 000002		2. NAME (Last-First-Middle) <del>Richard B. Rogers</del> Rogers									
3. NATURE OF PERSONNEL ACTION Promotion					4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 03 63		5. CATEGORY OF EMPLOYMENT Regular				
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGE-ABLE 3134 4008 1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
		CF TO V		X CF TO CF							
9. ORGANIZATIONAL DESIGNATIONS DDP/SR - FOREIGN FIELD Western European Area					10. LOCATION OF OFFICIAL STATION						
11. POSITION TITLE Ops Officer					12. POSITION NUMBER 0240		13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 4		17. SALARY OR RATE \$ 16005				
18. REMARKS From same slot.  PRA in accordance with HR-20-21c(3) for a period not to exceed 2 years.											
19. DATE SIGNED					19a. SIGNATURE OF CAREER SERVICE APPROVING					DATE SIGNED	
					C/SR/PERSONNEL					24 Jan 63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 22		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 40610 SR		22. STATION CODE 4465		23. INTEROFF CODE 3		24. HOSIPG CODE 0120 154 02 03 63	
25. DATE OF BIRTH MO. DA. YR. 02 03 63		26. DATE OF GRADE MO. DA. YR. 02 03 63		27. DATE OF FI MO. DA. YR. 02 03 63		28. DATE OF BIRTH MO. DA. YR. 02 03 63		29. DATE OF GRADE MO. DA. YR. 02 03 63		30. DATE OF FI MO. DA. YR. 02 03 63	
31. NTE EXPIRES MO. DA. YR. 80		32. SPECIAL DEFERENCE 1 - CSC 3 - FICA 4 - NONE		33. RETIREMENT DATA CODE		34. SEPARATION DATA CODE TYPE		35. CORRECTION/CANCELLATION DATA MO. DA. YR.		36. SECURITY REQ. NO.	
37. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.		38. SPNS. COMP. DATE MO. DA. YR.		39. LONG. COMP. DATE MO. DA. YR.		40. MIL. SERV. CREDIT/CD 1 - YES 2 - NO		41. REG. / HEALTH INSURANCE CODE 0 - NONE 1 - YES		42. SODIA. SECURITY NO.	
43. PREVIOUS GOVERNMENT SERVICE DATA 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)				44. LEAVE CAT. CODE		45. FEDERAL TAX DATA FORM EXEMPTED CODE 1 - YES 2 - NO		46. STATE TAX DATA FORM EXEMPTED CODE 1 - YES 2 - NO		47. STATE CODE	
48. POSITION CONTROL CERTIFICATION MRO 8 FEB 1963						49. O.P. APPROVAL Richard B. Rogers			DATE APPROVED		

**SECRET**  
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 9 July 1962																																									
1. <i>X-1-B</i>		2. NAME (Last-First-Middle) <i>Richard L. ...</i>																																													
3. NATURE OF PERSONNEL ACTION <b>Excepted Appointment (Career)</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <i>08/05/62</i>		5. CATEGORY OF EMPLOYMENT <b>Regular</b>																																									
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE <i>3034 4008 1000</i>																																									
		CF TO V		X CF TO CF		8. LEGAL AUTHORITY (Completed by Office of Personnel)																																									
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/SR Western European Area</b>				10. LOCATION OF OFFICIAL STATION																																											
11. POSITION TITLE <b>Ops Officer</b>				12. POSITION NUMBER <b>240</b>		13. CAREER SERVICE DESIGNATION <b>D</b>																																									
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <i>14</i> <b>0136.01</b>		16. GRADE AND STEP <b>14</b> <b>06</b>		17. SALARY OR RATE <i>510</i> <b>1385</b>																																									
18. REMARKS <p align="center">Last day at Headquarters will be 31 July 1962</p> <p><del>Departing U. S. around mid August 1962.</del> Departing U. S. around mid August 1962.</p> <p>259's submitted.</p> <p>Copy furnished Office of Security.</p> <p><i>W/F concurrence on the telephone</i> <i>Acting DC/WE</i></p> <p><i>7/54</i></p> <p align="center">Recorded CSFD</p>																																															
18a. <i>CIA</i>		DATE SIGNED		18b. SIGNATURE OF CAREER SERVICE APPROVING		DATE SIGNED <i>24 July 62</i>																																									
<p align="center"><b>C/SR/PERSONNEL</b></p> <p align="center">SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL</p> <table border="1"> <tr> <td>19. ACTION CODE <i>13</i></td> <td>20. EMPLOY CODE <i>14</i></td> <td>21. OFFICE CODE/NO. NUMERIC ALPHABETIC <i>0160 SR 24065</i></td> <td>22. STATION CODE <i>3</i></td> <td>23. MILES CODE <i>01120124</i></td> <td>24. DATE OF BIRTH MO. DA. YR. <i>01/16/55</i></td> <td>25. DATE OF DEATH MO. DA. YR. <i>01/08/61</i></td> <td>26. DATE OF RES. MO. DA. YR. <i>06/02/61</i></td> </tr> <tr> <td colspan="2">27. DATE OF RES.</td> <td>28. SPECIAL REFERENCE 1 - CSC 2 - FICN 3 - NONE</td> <td>29. RETIREMENT DATA CODE <i>1</i></td> <td>30. SEPARATION DATA CODE <i>1</i></td> <td>31. CORRECTION/CANCELLATION DATA MO. DA. YR. <i>06/02/61</i></td> <td>32. SECURITY NO. <i>42-20-5339</i></td> <td>33. SEA</td> </tr> <tr> <td colspan="2">34. VET. PREFERENCE CODE <i>1</i></td> <td>35. SERV. COMP. DATE MO. DA. YR. <i>03/07/44</i></td> <td>36. LONG. COMP. DATE MO. DA. YR. <i>11/20/49</i></td> <td>37. MIL. SERV. CREDIT/ID 1 - YES 2 - NO <i>C</i></td> <td>38. FEELTY / HEALTH INSURANCE CODE <i>1</i></td> <td>39. SECURITY NO. <i>42-20-5339</i></td> <td>40. SEA</td> </tr> <tr> <td colspan="2">41. PREVIOUS GOVERNMENT SERVICE DATA CODE <i>1</i></td> <td>42. LEAVE CAT. CODE <i>8</i></td> <td>43. FEDERAL TAX DATA FORM EXEMPTIONS CODE <i>C C -</i></td> <td>44. STATE TAX DATA FORM EXEMPTIONS CODE <i>F -</i></td> <td colspan="3">45. POSITION CONTROL CERTIFICATION</td> </tr> <tr> <td colspan="4">46. D.P. APPROVAL <i>Joseph D. Rogan</i></td> <td colspan="4">DATE APPROVED <i>7/24/62</i></td> </tr> </table>								19. ACTION CODE <i>13</i>	20. EMPLOY CODE <i>14</i>	21. OFFICE CODE/NO. NUMERIC ALPHABETIC <i>0160 SR 24065</i>	22. STATION CODE <i>3</i>	23. MILES CODE <i>01120124</i>	24. DATE OF BIRTH MO. DA. YR. <i>01/16/55</i>	25. DATE OF DEATH MO. DA. YR. <i>01/08/61</i>	26. DATE OF RES. MO. DA. YR. <i>06/02/61</i>	27. DATE OF RES.		28. SPECIAL REFERENCE 1 - CSC 2 - FICN 3 - NONE	29. RETIREMENT DATA CODE <i>1</i>	30. SEPARATION DATA CODE <i>1</i>	31. CORRECTION/CANCELLATION DATA MO. DA. YR. <i>06/02/61</i>	32. SECURITY NO. <i>42-20-5339</i>	33. SEA	34. VET. PREFERENCE CODE <i>1</i>		35. SERV. COMP. DATE MO. DA. YR. <i>03/07/44</i>	36. LONG. COMP. DATE MO. DA. YR. <i>11/20/49</i>	37. MIL. SERV. CREDIT/ID 1 - YES 2 - NO <i>C</i>	38. FEELTY / HEALTH INSURANCE CODE <i>1</i>	39. SECURITY NO. <i>42-20-5339</i>	40. SEA	41. PREVIOUS GOVERNMENT SERVICE DATA CODE <i>1</i>		42. LEAVE CAT. CODE <i>8</i>	43. FEDERAL TAX DATA FORM EXEMPTIONS CODE <i>C C -</i>	44. STATE TAX DATA FORM EXEMPTIONS CODE <i>F -</i>	45. POSITION CONTROL CERTIFICATION			46. D.P. APPROVAL <i>Joseph D. Rogan</i>				DATE APPROVED <i>7/24/62</i>			
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6151.  
 6 August 1932

Memorandum in Lieu of Fitness Report

Subject: ~~XXXXXXXXXXXXXXXXXXXX~~

My last statements concerning the performance of  
 should be extended to cover the  
 remainder of his service as Chief of SR/G. He de-  
 parted headquarters for a field assignment 31 July  
 1932.

Chief of Operations and Plans  
 SR Division

CONCUR:

HOWARD T. CHESLER  
 Chief, SR Division

**SECRET.**

Robert F. Kennedy, Jr.

<div style="display: flex; justify-content: space-between;"> <span>104. 5</span> <span>IC 5</span> <span>DATE SIGNED</span> <span>100. SIGNATURE OF CAREER SERVICE APPROVING OFFICER</span> <span>DATE SIGNED</span> </div>									
<div style="display: flex; justify-content: space-between;"> <span>C/SR/PERSONNEL</span> <span><i>[Signature]</i></span> <span>7/24/62</span> </div>									
<div style="text-align: center;">             SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL           </div>									
<div style="display: flex; justify-content: space-between;"> <div>             11. ACTION CODE 45           </div> <div>             12. EMPLOY CODE 10           </div> <div>             13. NAME W. J. JACQUES           </div> <div>             14. DATE 7/24/62           </div> <div>             15. DATE 7/24/62           </div> <div>             16. DATE 7/24/62           </div> <div>             17. DATE 7/24/62           </div> </div>									
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SECRET

(When Filled In)

## EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE 4 August 1962 FOR THE FOLLOWING REASON:  
(Date)*To accept private employment.*

MY LAST WORKING DAY WILL BE -

DATE SIGNED

SIGNATURE OF EMPLOYEE

*4 August 62**23 July 62**Requesh. Richardson*

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, Zone, State)

## INSTRUCTIONS

Items 1 thru 7 } The initiating office should fill in each of the referenced items.  
and  
Items 9 thru 18a } - Items 3 thru 7 and 9 thru 18 require information which pertains only  
to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary - Part Time		

Item 9 - "Organizational Designations" should show all levels of organization pertinent to identifying the location of the position:

First Line  
Major Component (Director, Deputy Director, etc.)  
Office, Major Staff, etc.  
Division or Staff (subordinate to first line)  
Branch  
Section  
Unit

Item 11 - "Position Title" should reflect the standard abbreviated title given in the most current edition of the Position Control Register or reported on Form 261, Staffing Complement Change Authorization.Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the gaining Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING - The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-900-1, which require advance approval of or notification to the Office of Security or the Office of the Comptroller, one copy only will be sent to the Office(s) concerned.

SECRET

1 Apr: 18 AUG 67

NOTIFICATION OF PERSONNEL ACTION							
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)					
076102		RICHARDSON JACQUES					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
RESIGNATION				18 JUL 67		REGULAR	
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
<input checked="" type="checkbox"/> V TO V <input type="checkbox"/> CF TO V		<input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO CF		1234			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
CPS OFF CLR BR LH				15		1	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		0136.1		4 6		1351	
18. REMARKS							
SIGNATURE OR OTHER AUTHENTICATION							

**SECRET**  
(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION										V to V		V to UV			
Mo	Da	Yr											UV to V		UV to UV			
09	12	60																
1. Serial No.			2. Name (Last-First-Middle)					3. Date of Birth			4. Vet. Pref.		5. Sex		6. CS - EOD			
006102			JACQUES G RICHARDSON					01 20 24			None-0 10 Pt-1 10 Pt-2		1 M					
7. SCD			8. CSC Retmt.					9. CSC Or Other Legal Authority					10. Appt. Affidav.		11. FEGLI		12. LCD	
Mo Da Yr			Yes - 1 Code					Mo Da Yr					Yes - 1 Code		Mo Da Yr		13. MIL. SERV. CREDIT, LCD	
			No - 2										Mo Da Yr		Yes - 1 Code		No - 2	

**PREVIOUS ASSIGNMENT**

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP SR FAR EAST AREA TOKYO STATION SOVIET BRANCH						TOKYO, JAPAN					
16. Dept.-Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - Valid - Frgn -		Cgde		OPS OFFICER BR CH		189		GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
14 4		12,990		D		11/15/57		7/2/61		1134 7000 3000	

**ACTION**

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
REASSIGNMENT TRANSFER OF FUNDS				10 02 60		REGULAR					

**PRESENT ASSIGNMENT**

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP SR SR 6 OFFICE OF THE CHIEF						WASH., D. C.					
33. Dept.-Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - Valid - Frgn -		Cgde		OPS OFFICER - BR CH		50 D-15		GS		0136.C1	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
14 4		12,990		D						1234 1000 1000	

**SOURCE OF REQUEST**

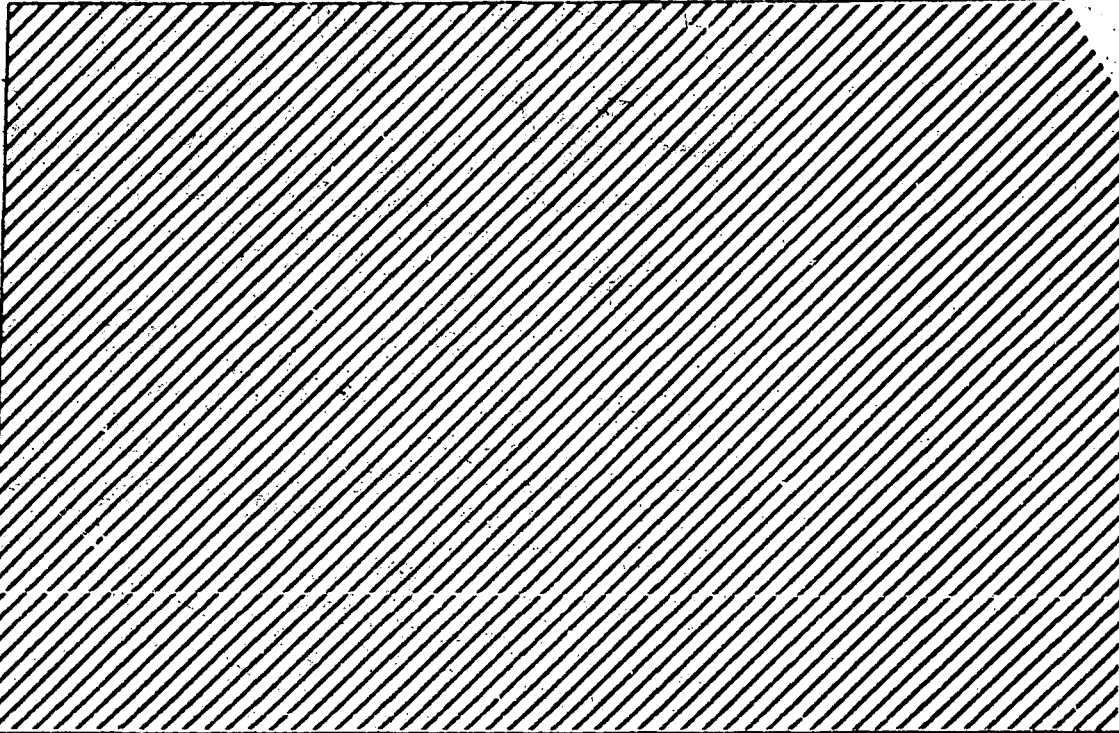
A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
ANDREW L. RUSBY CH/SR/PERSONNEL		<i>A. Rusby</i>	
B. For Additional Information Call (Name & Telephone Ext.)			
E. G. JOHNSON 11407			

**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>Rusby</i>	9/16/60	D. Placement		
B. Pos. Control		10-16-60	E.		
C. Classification			F. Approved By	<i>A. Rusby</i>	10 10 60

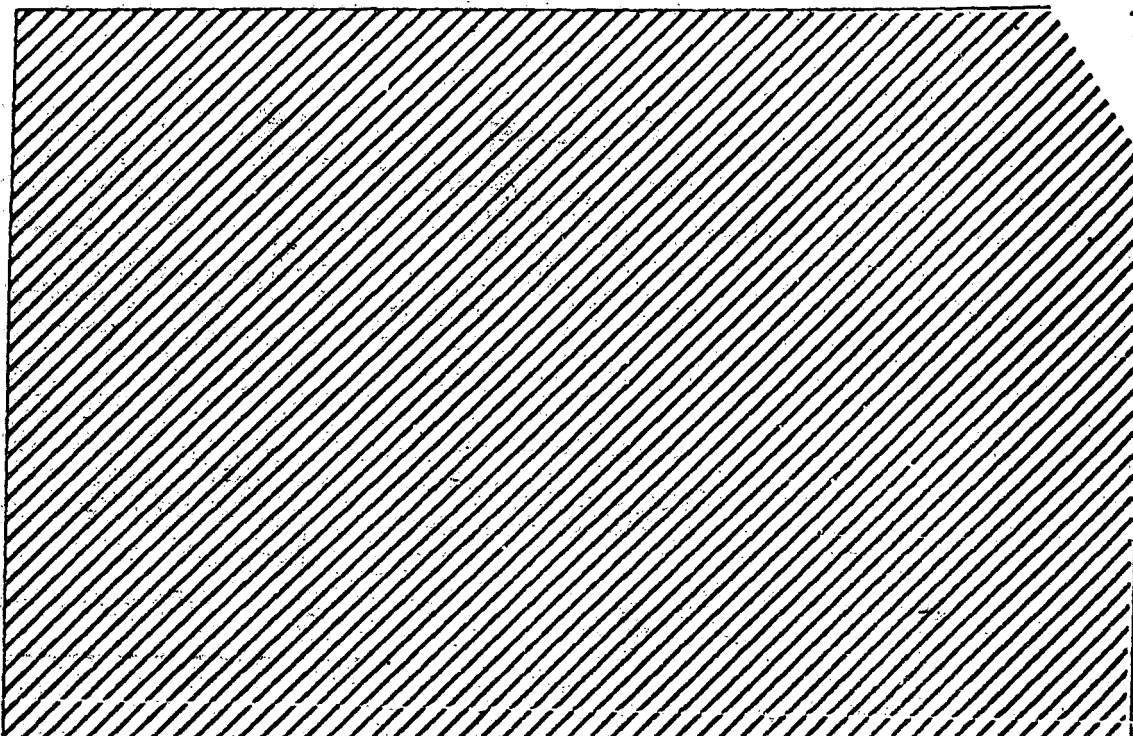
Remarks Two copies of this action have been forwarded to the Office of Security.

SECRET  
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
Richardson Jacques G.	X	59-41
<p>There is on file in the Casualty Affairs Branch, Benefits and Casualty 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 <u>3 November 1958</u></p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BCD REPRESENTATIVE	
28 AUG 1959	B. Detenico	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

14-00000

SECRET  
(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
RICHARDSON, Jacques G.	Unk	58-201

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, ~~or death~~ incurred on 4 Feb 1958.

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 RCD REPRESENTATIVE
15 July 1958	<i>[Handwritten Signature]</i>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

STANDARD FORM 52 PROPOSED BY THE U. S. GOVERNMENT BUREAU OF PERSONNEL MANUAL CHAPTER III		VOUCHERED TO CONFIDENTIAL	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
MR JACQUES C. RICHARDSON	20 Jan 1924		13 Dec 54
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
PROMOTION		✓ Jan. '55	
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	
		16 Jan 1955	
FROM— Area Ops Officer (Br. Ch.) EC-171-13 GS-0136.01-13 \$8360.00 p.a. DDP/SR SR/5 Washington, D.C.	8. POSITION TITLE AND NUMBER 9. SERVICE GRADE AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL	TO— Area Ops Officer BCF-189-14 GS-0136.01-14 \$9600.00 p.a. DDP/SR Far East Area Office of the Chief	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
A. REMARKS (Use reverse if necessary)			
PLEASE TRANSFER FROM VOUCHERED TO CONFIDENTIAL FUNDS, \$560.00 Memo stating why fitness report not necessary 7.7			
B. REQUESTED BY (Name and title)		D. REQUEST APPROVED BY	
		Signature: [Signature] Title: DDP/P. Admin.	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)			
Ext. 3748			
15. SEX M W		16. RACE M W	
17. APPROPRIATION FROM: 5-3400-20 TO: 5-3400-55-015		18. POSITION CLASSIFICATION ACTION NEW VICE I.A. REAL SD:FI	
19. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes		20. DATE OF APPOINT- MENT AFFIDAVITS (ACCESSIONS ONLY) DATE: 1-11-55	
21. STANDARD FORM 50 REMARKS			
Effective date per Jas. in BK Rev. 1-11-55 7/12/55 Cone. by Asbarne 1-11-55 Rev. 1-11-55			
22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL		7/12 4 Jan	
C. CLASSIFICATION			
D. PLACEMENT OR ENPL		1/11 52.55	
E.			
F. APPROVED BY			
[Signature] 1-5-55			

APPROVED BY  
FI CAREER SERVICE BOARD  
DATE: DEC 21 1954

SECRET

SECRET  
Security Information

DD/P

PERSONNEL DATA SHEET

NAME: Jacques G. Richardson AGE: 31

DATE: 13 Dec 1954

STATION Washington, D.C.  
AND DUTIES: Area Ops Off. DD/P UNIT: SR  
(Br. Ch.)  
PRESENT GRADE: GS-13

PRIMARY CAREER  
DESIGNATION: SD:FI

PRESENT T/O SLOT BC-171  
NUMBER AND GRADE: GS-15

PROPOSED GRADE: GS-14

PROPOSED T/O SLOT BCF-189  
NUMBER AND GRADE: GS-15

CIA TRAINING:

SOC - 9 Jan - 3 Feb 1950  
Ops Course - 20 Feb - 17 Mar 1950  
Adv. Ops Course 27 Mar - 21 Apr 1950  
CE Course 4 Jan - 22 Jan 1954  
Audio-Surveillance 29 Nov - 1 Dec 1954 - Flaps & Seals 2 & 3 Dec 1954

EDUCATION:

University of Michigan, 1945 - BA  
Georgetown University - 1951 to 1952

LANGUAGE PROFICIENCY:

Japanese & French - Fluent  
Mandarin, Italian, Spanish, Portuguese & German - Fair

ASSESSED:

DATE:

TYPE OF POSITION:

RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-CSS):

Feb 1943 to Aug 1946 - US Army  
Sept 1946 to Mar 1948 - Civil Intell. USA  
Apr 1948 to Oct 1948 - Civil Intell. 1st Lt. (over)

SUMMARY OF CIA-SSU-CSS ASSIGNMENTS INCLUDING PREVIOUS GRADES AND DATES:

APT - 7-18-50 - Intell Asst. GS-7 - OPC/FE/FE-3,   
PRO - 10-1-50 - Intell Officer, GS-9 - OPC/FE/FE-3,   
PRO & REAS - 4-29-51 - Intell Officer, GS-11 - OPC/FE/FE-3  
PRO - 1-20-52 - Ops Officer - GS-12 - OPC/FE/FE-3  
REAS - 2-17-52 - Ops Officer - GS-12 - OPC/EE/EE-4, Great Russian Sec., Wash, D.C.  
REAS - 12-7-52 - Intell Officer(Dep.Ch.) GS-12 - DDP/SR - SR-5 O/C  
PRO - 7-5-53 - Intell Officer (Dep. Ch) -GS-13 - DDP/SR - SR-5 O/C  
REAS - 2-28-54 - Area Ops Off. (Br. Ch.) GS-13 - DDP/SR - SR-5

RECOMMENDED BY:

CONCURRENCES:

Chief, SR/Admin

RECOMMENDATION ON OFFER SERVICE BOARD:

Chief, SR

14-00000

EXPERIENCE PRIOR TO CIA(excluding SSU-CSS)

Publications"Press Censorship in Japan" Army Info Digest Nov 1949 to  
Numerous news items, 2 editorials while editor, graduate term papers  
on Yugoslavia, China, Korea & Afghanistan.

MAIL ROOM

DEC 28 2 39 PM '54

OFFICE OF PERSONNEL



STANDARD FORM 52 FORMERLY USED BY THE U. S. CIVIL SERVICE COMMISSION JANUARY 1953 - FEDERAL PERSONNEL MANUAL, CHAPTER VI			
<b>REQUEST FOR PERSONNEL ACTION</b>			
<b>REQUESTING OFFICE:</b> Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)		2. DATE OF BIRTH	
Jacques C. Richardson		20 Jan 1911	
3. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		4. EFFECTIVE DATE A. PROPOSED:	
Reassignment		14 Feb 1954	
5. POSITION (Specify whether establish, change grade or title, etc.)		6. APPROVED:	
FROM - <del>DEPUTY CHIEF (FO)</del> <del>Area Officer (Pr. Ch.)</del> EC-190-13 GS-132-13 \$8360.00 <del>DDP/SS</del> SR-5 (Far East Branch) Office of the Chief Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		TO - Area Ops Officer (Pr. Ch.) EC-171-13 GS-136.01-13 \$8360.00 DDP/SS SR-5 Washington, D.C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
7. REMARKS (Use reverse if necessary)			
8. REQUESTED BY (Name and title)		9. REQUEST APPROVED	
		Signature: _____	
10. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Title: <u>SA Linwood C. Allen</u>	
Ext. 3748			
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NONE WWII OTHER SPT. 15 POINT DISAB. OTHER <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>		NEW VICE I.A. SEC. CD:FT	
15. SEX M	16. RACE W	17. APPROPRIATION FROM: 4-3400-20 TO: 4-3400-20	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)
		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
21. STANDARD FORM 50 REMARKS			
22. CLEARANCES		INITIAL OR SIGNATURE:	DATE
A.			
B. CEIL. OR POS. CONTROL		RC	2/16
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.		RC	2/16
E.			
F. APPROVED BY			
[Signature] 7/16/54			

STANDARD FORM 52 FORM 52-1 (Rev. 1-5-53) U. S. CIVIL SERVICE COMMISSION ANALYST - FEDERAL PERSONNEL MANUAL, CHAPTER II		CONFIDENTIAL Security Information	
REQUEST FOR PERSONNEL ACTION		VOUCHERED	
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
Mr. Jacques D. Richardson	20 Jan. 1924		30 Mar 1953
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
Promotion			
8. POSITION (Specify whether establish, change grade or title, etc.)		D. APPROVED: 5 July 53	
FROM— Deputy Chief I.C. BC-190-12 GS-132-12 \$7040.00  DDP/SR Division SR-5 Far East Office of the Chief Washington, D.C.	9. POSITION TITLE AND NUMBER  10. SERVICE, GRADE, AND SALARY  11. ORGANIZATIONAL DESIGNATIONS HEADQUARTERS	TO— Deputy Chief I.C. BC-190-13 GS-132-13 \$8360.00  DDP/SR Division SR-5 Far East Office of the Chief Washington, D.C.	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
A. REMARKS (Use reverse if necessary)			
BC-190		APPROVED BY FI CAREER SERVICE BOARD DATE: JUN 24 1953	
2. REQUESTED BY (Name and title)			
3. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)			
Ext. 3748 Title: FI/CMO.			
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NONE	WHEN OTHER 5-PT.	NEW	VICE
	15. POINT	L.A.	REAL
	DISAB. OTHER		
15. SEX	16. RACE	17. APPROPRIATION	
		FROM:	
		TO:	
18. SUBJECT TO C. S. RETIREMENT ACT (YES—NO)		19. DATE OF APPOINT- MENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
21. STANDARD FORM 50 REMARKS			
22. CLEARANCES		INITIAL OR SIGNATURE	DATE
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			
F. APPROVED BY			

CONFIDENTIAL  
Security Information

PERSONNEL ACTION REQUEST				REGISTER NO.
NAME <b>RICHARDSON, Jacques G.</b>			REQUESTED EFFECTIVE DATE <b>17 Feb.</b>	
NATURE OF ACTION <b>Reassignment</b>			WHEN LEAVING (PROCESSED)  LAST WORKING DAY:  EMPLOYEE'S SIGNATURE:	
FROM			TO	
TITLE <b>Operations Officer</b>			<b>Operations Officer</b>	
GRADE AND SALARY <b>GS-12 \$7040</b>			<b>GS-12 \$7040</b>	
OFFICE <b>OPC</b>			<b>OPC</b>	
DIVISION <b>FE</b>			<b>EE</b>	
BRANCH AND SECTION <b>FE-3</b>			<b>EE-4</b> <b>Great Russian Section</b>	
OFFICIAL STATION <b>Washington, D. C.</b>			<b>Washington, D. C.</b>	
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>			DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>	
REMARKS <b>S. 617</b> <b>(S. 480)</b> <b>132</b> <b>MJR</b> <b># 510</b>				
RECOMMENDED <b>5 Jan. 52</b> <b>(DATE)</b> <b>(SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF, OR ADM. OFFICER)</b>				
FOR USE OF PERSONNEL ONLY				
PLACEMENT			TRANSACTIONS AND RECORDS	
DATE QUALIFICATIONS APPROVED			APPROPRIATION: <b>2123900</b>	
CLEARANCE REQUESTED			ALLOTMENT: <b>2011</b>	
DATE	TYPE	DATE	C. S. C. AUTHORITY: <b>See RB 1604</b>	
DATE	SIGNATURE	DATE	DATE SIGNATURE	SIGNATURE
			<b>2-15-52</b>	<b>[Signature]</b>
CLASSIFICATION			PERSONNEL RELATIONS	
BUREAU NO. <b>9845</b>	C. S. C. NO.	DATE APPROVED <b>1/17/52</b>	DATE	SIGNATURE <b>[Signature]</b>
NEW	VICE	L.A.	APPROVALS	SUBJECT TO SECURITY CLEARANCE
DATE <b>2/5/52</b>	SIC	REAL	DATE	SIGNATURE OF EXECUTIVE
EFFECTIVE DATE			DATE	SIGNATURE OF PERSONNEL OFFICER

## PERSONNEL ACTION REQUEST

REGISTER NO.

NAME <b>RICHARDSON, Jacques G.</b>		REQUESTED EFFECTIVE DATE <b>20 Jan 52</b>	
NATURE OF ACTION <b>Promotion</b>		WHEN LEAVING (VOUCHERED)  LAST WORKING DAY:  EMPLOYEE'S SIGNATURE:	
FROM		TO	
TITLE <b>Operations Officer</b>		Operations Officer	
GRADE AND SALARY <b>GS-11 \$5400.00 5940</b>		GS-12 <sup>7040</sup> \$6400.00	
OFFICE <b>ORC</b>		ORC	
DIVISION <b>FE</b>		FE	
BRANCH AND SECTION <b>FE-3</b>		FE-3	
OFFICIAL STATION <b>Washington, D. C.</b>		Washington, D. C.	
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>	
REMARKS: <b>(S-617) [Signature]</b> <span style="float: right;">132</span>  <b># 9930</b>			
RECOMMENDED: <b>30 Oct 51</b> <span style="float: right;">[Signature] EWS/FC</span> (CATED) <span style="float: right;">[Signature] (OR ADM. OFFICER)</span>			
FOR USE OF PERSONNEL ONLY			
PLACEMENT		TRANSACTIONS AND RECORDS	
DATE QUALIFICATIONS APPROVED <b>10 Jan 52</b>		APPROPRIATION: <b>202 3200</b>	
CLEARANCE REQUESTED		ALLOTMENT: <b>2017</b>	
DATE	TYPE	C. S. C. AUTHORITY: <b>Set A 8.116 (b)</b>	
DATE	SIGNATURE	DATE SIGNATURE <b>1-18-52</b>	SIGNATURE <b>[Signature]</b>
CLASSIFICATION		PERSONNEL RELATIONS	
BUREAU NO. <b>9845</b>	C. S. C. NO.	DATE	SIGNATURE <b>[Signature]</b>
NEW	VICE	APPROVALS	SUBJECT TO SECURITY CLEARANCE
DATE <b>1/17/52</b>	L. A.	DATE	SIGNATURE OF EXECUTIVE
EFFECTIVE DATE	REAL	DATE	
		<b>JAN 1 1952</b>	

PERSONNEL ACTION REQUEST				REGISTER NO. 3511
NAME <b>RICHARDSON, JACQUES G.</b>		REQUESTED EFFECTIVE DATE <b>29 April 57</b>		
NATURE OF ACTION <b>Transfer Promotion</b>		WHEN LEAVING (VOICED)  LAST WORKING DAY:  EMPLOYEE'S SIGNATURE:		
FROM		TO		
TITLE <b>Intelligence Officer GS-9</b>		Intelligence Officer		
GRADE AND SALARY <b>GS-9, \$4600 p/a</b>		GS-11, \$5100 p/a		
OFFICE <b>OPC</b>		OPC		
DIVISION <b>FE</b>		FE		
BRANCH AND SECTION <b>FE-3 Japan Sec.</b>		FE-3		
OFFICIAL STATION <b>Washington, D. C.</b>		Washington, D. C.		
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS: <b>178 In grade since 14 Feb 57 S-14 1 Oct 50</b>  <b>#5729</b>				
RECOMMENDED:  <b>11 March 1951</b> (DATE)		<div style="border: 1px solid black; width: 150px; height: 40px; margin: 0 auto;"></div> <b>Chief, FE Division</b> <small>(SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR ADM. OFFICER)</small>		
FOR USE OF PERSONNEL ONLY				
PLACEMENT DATE QUALIFICATIONS APPROVED <b>26 March 51</b>		TRANSACTIONS AND RECORDS APPROPRIATION: <b>2115400</b> ALLOTMENT: <b>841-101</b> C. S. C. AUTHORITY: <b>Sec 6.116A)</b>		
SEPARATION REQUESTED DATE TYPE		CLEARANCE APPROVED DATE TYPE		
DATE SIGNATURE		DATE SIGNATURE <b>5-1-57</b> <b>W. A. Quinn</b>		
CLASSIFICATION BUREAU NO. <b>2996</b> C. S. C. NO. <b>3032</b> DATE APPROVED <b>6-2-57</b>		PERSONNEL RELATIONS DATE SIGNATURE <b>27 Apr</b> <b>Charles W. O'Connor</b>		
NEW <input type="checkbox"/> REUSE <input checked="" type="checkbox"/> L. A. <input checked="" type="checkbox"/> REAL <input type="checkbox"/>		APPROVALS DATE SIGNATURE OF EXECUTIVE		
DATE <b>3/21/51</b> SIGNATURE		DATE <b>27 Apr</b> SIGNATURE OF DIVISION CHIEF		
EFFECTIVE DATE				

PERSONNEL ACTION REQUEST				REGISTER NUMBER 2938	
NAME RICHARDSON, JACQUES G.			REQUESTED EFFECTIVE DATE 17 Jan 1951		
NATURE OF ACTION <i>Accepted Appointment</i>			WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE:		
FROM			TO		
TITLE			Intelligence Officer		
GRADE AND SALARY			GS-9, \$1,600 p/a		
OFFICE			OPC		
DIVISION			FE		
BRANCH AND SECTION			FE-3, Japan Section		
OFFICIAL STATION			Washington, D. C.		
DEPARTMENTAL <input type="checkbox"/>		FIELD <input type="checkbox"/>	DEPARTMENTAL <input checked="" type="checkbox"/>		FIELD <input type="checkbox"/>
REMARKS:					
<p>S-6 FE-39 JBEDICT</p> <p>Transfer leave <i>for</i> vouchered funds.</p> <p>Please move <input type="text"/> from S-6 to S-7, FE-3, <input type="text"/>, Washington Hdqrs.</p> <p><i>Consent for chg Impulsion</i> <i>and a transfer</i> 1/19/51 <i>ch 7000 security Rev</i> 1/25/51</p> <p># 4998</p>					
RECOMMENDED:					
<p>9 January 1951 DATE</p> <p>for <i>Washington</i> Chief, FE Division</p> <p>SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR ADM. OFFICER</p>					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED 23 Jan 51			APPROPRIATION: 2113900		
CLEARANCE REQUESTED			ALLOTMENT: 541-101		
CLEARANCE APPROVED			CSC AUTHORITY: <i>Letter 6.11.51</i>		
DATE	TYPE	DATE	TYPE	DATE SIGNATURE	SIGNATURE
				2-21-51	5-1-51
CLASSIFICATION			PERSONNEL RELATIONS		
BUREAU NO.	C.S.C. NO.	DATE APPROVED	DATE	SIGNATURE	
2974	3051	6-2-49		<i>5-1-51</i>	
NEW	VICE	I.A.	REAL	APPROVALS	
		<input checked="" type="checkbox"/>		SUBJECT TO SECURITY CLEARANCE	
DATE	EFFECTIVE DATE		DATE	SIGNATURE OF EXECUTIVE	
1/17/51					
EFFECTIVE DATE			DATE	SIGNATURE OF DIVISION CHIEF	

SECRET

SECRET

SECRECY AGREEMENT

1. I, RICHARD J. JACQUES understand that by virtue of my duties in the CIA I may be the recipient of information and intelligence which concerns the present and future security of the United States and which belongs to the United States. This information and intelligence, together with the methods of collecting and handling it, are classified according to standards set in the State, War, and Navy Departments. I have read and understand the provisions of the Act of Congress of June 15, 1917 (Espionage Act), as amended, concerning the disclosure of information relating to the National Defense and I am familiar with the penalties provided for violation thereof.

2. I agree that I do not now, nor shall I ever possess any right, interest, title or claim in or to any of the information or intelligence or the methods of collecting or handling of it which has come or shall come to my attention by virtue of my connection with the CIA, but shall always recognize the property right of the United States of America in and to such matters.

3. I do solemnly swear that I will never divulge, publish nor reveal either by word, conduct, or by any other means such classified information, intelligence or knowledge, except in the performance of my official duties and in accordance with the laws of the United States, unless specifically authorized in writing in each case by the CIA.

4. I understand that no change in my assignment or employment will relieve me of my obligation under this oath and that the provisions of this oath will remain binding upon me even after the termination of my services with the United States.

5. I understand that my employment by the CIA is conditioned upon my understanding of and strict compliance with "Security Regulations \_\_\_\_\_" and the appendices thereto.

6. I take this obligation freely, without any mental reservation or purpose of evasion.

In witness whereof I have set my hand and seal this 21st day of November 1949.

X  (Seal)

Sworn to before me this 21st day of November 1949.

at Washington, D.C.

Joseph S. Rice

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1. NAME (Last, First, Middle)		2. DATE OF BIRTH		3. LAST FULLY COMPL. DATE		
[REDACTED]		[REDACTED]		[REDACTED]		
4. SOCIAL SECURITY NUMBER		5. YEAR OF ENTRY		6. US NATURALIZATION DATE		
[REDACTED]		[REDACTED]		[REDACTED]		
7. CARRIER STATUS		8. MEMBERSHIP		9. OTHER STATUS		
[REDACTED]		[REDACTED]		[REDACTED]		
10. CURRENT RESERVE STATUS		11. GRADE		12. ACTIV. DUTY WITH CIA		
[REDACTED]		[REDACTED]		[REDACTED]		
13. ASSESSMENT DATE		14. PROFESSIONAL TEST DATE		15. LANGUAGE ACQ. TEST DATE		
None		None		None		
16. NON-CIA EMPLOYMENT						
1943-48 Military Service, US Army, 1st Lt. - Civilian Consulting Officer, Japanese Translator & Inspector, Madison Officer						
1949 Guide Publishing Co, Baltimore, Md - Copy Editor of weekly paper						
1949 Baltimore Housing Authority, Md - Administrative Officer						
17. FOREIGN LANGUAGE ABILITIES						
1942 Trinity College, Conn - French						
1940-42 St. George Williams College, Montreal, Canada - French						
1945 Univ of Michigan, Army Language School - (1947), Oriental Civilization, Japanese						
1951-52 Georgetown Univ Graduate School - International Relations						
18. FOREIGN LANGUAGE ABILITIES						
French - R, P, S, U, High W, Inter (Feb 1962), Trans & Interp Aug 1957						
Japanese - P, S, U, Inter (Mar 1962), R, W, High, Trans & Interp Aug 1957						
19. AGENCY SPONSORED TRAINING						
1949-50 UTRC						
1950 Intel Orient						
1950 Ops						
1950 Ops Farid						
20. CIA EMPLOYMENT - (Specify since 15 Sept 1947 (Personnel Actions, Military Orders, and Principal Details))						
ENTRY DATE	POSITION TITLE	OCCUPATIONAL CODE	GRADE	SS	ORGANIZATION & BRANCH, TITLE (if any)	LOCATION
Nov 1949	I.O.	0138.00	7		CAC/EE/EE/EE/EE/EE	HQ
Oct 1950	" "	0138.00	9		CAC/EE/EE/EE/EE/EE	"
Apr 1951	" "	0138.00	11		CAC/EE/EE/EE/EE/EE	"
Jan 1952	Ops Off	0138.01	12		" " " " " "	"
Jul 1952	" "	0138.01	13		DDP/EE/EE/EE/EE/EE	"
Feb 1954	Area Ops Off	0138.01	13		DDP/EE/EE/EE/EE/EE	"
Jan 1955	" "	0138.01	14	SI	DDP/EE/EE/EE/EE/EE	"
Oct 1955	Ops Off	0138.01	14	SI	DDP/EE/EE/EE/EE/EE	"
Sep 1956	" "	0138.01	14	SI	DDP/EE/EE/EE/EE/EE	"
Feb 1958	" "	0138.01	15	SI	DDP/EE/EE/EE/EE/EE	"
Oct 1958	" "	0138.01	15	SI	DDP/EE/EE/EE/EE/EE	"
Mar 1961	" "	0138.01	15	SI	DDP/EE/EE/EE/EE/EE	"
Feb 1967	" "	0138.01	15	D	DDP/EE/EE/EE/EE/EE	"
21. DATE REV.		22. PROFILE REVIEWED BY		23. ITEMS 1-19 REVIEWED & VERIFIED BY EMPLOYEE		
20 Apr 1967		[REDACTED]		[REDACTED]		



SECRET

CLASS. SERIAL NO.

## CIRCUMSTANTIAL PROFILE (PART 2)

DATE OF BIRTH

Jan 1928

24. SUMMARY OF EVALUATION REPORTS FOR THE PAST TEN YEARS

24. SUMMARY OF CAREER PREFERENCE UNIT

DATE OF REVIEW  
BY

25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL

26. ADDITIONAL INFORMATION: 1955 from Director, FBI and the DPT for service in connection with the Rosenberg case.

Commendation 1955 from CIA Defector Coordinator for cooperation and competence in the handling of the defectors.

Commendation 1955 from the DDI for high degree of personal competence and devotion to duty.

Letter of Appreciation 1960 for suggestion which proposed revisions of Form 1050.

Appreciation 1961 from Commandant, USAF Command and Staff College for fine lecture.

27. DATE REVIEWED

20 Apr 1964

28. PROFILE REVIEWED BY

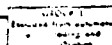
Rich



SECRET

FITNESS REPORT		EMPLOYEE SERIAL NUMBER
SECTION A		000102
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH 3. SEX 4. GRADE 5. SSN
6. OFFICIAL POSITION TITLE		7. OFF DIVISION OF ASSIGNMENT 8. CURRENT STATION
9. CHECK IN TYPE OF APPOINTMENT		10. CHECK IN 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
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)
01 JAN 1970		01 JAN 1970 to 31 DEC 1971
SECTION B 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 C.	
M-Marginal	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-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	Command and supervise employees as a senior supervisor of a Section for the purpose of further developing assets to stabilize current and prospective in order the overall cost of the	RATING LETTER O
SPECIFIC DUTY NO. 2	Upon his to gain access to internal personnel and spot leads on eventual access and support to a search conducted against the local and other sources.	RATING LETTER S
SPECIFIC DUTY NO. 3	Develop and maintain contacts with whom he has had contact as well as assets appropriate to the local situation and other sources.	RATING LETTER P
SPECIFIC DUTY NO. 4	Responds to various station requirements including investigative work.	RATING LETTER S
SPECIFIC DUTY NO. 5	Reports on the above activities.	RATING LETTER P
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, 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



SECRET

## SECTION C

## NATIVE SPEECH ACTS

Indicate significant strengths or weaknesses demonstrated in current position by the subject personnel. Give recommendations for training or overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Give evaluation on foreign language competence, if required for current position. An outline or explanation given in Section B to provide basis for determining future personnel action. If necessary, explain in detail the reasons for the evaluation and any recommendations in the use of personnel, space, equipment and funds, must be explained in detail. If extra space is needed to complete Section C, attach a separate sheet of paper.

During the period under review,

--

Subject has had occasional difficulty switching from "professional" or intellectual subjects in his involvement of various personalities or access prospects to more down-to-earth interests necessary --con't--

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE READ SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
9 June 1971	/s/	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
18 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
	Handling Officer	/s/
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
The Station submitted comments on Subject's dossier recently in CPT-16549 (8 April 1971), to which we should add that Subject has, largely on his own merits, acquired a solid and potentially highly useful		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
24 May 1971	POOB	

SECRET

SECRET

- 2 -

FRANK'S REPORT

Section C. (continued)

to the development of human relations. His forte is therefore more in the field of setting and making operational contacts than in that of more than short-range operational development. Subject's operational situation is such that it is impossible for him to attempt recruitments. Thus, his very real achievements are not by essence of the spectacular variety.

Subject's reporting has been satisfactory and continues to be copious. He could, however, further improve the selectivity of the leads provided the station and make more of an effort to "digest" the information contained in his reports.

Although Subject has, at present, no supervisory function, he has repeatedly requested such a responsibility. He is careful with operational expenses and has exercised good security.

During the period under review, additional efforts have been made to make full use of Subject's potential and integrate him further in the work of the station component with which he works. He is a particularly valuable asset for the station programs directed against the local business and labor targets.

Section D. (continued)

substantial. In a word, is it worth for? We do not yet know, although our initial impressions are favorable.

On the fitness report itself, this writer would have preferred an "A" rating for specific duty number one; Subject may ultimately deserve an "A", but it does not seem warranted at the present time. However, I believe the overall rating would more properly have been in the higher range of the "B" category, rather than "C", but it is of course a subjective judgment of the rating officer, who is more intimately and directly involved with Subject on a frequent basis.

In sum, [redacted] is capable, and only time will reveal to what extent the [redacted] requirements permit a full measure on behalf of the Organization. We are following this aspect closely and will be commenting upon it subsequently as we gain experience and knowledge.

SECRET

# EMPLOYEE REPORT

SECTION A		GENERAL INFORMATION	
1. NAME (Last)	(First)	(Middle)	(Suffix)
2. OFFICIAL POSITION TITLE		3. DATE OF BIRTH (Month Day Year)	
4. CHECK ALL TYPE OF ASSIGNMENT		5. CHECK ALL TYPE OF REPORT	
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INTERIM
6. CHECK ALL TYPE OF ASSIGNMENT (Specify)		7. CHECK ALL TYPE OF REPORT (Specify)	
8. DATE REPORT DUE IN O.P.		9. REPORTING PERIOD (From - to)	
		1 April 1969 - 31 March 1970	
SECTION B 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 C.		
<u>M-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.		
<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	Established and maintains a [redacted] for the purpose of developing natural access to Station targets.		RATING LETTER S
SPECIFIC DUTY NO. 2	Uses [redacted] to develop leads on eventual access or support type access to be used by the Station against the local MASH target.		RATING LETTER S
SPECIFIC DUTY NO. 3	Responds to various Station requirements including investigative work.		RATING LETTER S
SPECIFIC DUTY NO. 4	Initiated contact with selected local MASH targets and undertakes to develop sufficient rapport with them to provide operational assessments.		RATING LETTER S
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, 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

Write a summary statement of the employee's performance in current position from known or proper perspective. This statement is to overall performance. In its suggestions, make the employee's past performance. Give recommendations for future. Comment on factors in work environment, if required for current position. Supply or explain ratings given in Section B, provide basis for determining future personnel action. Number of performance of employee if not a satisfactory rating and last one serious cause in the area of personnel, training, equipment and funds, must be stated in the summary statement. If not a space is provided to complete Section C, attach a separate sheet of paper.

The comments of the rating officer are limited to the period from October 1969 to March 1970 during which he worked with Subject. The previous rating officer has added his comments to allow coverage of the total indicated period from April 1960 to March 1970. During this period Subject was integrated in a new team assigned to the local SAT and Commercial MURKIN target. Subject's recent activity has been very productive indeed. Subject used the excellent potential given to him by his [redacted] to skillfully spot and assess access agent candidates. As Subject's operational situation in Paris precludes making recruitment, the most promising of these candidates was placed in contact with a Station officer during social events Subject organized. At the same time, Subject continued his efforts to develop personal relationship with several MURKINs. The beginning of personal, as opposed to purely professional, relations with a major MURKIN target enabled him to obtain instant insight into the target's beliefs and personality which was the best the Station had to date. Subject also managed to establish contact with two other MURKIN representatives of interest. This, in one case, required almost six months to accomplish via a combination of patience, skill and determination. Subject is an experienced officer. He is cost conscious and practices good security. The Station has no other asset with the necessary scientific and editorial know-how, fluent French and local knowledge to replace Subject. In view of this and the recent progress made by Subject in response to very specific requirements and his willingness to try to establish personal and, hopefully, social relations with access prospects and MURKIN targets, the Station recently recommended that he be extended. [redacted] At the same time, [redacted]

SE

1.

BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

NOV THIS 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

Handling Officer

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

As previous Station correspondence and findings reports will reflect, this officer has been the subject of varying evaluations and projections in recent years. In looking to him, however, it is equally true that an officer under [redacted] reflects, in the level and quality of his performance, the amount and type of guidance, direction and push he receives from the responsible inside care officer. Making allowances for these variables, this officer's past record has not been impressive; however, it is also correct to note that he has improved substantially during the latter part of the period under review, and that if the Station can work out some single arrangement which will reduce the heavy financial input

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

12 May 1970

None

SECRET

This working comment has been read by the officers who prepared the witness report.

The letter, be set as a level between "P" and "D", probably closer to the former than been a "D", and that the overall rating, at this point, would more accurately reflect the letter grade for specific duties and would more accurately reflect a performance during the period under review; the reviewer indicates, in sum, in spite of the noteworthy and commendable improvement in this

from from further development, for managerial reasons. from actively either to the point of being named by another officer as eliminating, rather than those which appear to be a relatively stable, and perhaps permanent, it will require a considerable time to complete the current and a wide range of activities in the last community. on the operational activity he has been named, a solid and to the primary system targets. This is not a new thing, many things to be a positive effort to expand his role and to be in a more prominent position. On balance, we are pleased that the officer has responded so well to

longer period than that reflected by the report. consideration concerning the level of his performance over a considerable period to be warranted for a number of years more. From the Organization, the work has been done in this position during

Section 2 continued

SECRET



SECRET

SECTION A		EMPLOYEE SERIAL NUMBER
1. NAME	2. DATE OF BIRTH	3. GRADE
4. OFFICIAL POSITION TITLE	5. OFFICIAL DIVISION OF ASSIGNMENT	6. CURRENT STATION
7. CHECK (X) TYPE OF APPOINTMENT	8. CHECK (X) TYPE OF REPORT	
CAREER RESERVE TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR
CAREER PROVISIONAL (See Instructions - Section C)	ANNUAL	REASSIGNMENT EMPLOYEE
SPECIAL (Specify)	SPECIAL (Specify)	
9. DATE REPORT DUE IN O.P.	10. REPORTING PERIOD (From - To)	
31 May 1955	1 Jan 1955 - 31 May 1955	
SECTION B		
PERFORMANCE BY		
W - Weak	Performance ranges from wholly inadequate to wholly 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.	
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	
P - Proficient	Performance is more than satisfactory. Desirable results are being produced in a proficient manner.	
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	as a genuine working member of his profession.	RATING LETTER O
SPECIFIC DUTY NO. 2	Spotting and assessing persons of operational interest to and to other stations.	RATING LETTER S
SPECIFIC DUTY NO. 3	Investigating of organizations and phenomena of operational interest to the Station.	RATING LETTER S
SPECIFIC DUTY NO. 4	Collection of positive and operational information using his cover for entries.	RATING LETTER S
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, 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		
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall service. State suggestions made for improvement of work performance. Give recommendations for training. Comment on formal 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 advisory duties must be described, if applicable.</p>					
See attached sheet.					
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			
15 May 1963		/s/			
BY SUPERVISOR					
IF EMPLOYED HAS BEEN UNDER MY SUPERVISION		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION			
6 1/2 months					
DATE		OFFICIAL TITLE OF SUPERVISOR		TYPED OR PRINTED NAME AND SIGNATURE	
15 May 1963		CPS Officer		/s/	
2. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
See attached sheet.					
DATE		OFFICIAL TITLE OF REVIEWING OFFICIAL		TYPED OR PRINTED NAME AND SIGNATURE	
20 May 1963		CPS Officer		/s/ Edward Ryan	

SECRET

## SECTION C

## NARRATIVE CONTENTS

The assignment of this employee to the field [REDACTED]

During the reporting period this employee has accomplished with success [REDACTED]

During the reporting period he has developed a wide circle of contacts in the scientific and journalistic circles and applies a long background in a variety of assignments in KUSOWS to the determination and assessment of operational potential among these contacts. At the same time his [REDACTED]

This employee requires a minimum of detailed operational supervision; it is necessary in specific cases only to indicate the operational or informational objectives.

From the point of view of administrative support, his attention to detail and meticulousness reduce the problems of his support by the Station to a minimum.

This employee uses the [REDACTED] continuously, and his facility is such as to permit him to handle himself easily in a broad range of complex technical subjects. He has in addition undertaken specialized [REDACTED] language training to develop this capability further. His operational reporting is excellent both with regard to clarity and pertinence.

In the immediate future he will be assigned case work, for the most part in fields where it will complement, and be complemented by, his independent operational activities and cover work.

SECRET

SECRET

13 September 1960

(Date)

File No. K-1328

MEMORANDUM FOR: Chief, Records and Services Division  
Office of Personnel

SUBJECT : Jacques G. RICHARDSON

1. Cover arrangements ~~have been completed~~ have been completed for the above-named Subject.
2. Effective 12 September 1960, it is requested that your records be properly blocked ~~to deny~~ to deny ~~Subject's~~ Subject's current Agency employment to an external inquirer.
3. Operating component must take necessary action to block ~~Subject's~~ telephone locator by submitting the Personnel Information Card, "Office File Copy," Form No. 642, to Machine Records Division, Office of the Comptroller, Room 107 Curie Hall, Attention: Miss Wenkenbach.

~~4. This information is to be kept in confidence.~~

*Paul P. Little*  
HARRY W. LITTLE, JR.  
Chief, Central Cover Division

cc: SSD/OS  
Operating Division - SR

THIS INFORMATION MUST REMAIN  
TOP SECRET  
IN-UP OF FILE

SECRET

2012 151000

FORM 1-60 (4-13-60)

27

SECRET

(When Filled In)

RUP: 10 AUG 72

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
008102		Richardson, Reginald									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
RESIGNATION						MO DA YR 08 14 72		REGULAR			
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		3130 1231 0000					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
OJP/EUROPEAN DIVISION FOREIGN FIELD											
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0868		0			
14. CLASSIFICATION SCHEDULE (GS, LR, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
LS				0130.01		15 2		31554			
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. INTEREST CODE		24. MARRIAGE CODE	
40		10		NUMERIC ALPHABETIC							
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	
MO DA YR 01 20 24		MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR	
31. SEPARATION DATA CODE		32. CORRECTION / CANCELLATION DATA		33. SECURITY REQ. NO		34. SEX		35. VET PREFERENCE		36. SERV. COMP. DATE	
TYPE MO DA YR		TYPE MO DA YR		EOD DATA		EOD DATA		CODE 0 NONE 1-5 PT 2-10 PT		MO DA YR MO DA YR	
37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT CODE	
MO DA YR		CODE		CODE 0: WAIVER 1: YES 2: NO		HEALTH INS. 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)		CODE	
43. FEDERAL TAX DATA		44. STATE TAX DATA		45. SIGNATURE OR OTHER AUTHENTICATION		46. POSTED		47. SIGNATURE OR OTHER AUTHENTICATION		48. POSTED	
FORM EXECUTED 1: YES 2: NO		CODE NO TAX EXEMPTIONS		FORM EXECUTED 1: YES 2: NO		CODE NO TAX EXEMPTIONS		FORM EXECUTED 1: YES 2: NO		CODE NO TAX EXEMPTIONS	

FORM  
5-661150  
Mfg. 10-67Use Previous  
Edition

SECRET

WEB

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

*James*

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
006102		<i>Richardson, Jacques</i>		44 620		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 15	7	\$29,099	01/26/69	GS 15	R	\$29,907	01/23/72		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
						<i>20 Dec 71</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									
CLERKS INITIALS						AUDITED BY			
FORM 7-66 560 E Use previous editions						PAY CHANGE NOTIFICATION (4-51)			

*BUUU L-3*

"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	ORG.	FUNDS	GR-STEP	NEW SALARY
<i>Richardson, Jacques</i>	006102	44	735	CF GS 15 7	\$30,701

SECRET

BEG: 01 JUN 71

NOTIFICATION OF PERSONNEL ACTION											
CCB											
1. SERIAL NUMBER 006102		2. NAME (LAST, FIRST, MIDDLE) Richardson, Regius									
3. NATURE OF PERSONNEL ACTION EXTENSION OF PRANTE: 24 FEBRUARY 1973						4. EFFECTIVE DATE MO DA YR 02 25 71		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable 1136 1231 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DOP/EUR FOREIGN FIELD						10. LOCATION OF OFFICIAL STATION					
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0668		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS LP etc.) GS				15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 7		17. SALARY GRADE 29039			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 37		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 44620 EUR		22. STATION CODE 24065		23. PAY GRADE CODE 3		24. DATE OF BIRTH MO DA YR 01 20 24	
25. DATE OF GRADE MO DA YR		26. DATE OF LEV MO DA YR		27. DATE OF EXP MO DA YR		28. DATE OF REF MO DA YR		29. DATE OF RET MO DA YR		30. DATE OF RES MO DA YR	
31. DATE OF RET MO DA YR		32. DATE OF RES MO DA YR		33. DATE OF LEV MO DA YR		34. DATE OF GRADE MO DA YR		35. DATE OF ACTION MO DA YR		36. DATE OF REVIEW MO DA YR	
37. DATE OF REVIEW MO DA YR		38. DATE OF ACTION MO DA YR		39. DATE OF GRADE MO DA YR		40. DATE OF LEV MO DA YR		41. DATE OF EXP MO DA YR		42. DATE OF RET MO DA YR	
43. DATE OF RES MO DA YR		44. DATE OF LEV MO DA YR		45. DATE OF GRADE MO DA YR		46. DATE OF ACTION MO DA YR		47. DATE OF REVIEW MO DA YR		48. DATE OF REVIEW MO DA YR	
49. DATE OF REVIEW MO DA YR		50. DATE OF ACTION MO DA YR		51. DATE OF GRADE MO DA YR		52. DATE OF LEV MO DA YR		53. DATE OF EXP MO DA YR		54. DATE OF RET MO DA YR	
55. DATE OF RES MO DA YR		56. DATE OF LEV MO DA YR		57. DATE OF GRADE MO DA YR		58. DATE OF ACTION MO DA YR		59. DATE OF REVIEW MO DA YR		60. DATE OF REVIEW MO DA YR	
61. DATE OF REVIEW MO DA YR		62. DATE OF ACTION MO DA YR		63. DATE OF GRADE MO DA YR		64. DATE OF LEV MO DA YR		65. DATE OF EXP MO DA YR		66. DATE OF RET MO DA YR	
67. DATE OF RES MO DA YR		68. DATE OF LEV MO DA YR		69. DATE OF GRADE MO DA YR		70. DATE OF ACTION MO DA YR		71. DATE OF REVIEW MO DA YR		72. DATE OF REVIEW MO DA YR	
73. DATE OF REVIEW MO DA YR		74. DATE OF ACTION MO DA YR		75. DATE OF GRADE MO DA YR		76. DATE OF LEV MO DA YR		77. DATE OF EXP MO DA YR		78. DATE OF RET MO DA YR	
79. DATE OF RES MO DA YR		80. DATE OF LEV MO DA YR		81. DATE OF GRADE MO DA YR		82. DATE OF ACTION MO DA YR		83. DATE OF REVIEW MO DA YR		84. DATE OF REVIEW MO DA YR	
85. DATE OF REVIEW MO DA YR		86. DATE OF ACTION MO DA YR		87. DATE OF GRADE MO DA YR		88. DATE OF LEV MO DA YR		89. DATE OF EXP MO DA YR		90. DATE OF RET MO DA YR	
91. DATE OF RES MO DA YR		92. DATE OF LEV MO DA YR		93. DATE OF GRADE MO DA YR		94. DATE OF ACTION MO DA YR		95. DATE OF REVIEW MO DA YR		96. DATE OF REVIEW MO DA YR	
97. DATE OF REVIEW MO DA YR		98. DATE OF ACTION MO DA YR		99. DATE OF GRADE MO DA YR		100. DATE OF LEV MO DA YR		101. DATE OF EXP MO DA YR		102. DATE OF RET MO DA YR	
103. DATE OF RES MO DA YR		104. DATE OF LEV MO DA YR		105. DATE OF GRADE MO DA YR		106. DATE OF ACTION MO DA YR		107. DATE OF REVIEW MO DA YR		108. DATE OF REVIEW MO DA YR	
109. DATE OF REVIEW MO DA YR		110. DATE OF ACTION MO DA YR		111. DATE OF GRADE MO DA YR		112. DATE OF LEV MO DA YR		113. DATE OF EXP MO DA YR		114. DATE OF RET MO DA YR	
115. DATE OF RES MO DA YR		116. DATE OF LEV MO DA YR		117. DATE OF GRADE MO DA YR		118. DATE OF ACTION MO DA YR		119. DATE OF REVIEW MO DA YR		120. DATE OF REVIEW MO DA YR	
121. DATE OF REVIEW MO DA YR		122. DATE OF ACTION MO DA YR		123. DATE OF GRADE MO DA YR		124. DATE OF LEV MO DA YR		125. DATE OF EXP MO DA YR		126. DATE OF RET MO DA YR	
127. DATE OF RES MO DA YR		128. DATE OF LEV MO DA YR		129. DATE OF GRADE MO DA YR		130. DATE OF ACTION MO DA YR		131. DATE OF REVIEW MO DA YR		132. DATE OF REVIEW MO DA YR	
133. DATE OF REVIEW MO DA YR		134. DATE OF ACTION MO DA YR		135. DATE OF GRADE MO DA YR		136. DATE OF LEV MO DA YR		137. DATE OF EXP MO DA YR		138. DATE OF RET MO DA YR	
139. DATE OF RES MO DA YR		140. DATE OF LEV MO DA YR		141. DATE OF GRADE MO DA YR		142. DATE OF ACTION MO DA YR		143. DATE OF REVIEW MO DA YR		144. DATE OF REVIEW MO DA YR	
145. DATE OF REVIEW MO DA YR		146. DATE OF ACTION MO DA YR		147. DATE OF GRADE MO DA YR		148. DATE OF LEV MO DA YR		149. DATE OF EXP MO DA YR		150. DATE OF RET MO DA YR	
151. DATE OF RES MO DA YR		152. DATE OF LEV MO DA YR		153. DATE OF GRADE MO DA YR		154. DATE OF ACTION MO DA YR		155. DATE OF REVIEW MO DA YR		156. DATE OF REVIEW MO DA YR	
157. DATE OF REVIEW MO DA YR		158. DATE OF ACTION MO DA YR		159. DATE OF GRADE MO DA YR		160. DATE OF LEV MO DA YR		161. DATE OF EXP MO DA YR		162. DATE OF RET MO DA YR	
163. DATE OF RES MO DA YR		164. DATE OF LEV MO DA YR		165. DATE OF GRADE MO DA YR		166. DATE OF ACTION MO DA YR		167. DATE OF REVIEW MO DA YR		168. DATE OF REVIEW MO DA YR	
169. DATE OF REVIEW MO DA YR		170. DATE OF ACTION MO DA YR		171. DATE OF GRADE MO DA YR		172. DATE OF LEV MO DA YR		173. DATE OF EXP MO DA YR		174. DATE OF RET MO DA YR	
175. DATE OF RES MO DA YR		176. DATE OF LEV MO DA YR		177. DATE OF GRADE MO DA YR		178. DATE OF ACTION MO DA YR		179. DATE OF REVIEW MO DA YR		180. DATE OF REVIEW MO DA YR	
181. DATE OF REVIEW MO DA YR		182. DATE OF ACTION MO DA YR		183. DATE OF GRADE MO DA YR		184. DATE OF LEV MO DA YR		185. DATE OF EXP MO DA YR		186. DATE OF RET MO DA YR	
187. DATE OF RES MO DA YR		188. DATE OF LEV MO DA YR		189. DATE OF GRADE MO DA YR		190. DATE OF ACTION MO DA YR		191. DATE OF REVIEW MO DA YR		192. DATE OF REVIEW MO DA YR	
193. DATE OF REVIEW MO DA YR		194. DATE OF ACTION MO DA YR		195. DATE OF GRADE MO DA YR		196. DATE OF LEV MO DA YR		197. DATE OF EXP MO DA YR		198. DATE OF RET MO DA YR	
199. DATE OF RES MO DA YR		200. DATE OF LEV MO DA YR		201. DATE OF GRADE MO DA YR		202. DATE OF ACTION MO DA YR		203. DATE OF REVIEW MO DA YR		204. DATE OF REVIEW MO DA YR	
205. DATE OF REVIEW MO DA YR		206. DATE OF ACTION MO DA YR		207. DATE OF GRADE MO DA YR		208. DATE OF LEV MO DA YR		209. DATE OF EXP MO DA YR		210. DATE OF RET MO DA YR	
211. DATE OF RES MO DA YR		212. DATE OF LEV MO DA YR		213. DATE OF GRADE MO DA YR		214. DATE OF ACTION MO DA YR		215. DATE OF REVIEW MO DA YR		216. DATE OF REVIEW MO DA YR	
217. DATE OF REVIEW MO DA YR		218. DATE OF ACTION MO DA YR		219. DATE OF GRADE MO DA YR		220. DATE OF LEV MO DA YR		221. DATE OF EXP MO DA YR		222. DATE OF RET MO DA YR	
223. DATE OF RES MO DA YR		224. DATE OF LEV MO DA YR		225. DATE OF GRADE MO DA YR		226. DATE OF ACTION MO DA YR		227. DATE OF REVIEW MO DA YR		228. DATE OF REVIEW MO DA YR	
229. DATE OF REVIEW MO DA YR		230. DATE OF ACTION MO DA YR		231. DATE OF GRADE MO DA YR		232. DATE OF LEV MO DA YR		233. DATE OF EXP MO DA YR		234. DATE OF RET MO DA YR	
235. DATE OF RES MO DA YR		236. DATE OF LEV MO DA YR		237. DATE OF GRADE MO DA YR		238. DATE OF ACTION MO DA YR		239. DATE OF REVIEW MO DA YR		240. DATE OF REVIEW MO DA YR	
241. DATE OF REVIEW MO DA YR		242. DATE OF ACTION MO DA YR		243. DATE OF GRADE MO DA YR		244. DATE OF LEV MO DA YR		245. DATE OF EXP MO DA YR		246. DATE OF RET MO DA YR	
247. DATE OF RES MO DA YR		248. DATE OF LEV MO DA YR		249. DATE OF GRADE MO DA YR		250. DATE OF ACTION MO DA YR		251. DATE OF REVIEW MO DA YR		252. DATE OF REVIEW MO DA YR	
253. DATE OF REVIEW MO DA YR		254. DATE OF ACTION MO DA YR		255. DATE OF GRADE MO DA YR		256. DATE OF LEV MO DA YR		257. DATE OF EXP MO DA YR		258. DATE OF RET MO DA YR	
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265. DATE OF REVIEW MO DA YR		266. DATE OF ACTION MO DA YR		267. DATE OF GRADE MO DA YR		268. DATE OF LEV MO DA YR		269. DATE OF EXP MO DA YR		270. DATE OF RET MO DA YR	
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313. DATE OF REVIEW MO DA YR		314. DATE OF ACTION MO DA YR		315. DATE OF GRADE MO DA YR		316. DATE OF LEV MO DA YR		317. DATE OF EXP MO DA YR		318. DATE OF RET MO DA YR	
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325. DATE OF REVIEW MO DA YR		326. DATE OF ACTION MO DA YR		327. DATE OF GRADE MO DA YR		328. DATE OF LEV MO DA YR		329. DATE OF EXP MO DA YR		330. DATE OF RET MO DA YR	
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361. DATE OF REVIEW MO DA YR		362. DATE OF ACTION MO DA YR		363. DATE OF GRADE MO DA YR		364. DATE OF LEV MO DA YR		365. DATE OF EXP MO DA YR		366. DATE OF RET MO DA YR	
367. DATE OF RES MO DA YR		368. DATE OF LEV MO DA YR		369. DATE OF GRADE MO DA YR		370. DATE OF ACTION MO DA YR		371. DATE OF REVIEW MO DA YR		372. DATE OF REVIEW MO DA YR	
373. DATE OF REVIEW MO DA YR		374. DATE OF ACTION MO DA YR		375. DATE OF GRADE MO DA YR		376. DATE OF LEV MO DA YR		377. DATE OF EXP MO DA YR		378. DATE OF RET MO DA YR	
379. DATE OF RES MO DA YR		380. DATE OF LEV MO DA YR		381. DATE OF GRADE MO DA YR		382. DATE OF ACTION MO DA YR		383. DATE OF REVIEW MO DA YR		384. DATE OF REVIEW MO DA YR	
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391. DATE OF RES MO DA YR		392. DATE OF LEV MO DA YR		393. DATE OF GRADE MO DA YR		394. DATE OF ACTION MO DA YR		395. DATE OF REVIEW MO DA YR		396. DATE OF REVIEW MO DA YR	
397. DATE OF REVIEW MO DA YR		398. DATE OF ACTION MO DA YR		399. DATE OF GRADE MO DA YR		400. DATE OF LEV MO DA YR		401. DATE OF EXP MO DA YR		402. DATE OF RET MO DA YR	
403. DATE OF RES MO DA YR		404. DATE OF LEV MO DA YR		405. DATE OF GRADE MO DA YR		406. DATE OF ACTION MO DA YR		407. DATE OF REVIEW MO DA YR		408. DATE OF REVIEW MO DA YR	
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427. DATE OF RES MO DA YR		428. DATE OF LEV MO DA YR		429. DATE OF GRADE MO DA YR		430. DATE OF ACTION MO DA YR		431. DATE OF REVIEW MO DA YR		432. DATE OF REVIEW MO DA YR	
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463. DATE OF RES MO DA YR		464. DATE OF LEV MO DA YR		465. DATE OF GRADE MO DA YR		466. DATE OF ACTION MO DA YR		467. DATE OF REVIEW MO DA YR		468. DATE OF REVIEW MO DA YR	
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475. DATE OF RES MO DA YR		476. DATE OF LEV MO DA YR		477. DATE OF GRADE MO DA YR		478. DATE OF ACTION MO DA YR		479. DATE OF REVIEW MO DA YR		480. DATE OF REVIEW MO DA YR	
481. DATE OF REVIEW MO DA YR		482. DATE OF ACTION MO DA YR		483. DATE OF GRADE MO DA YR		484. DATE OF LEV MO DA YR		485. DATE OF EXP MO DA YR		486. DATE OF RET MO DA YR	
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505. DATE OF REVIEW MO DA YR		506. DATE OF ACTION MO DA YR		507. DATE OF GRADE MO DA YR		508. DATE OF LEV MO DA YR		509. DATE OF EXP MO DA YR		510. DATE OF RET MO DA YR	
511. DATE OF RES MO DA YR		512. DATE OF LEV MO DA YR		513. DATE OF GRADE MO DA YR		514. DATE OF ACTION MO DA YR		515. DATE OF REVIEW MO DA YR		516. DATE OF REVIEW MO DA YR	
517. DATE OF REVIEW MO DA YR		5									

14-00000

"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
<del>REDACTED</del> <i>Richardson, Jacques</i>	006102	44	620	CF GS 15 7	\$29,099



**SECRET**  
CIVILIAN EMPLOYMENT

BBG: 17 AUG 70

### NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER <b>006102</b>		2. NAME (LAST FIRST MIDDLE) <b>Richardson, Reginald</b>	
3. NATURE OF PERSONNEL ACTION <b>EXTENSION OF PRA NTE: 24 FEBRUARY 1971</b>		4. EFFECTIVE DATE MO DA YR <b>07 20 70</b>	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6. FUNDS V TO V CF TO V	V TO CF CF TO CF	7. Financial Analysis No. Chargeable <b>1136 1231 0000</b>	8. CSC OR OTHER LEGAL AUTHORITY <b>50 USC 403 J</b>
9. ORGANIZATIONAL DESIGNATIONS <b>DOP/EUR FOREIGN FIELD</b>		10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE <b>OPS OFFICER</b>		12. POSITION NUMBER <b>0668</b>	13. SERVICE DESIGNATION <b>D</b>
14. CLASSIFICATION SCHEDULE (GS, IB, etc.) <b>GS</b>	15. OCCUPATIONAL SERIES <b>0136.01</b>	16. GRADE AND STEP <b>15-7</b>	17. SALARY OR RATE <b>27463</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>44620 EUR</b>	22. STATION CODE <b>24065</b>
23. INTEGRITY CODE	24. MEDICAL CODE <b>3</b>	25. DATE OF BIRTH MO DA YR <b>01 20 24</b>	26. DATE OF GRADE MO DA YR
27. DATE OF LEI MO DA YR	28. NTE EXPIRES MO DA YR <b>02 24 71</b>	29. SPECIAL REFERENCE <b>32</b>	30. RETIREMENT DATA 1. CSC 2. CA 3. PCA 4. NONE
31. SEPARATION DATA CODE	32. CORRECTION - CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ 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 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. STATE TAX DATA FORM EXECUTED 1. YES 2. NO	45. NO. TAX STATE CODE	46. STATE TAX CODE
SIGNATURE OR OTHER AUTHENTICATION			

FORM 5-66 1150  
Mfg. 10-67

Use Previous  
Edition

**SECRET**

**FVD**

POSTED  
578.20

(When Filled In)

REPRODUCED BY THE STANFORD RESEARCH CENTER, U.S.A.

"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: 15 JULY 1969

NAME  
*Richardson, Jacques*

SERIAL - ORGN. FUNDS GR-STEP  
006102 44 600 CF GS 15 7

NEW  
SALARY  
\$25,909

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-291 AND EXECUTIVE ORDER 11524 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

*Richardson, Jacques*

SERIAL ORGN. FUNDS GR-STEP  
006102 44 620 CF GS 15 7

NEW  
SALARY  
\$27,463



"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 3 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
<i>Richardson, James</i>	006102	44	600	CF GS 15 6	\$20,585	\$21,469

"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
<i>Richardson, James</i>	006102	44	600	CF GS 15 6	\$21,469	\$23,075

EUR

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
006102	<i>Richardson, James</i>		44 600 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.
S	15	6	\$23,075	01/29/67	GS	15	7	\$23,734	01/26/69

CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE

*McLooby*

DATE

*14 Dec 68*

☐ NO EXCESS LWOP

☐ IN PAY STATUS AT END OF WAITING PERIOD

☐ LWOP STATUS AT END OF WAITING PERIOD

CLERKS INITIALS

*Dow H. L. Lutscher*

AUDITED BY

0000

**SECRET**  
(When Filled In)

FJH: 8 MAR 67

NOTIFICATION OF PERSONNEL ACTION																	
<div style="display: flex; justify-content: space-between;"> <span>OCB</span> <span>1. SERIAL NUMBER 006102</span> <span>2. NAME (LAST-FIRST-MIDDLE) <i>Richardson, Reginald</i></span> </div>																	
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>						4. EFFECTIVE DATE MO. DA. YR. <b>02 26 67</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>									
6. FUNDS		V TO V CF TO V		V TO CF X, CF TO CF		7. Financial Analysis No. Chargeable <b>7136 1231 0000</b>			8. USC OR OTHER LEGAL AUTHORITY <b>50 USC 403 J</b>								
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/EUR FOREIGN FIELD CENTRAL REGION</b>						10. LOCATION OF OFFICIAL STATION  											
11. POSITION TITLE  <b>OPS OFFICER</b>						12. POSITION NUMBER <b>0668</b>		13. SERVICE DESIGNATION <b>D</b>									
14. CLASSIFICATION SCHEDULE (GS, LS, WS) <b>GS</b>				15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>15 6</b>		17. SALARY OR RATE <b>20585</b>									
18. REMARKS  <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <b>POSTED ON</b>  <i>3-20-67</i> </div>																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. Empl. Code		21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE		23. INTEGREE 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.	
<b>37</b>		<b>10</b>		<b>44600 EUR</b>		<b>24065</b>				<b>3</b>		<b>01 20 24</b>					
28. NTE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.		34. SEX					
<b>02 25 69</b>		<b>82</b>						<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>EOD DATA</b> </div>									
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 1 - 5 PF. 2 - 10 PF.		MO. DA. YR. NO. 24 YR.		MO. 24 YR.		CAR. SERV. CODE 1 - YES 2 - NO		CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE							
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX 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.)				CODE 1 - YES 2 - NO		FORM EXECUTED CODE NO. TAX EXEMPTIONS FORM EXECUTED 1 - YES 2 - NO				CODE NO. TAX EXEMP. STATE CODE							
SIGNATURE OR OTHER AUTHENTICATION  <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <b>POSTED</b>  <b>3-3-67</b> </div>																	

FORM 1150  
5-66

Use Previous  
Edition

**SECRET**

**011**

SEC. 1  
 Excluded from automatic  
 downgrading and  
 declassification

(When Filled In)

"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 6 OCTOBER 1962."

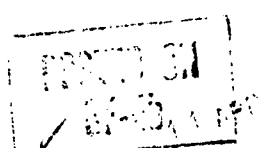
EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
<i>Richardson, Reginald</i>	006102	50	600	CF GS 15 5	\$19,415	\$19,978

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
006102		<i>Richardson, Reginald</i>		50 600 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSJ	LSJ	ADJ
GS 15	5	\$19,978	01/31/65	GS 15	6	\$20,500	01/29/67			
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: <i>W. L. L. L.</i> DATE: <i>10 Jan 67</i>										
<b>PAY CHANGE NOTIFICATION</b>										

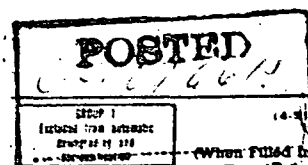
RZF: 7 APR 66

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
006102		Muller, Helmut									
3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM						4. EFFECTIVE DATE MO. DA. YR. 04 10 66		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 6136 1231 0000		8. CSC OR OTHER LEGAL AUTHORITY SECTION 203 P.L. 88-643			
CF TO V		X		CF TO CF							
9. ORGANIZATIONAL DESIGNATIONS DDP/WE FOREIGN FIELD PARIS STATION INTERNAL OPERATIONS SECTION						10. LOCATION OF OFFICIAL STATION PARIS, FRANCE					
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0885		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS				15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 5		17. SALARY OR RATE 19415			
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION.											
<div style="text-align: right;">  </div>											
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. INTEGREE 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	10	50600 WE		24065		3	01 20 24		02 03 63		01 31 65
28. NTE 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.	
		82		2				EOD DATA			
35. VET. PREFERENCE CODE		36. SERV. COMP. DATE MO. DA. YR.		37. LONG. COMP. DATE MO. DA. YR.		38. CAREER CATEGORY CAN DISC PROV TEMP		39. FEGLI / HEALTH INSURANCE CODE		40. SOCIAL SECURITY NO.	
0. NONE 1. 5 PT. 2. 10 PT.								0. WAIVER 1. YES 2. NO			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM EXECUTED: CODE		44. STATE TAX DATA FORM EXECUTED: CODE		45. NO TAX EXEMPT. STATE 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			
SIGNATURE OR OTHER AUTHENTICATION											

FORM 1150  
11-62Use Previous  
Edition

SECRET



WE

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
006102		<i>Richardson, Jacques</i>		50 600 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
GS 15	4	\$18,170	02/03/63	GS 15	5	\$18,740	01/31/65
7. TYPE ACTION							
PSI LSI ADJ.							
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>OK</i>							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>W.C. Hull</i>				DATE: <i>Joseph B. Casper</i>			
PAY CHANGE NOTIFICATION							

Form 9-61 560

Obsolete Previous Edition

(4-51)

"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
<i>Richardson, Jacques</i>	006102	50	600	CF GS 15 5	\$18,740	\$19,415



**SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE  
AND STEP AS INDICATED IN CHART BELOW.**

[illegible]

MHC: 2 13 MAR 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
006102		Richardson, Reginald									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						MO. DA. YR. 03 15 64		REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		4136 6250 1012		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP WE PARIS STATION INTERNAL OPERATIONS SECTION						PARIS, FRANCE					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0885		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		15 4		17210			
18. REMARKS											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> FOSTERED 03/23/64 </div>											
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. MODIFI. CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
37	10	NUMERIC 50600	ALPHABETIC WE	24065		3	MO. DA. YR. 01 20 24	MO. CA. YR.			MO DA YR
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.	
MO. DA. YR. 03 14 66		82		1 - CSC 2 - PICA 3 - NONE				TYPE MO. DA. YR. EOD DATA		34. SEX	
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 1 - 8 PT. 2 - 10 PT.		NO. DA. YR.		NO DA. YR.		CAR. REL. CODE PROV. TEMP.		CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX 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.)						FORM EXECUTED CODE NO TAX EXEMPTIONS 1 - YES 2 - NO				FORM EXECUTED CODE NO TAX EXEMPT. 1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 10px; display: inline-block;"> FOSTERED 03/23/64 JK </div>											

FORM 11-62 1150

Use Previous Edition

SECRET

20 MAR 1964

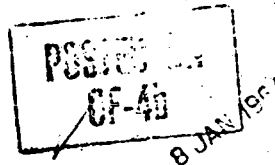
GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI  
MEMORANDUM DATED 1 AUGUST 1960, SALARY IS ADJUSTED AS FOLLOWS,  
EFFECTIVE 5 JANUARY 1964.

NAME *Richardson, Richard*  
~~XXXXXXXXXX~~

SERIAL 006102 ORGN FUNDS GR-ST OLD SALARY NEW SALARY  
50 600 CF GS 15 4 \$16,005 \$17,210



MHC:1128 OCT 63

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 006102		2. NAME (LAST-FIRST-MIDDLE) <i>Richardson, Richard</i>									
3. NATURE OF PERSONNEL ACTION REASSIGNMENT						4. EFFECTIVE DATE MO. DA. YR. 10 13 63		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		W TO CF		7. COST CENTER NO. CHARGEABLE 4136 6250 1012		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS ODP WE PARIS STATION EXTERNAL OPS SECTION						10. LOCATION OF OFFICIAL STATION PARIS, FRANCE					
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0886		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS				15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15 4		17. SALARY OR RATE 16005			
18. REMARKS <div style="text-align: right;">POSTED CF-40 5 JAN 64</div>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 37		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 50600 WE		22. STATION CODE 24065		23. IN-DEGREE CODE 3		24. MOBILE CODE 3	
25. DATE OF BIRTH MO. DA. YR. 01 20 24		26. DATE OF GRADE MO. DA. YR. .		27. DATE OF LEG MO. DA. YR. .		28. DATE EXPIRES MO. DA. YR. 10 12 65		29. SPECIAL REFERENCE 84		30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE	
31. SEPARATION DATA CODE TYPE		32. CORRECTION/CANCELLATION DATA 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 CODE 1 - YES 2 - NO		39. FEGLI / HEALTH INSURANCE 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 YEARS 3 - BREAK IN SERVICE MORE THAN 3 YEARS		42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		45. STATE CODE CODE NO. TAX STATE CODE EXEMP.			
SIGNATURE OR OTHER AUTHENTICATION											

POSTED

(P)

SECRET  
(When Filled In)

ADPD 08/17/63				NOTIFICATION OF PERSONNEL ACTION	
1. SERIAL NUMBER 006102		2. NAME (LAST FIRST MIDDLE) <i>Richardson Jacques</i>			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE 07 08 63		5. CATEGORY OF EMPLOYMENT
6. FUNDS		V TO V	V TO CF	7. COST CENTER NO CHARGEABLE	
		CF TO V	X CF TO CF	8. CSC OR OTHER LEGAL AUTHORITY 4136 6250 1012	
9. ORGANIZATIONAL DESIGNATIONS DUP/SH DIV			10. LOCATION OF OFFICIAL STATION PARIS, FRANCE		
11. POSITION TITLE CPS OFFICER			12. POSITION NUMBER 0240		13. CAREER SERVICE DESIGNATION C
14. CLASSIFICATION SCHEDULE (GS, LR, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 15	
17. SALARY OR RATE					
18. REMARKS					
<div style="border: 2px solid black; padding: 10px; transform: rotate(-15deg); display: inline-block;"> <b>POSTED</b>              08/17/63           </div>					
SIGNATURE OR OTHER AUTHENTICATION					

Form 11508  
1-63 MFG. 1-63

Use Previous  
Edition

SECRET

19 AUG 1963

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

(When Filled In)

AUTOMATED PSI RECORD ADJUSTMENT											
◀	SERIAL NO.	L E T		PSI DUE DATE		ORGANIZATION CODE		CURRENT			
		YR	MO	DA	YR	MO	DA	OFFICE	DIVISION	GRADE	STEP
		62	07	08	64	07	05	DDP/	SR	GS-14	6
PROJECTED		NAME (LAST-FIRST-MIDDLE) MAX. 20 CHARACTERS									
GRADE STEP		<i>Richardson, James</i>									
GS-14 7											
FUND	SCHED.	CURRENT SALARY		PROJECTED SAL.		ID CODE					
V/CF		(OR HOURLY RATE)		(OR HOURLY RATE)							
CF	GS	\$14,970		\$15,865		C					
REMARKS											
Subject received a PSI 07/08/62 to GS-14-6 so will not be due another until 07/05/64.											

(2/27/62)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-795 AND  
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.  
 EFFECTIVE 14 OCTOBER 1962

NAME  
*Richardson, James*  
~~XXXXXXXXXX~~

SERIAL ORGN  
*006102*  
~~237327~~ 40600

FUNDS OLD OLD  
 GR-ST SALARY GR-ST SALARY  
 CF 14 6 313510

NEW NEW  
 GR-ST SALARY GR-ST SALARY  
 14 6 314970

*look* ON  
 07-73

PSC: 20 AUG 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 056102		2. NAME (LAST-FIRST-MIDDLE) Richardson, Jacques									
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT (CAREER)						4. EFFECTIVE DATE MO. DA. YR. 08. 05. 62		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 3134 4008 1000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DDP SR WESTERN EUROPEAN AREA FRANCE PARIS						10. LOCATION OF OFFICIAL STATION PARIS, FRANCE					
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0240		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, RD, etc.) GS				15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 14 6		17. SALARY OR RATE 13510			
18. REMARKS  <div style="border: 1px solid black; padding: 5px; text-align: center;">           POSTED ON            20 AUG 62         </div>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 13	20. EMPLOY. CODE 10.	21. OFFICE CODING NUMERIC ALPHABETIC 60600 SR		22. STATION CODE 24055	23. INTEGREE CODE 3	24. MGRS. CODE 01 20 24		25. DATE OF BIRTH MO. DA. YR. 01 16 55		26. DATE OF GRADE MO. DA. YR. 01 16 55	
27. DATE OF LET MO. DA. YR. 01 08 61		28. NIE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE 1 - CSC 2 - FICA 3 - NONE		30. RETIREMENT DATA CODE 1		31. SEPARATION DATA CODE TYPE EOD DATA		32. CORRECTION/CANCELLATION DATA MO. DA. YR.	
33. SECURITY REQ. NO. 06102		34. SEX M		35. VET. PREFERENCE CODE 1		36. SERV. COMP. DATE MO. DA. YR. 03 07 44		37. LONG. COMP. DATE MO. DA. YR. 20 40		38. CAREER CATEGORY CAR. BECV. PRUV. TEMP. CODE C	
39. FEGLI / HEALTH INSURANCE CODE 1		40. SOCIAL SECURITY NO. 042205339		41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1		42. LEAVE CAT. CODE 8		43. FEDERAL TAX DATA FORM EXECUTED, CODE 1 - YES 2 - NO 0		44. STATE TAX DATA FORM EXECUTED, CODE 1 - YES 2 - NO 0	
SIGNATURE OR OTHER AUTHENTICATION  <div style="border: 1px solid black; padding: 5px; text-align: center;">           POSTED            21 AUG 62         </div>											

FORM 4-62 1150

Use Previous Edition

SECRET

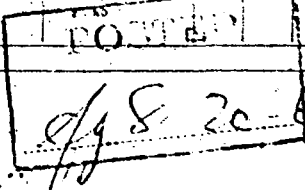
GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(4-91)

(When Filled In)

BAB: 16 AUG 62

SECRET  
(When Filled In)

DEF										NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER					2. NAME (LAST-FIRST-MIDDLE)														
006102					RICHARDSON JACQUES														
3. NATURE OF PERSONNEL ACTION										4. EFFECTIVE DATE					5. CATEGORY OF EMPLOYMENT				
RESIGNATION										MO. DA. YR. 08 04 62					REGULAR				
6. FUNDS					7. COST CENTER NO. CHARGEABLE					8. CSC OR OTHER LEGAL AUTHORITY									
X					3234 1000 1000														
9. ORGANIZATIONAL DESIGNATIONS										10. LOCATION OF OFFICIAL STATION									
DDP/SR SR/6 OFFICE OF THE CHIEF										WASH., D.C.									
11. POSITION TITLE										12. POSITION NUMBER					13. CAREER SERVICE DESIGNATION				
OPS OFFICER BR CH										0050					D				
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)					15. OCCUPATIONAL SERIES					16. GRADE AND STEP					17. SALARY OR RATE				
GS					0136.01					14 6					13510				
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. HOURS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
45		10		NUMERIC ALPHABETIC										MO. DA. YR. 01 20 24		MO. DA. YR.			
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA				31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA		33. SECURITY REC. NO.		34. SEX					
MO. DA. YR.				1 - CSC 2 - FICA 3 - NONE				1800091		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		0 - NONE 1 - 5 PT. 2 - 10 PT.		MO. DA. YR. MO. DA. YR.				CAR. RES. CODE CHIEF. TEMP.		CODE		0 - WAIVER 1 - YES		HEALTH INS. CODE					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE				43. FEDERAL TAX DATA				44. STATE TAX 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.)				FORM EXECUTED CODE 1 - YES 2 - NO				NO TAX EXEMPTIONS FORM EXECUTED 1 - YES 2 - NO				CODE NO TAX STATE CODE			
SIGNATURE OR OTHER AUTHENTICATION																			
																			

FORM 4-62 1150

Use Previous Edition

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC  
DOWNGRADING AND  
DECLASSIFICATION

(When Filled In)

(4-81)



234-1010-10  
3040  
3/20

1. Serial No		2. Name		3. Cost Center Number		4. LWOP Hours	
006102		RICHARDSON JACQUES		60 300 V 7			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last EH Date	Grade	Step	Salary	Effective Date
GS 14	5	\$13,250	01/08/61	GS 14	6	\$13,510	07/08/62
7. TYPE ACTION							
PSI LSI ADJ							
8. Remarks and Authentication							
/ / NO EXCESS LWOP / / EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / IN LWOP STATUS AT END OF WAITING PERIOD 23. 11 20 71 0 10 IN LWOP STATUS AT END OF WAITING PERIOD 10 11 20 71 0 10 CLERKS INITIALS AUDITED BY PAY CHANGE NOTIFICATION							

Form 560

Obsolete Previous Edition

(4-51)

SECRET  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME				3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT	
006102		RICHARDSON, JACQUES D.				DDP/SR 7		V-20			
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
GS-14	4	\$12990	07	12	59	GS-14	5	\$13250	01	08	61
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						11. AUDITED BY					
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. TYPE OF ACTION						13. REMARKS					
<input type="checkbox"/> P.S.I. <input type="checkbox"/> L.S.I. <input type="checkbox"/> PAY ADJUSTMENT											
14. AUTHENTICATION											
10. 11 20 71 0 10 10 11 20 71 0 10 PAY CHANGE NOTIFICATION											

FORM 560

560 OBSOLETE PREVIOUS EDITION REPLACES FORM 560A AND 560B.

SECRET

OFFICIAL PERSONNEL FOLDER

(4)

2320

**SECRET**  
(When Filled In)

ARF - 30 SEPT 1960

### NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER <b>006102</b>		2. NAME (LAST-FIRST-MIDDLE) <b>RICHARDSON JACQUES</b>	
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT AND TRANSFER TO VOUCHERDD FUNDS</b>		4. EFFECTIVE DATE MO. DA. YR. <b>10   02   60</b>	
5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>		6. COST CENTER NO. CHARGEABLE <b>1234 1000 1000</b>	
7. CSC OR OTHER REGAL AUTHORITY <b>50 USC 403</b>		8. CSC OR OTHER REGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS  <b>DDP SR SR 6 OFFICE OF THE CHIEF</b>		10. LOCATION OF OFFICIAL STATION  <b>WASH., D. C.</b>	
11. POSITION TITLE  <b>OPS OFFICER BR CH</b>		12. POSITION NUMBER <b>0050</b>	
13. CAREER SERVICE DESIGNATION <b>D</b>		14. CLASSIFICATION SCHEDULE (GS, WB, etc.) <b>GS</b>	
15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>14 4</b>	
17. SALARY OR RATE <b>12990</b>		18. REMARKS	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE <b>16</b>	20. EMPLOY. CODE <b>10</b>	21. OFFICE CODING NUMERIC ALPHABETIC <b>60300 SR</b>	22. STATION CODE <b>75013</b>
23. INTEGRTEE CODE	24. Hq/In. Code <b>1</b>	25. DATE OF BIRTH MO. DA. YR. <b>01   20   24</b>	26. DATE OF GRADE MO. DA. YR.
27. DATE OF LEI MO. DA. YR.	28. NTE 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
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. MIL. SERV. CREDIT/LCD 1 - YES 2 - NO
39. REGIS / HEALTH INSURANCE 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 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED 1 - YES 2 - NO	44. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO	45. NO TAX EXEMPTIONS	46. NO TAX EXEMP. STATE CODE
SIGNATURE OR OTHER AUTHENTICATION			
<p align="center"><i>[Signature]</i> 10/23/60</p>			

/S/ EMMETT D. ECHOLS  
DIRECTOR OF PERSONNEL

**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT			
506102		RICHARDSON JACQUES		DDP/SR 10		UV					
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
GS 14	3	\$11,835	01	12	58	GS 14	4	\$12,075	07	12	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY:					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO.	DA.	YR.	4 742					
14. AUTHENTICATION											
<p align="center">G. M. STEWART</p> <p align="right">DDP 8/5/59 HCF 7/31/59</p>											
PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO. 560a  
1 MAR. 58**SECRET**

PERSONNEL FOLDER (4)

**SECRET**

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE  
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI  
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
RICHARDSON JACQUES	506102	GS-14-3	\$10,750	\$11,835

GORDON M. STEWART  
/S/ DIRECTOR OF PERSONNEL

**SECRET**

**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT		
506102		RICHARDSON JACQUES			DDP/SR 8		UV				
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
14	2	\$10,535	07	15	56	14	3	\$10,750	01	12	58
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED, OR PRINTED, NAME OF SUPERVISOR					DATE		SIGNATURE OF SUPERVISOR				
BELIC, GEORGE					15 Jan 1958		<i>George N. Belic</i>				
PERIODIC STEP INCREASE - CERTIFICATION											

FORM NO. 560  
1 MAR. 56

SECRET

PERSONNEL FOLDER (4)

**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT		
506102		RICHARDSON JACQUES			DDP/SR		UV				
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
14	2	\$10,535	07	15	56	14	3	\$10,750	01	12	58
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LEAVE LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO.	DA.	YR.						
14. AUTHENTICATION											
<p align="center"><b>SECRET</b></p> <p align="center">PERIODIC STEP INCREASE - AUTHENTICATION</p>											

SECRET

STANDARD FORM 52 PLEASE FILL IN BY THE U. S. CIVIL SERVICE COMMISSION BRANCH - FIELD - DEPARTMENTAL BRANCH - LIMITED TO		REQUEST FOR PERSONNEL ACTION		UNVOUCHERED	
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.					
1. NAME (Mr., Miss, Mrs., One given name, initials, and surname)		2. DATE OF BIRTH		3. REQUEST NO.	
MR. JACQUES S. RICHARDSON		20 Jan. 1924		26 Sept. '56	
4. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		5. EFFECTIVE DATE A. PROPOSED		6. U. S. OR OTHER LEGAL AUTHORITY	
REASSIGNMENT					
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED 21 Oct			
FROM— Area Ops Officer BCF-189-14 GS-0136.01-14 \$10,535.00 p.a.		A. POSITION TITLE AND NUMBER		TO— Area Ops Officer BCF-189-14 GS-0136.01-14 \$10,535.00 p.a.	
		B. SERVICE GRADE AND SALARY			
		C. ORGANIZATIONAL DESIGNATIONS		DDP/SR Far East Area	
		D. HEADQUARTERS			
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL (D)	
A. REMARKS (Use reverse if necessary)					
RE-SLOTTING FOR NEW APPROVED T/O.					
B. APPROVED BY Robert D. Lovelace		D. REQUEST APPROVED BY			
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Signature:			
Ext. 4407		Title:			
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION			
NONE WWII OTHER 3 PT. 10 POINT DISAB. OTHER		NEW VICE I. A. REAL			
15. SEX M		16. APPROPRIATION FROM: 7-3400-55-015 TO: 7-3400-55-015		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	
				18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
				19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
20. STANDARD FORM 50 REMARKS					
<div style="float: right; border: 1px solid black; padding: 5px;">             USED IN LIEU OF SF 50              NOTIFICATION OF PERSONNEL              ACTION           </div> <div style="clear: both;"></div>					
21. CLEARANCES		INITIAL OR SIGNATURE		DATE	
A.					
B. CEIL. OR POS. CONTROL				11 OCT 1956	
C. CLASSIFICATION					
D. PLACEMENT OR EMPL.		743		10-9	
E.					
<div style="float: right; border: 1px solid black; padding: 5px;">             POSTED              11 OCT 1956           </div> <div style="clear: both;"></div>					
per 743 Mar. 9 Oct '56					

UNITED STATES GOVERNMENT		PAYMENT PRINTING OFFICE: 1952 - 507578	
Agency and organizational designation		2. Pay roll	3. Sheet No. 4. Slip No.
1. Employee's name (and social security account number when appropriate)		5-3400-20	
RICHARDSON, Jacques D.		GS-13 \$8360.00	
PAY ROLL CHANGE DATA			
7. Previous period	BASE PAY	OVERTIME	GROSS PAY
8. New period			
9. Pay this period			
10. Remarks	11. Appropriation(s)		12. Prepared by
5 9990 ADMITTED TO: 1955 EXEMPT TO DCI DIRECTIVE	SR 7		BZ 9 Nov 54
			13. Audited by
<input type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase			
14. Effective date	15. Date last equivalent increase	16. Old salary rate	17. New salary rate
2 Jan 55	5 Jul 53	\$8360.00	\$8560.00
18. Performance rating is satisfactory or better.		(Signature or other authentication)	
19. LWOP days (fill in appropriate spaces covering LWOP during following periods):		<input type="checkbox"/> No excess LWOP            Total excess LWOP	
STANDARD FORM NO. 1122d—Revised Form prescribed by Comp. Gen., U. S. Nov. 8, 1950, General Regulations No. 102		PAY ROLL CHANGE SLIP—PERSONNEL COPY	

STANDARD FORM 50 IS PART  
 OF APRIL 1961  
 RECOMMENDED BY  
 U. S. CIVIL SERVICE COMMISSION  
 CHAPTER 5, FEDERAL PERSONNEL MANUAL

**CENTRAL INTELLIGENCE AGENCY**

## NOTIFICATION OF PERSONNEL ACTION

**TV8**

1. NAME (Last-First-Middle-Initials) AND SURNAMES		2. DATE OF BIRTH		3. JOURNAL ACTION NO.		4. DATE	
MR. JACQUES G. RICHARDSON		20 Jan 1924				19 Jan. 1955	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)				6. EFFECTIVE DATE B.O.B. 16 Jan 1955		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 53 UECA 403 J	
PROMOTION (ASSIGNMENT)*							
FROM				TO			
Area Ops Officer (Br. Ch) EC-171-13		8. POSITION TITLE		Area Ops Officer ECF-189-14			
GS-0136.01-13 \$3600.00 per annum		9. SERVICE, SERIES, GRADE, SALARY		GS-0136.01-14 \$9600.00 per annum			
DDP/SR SV5		10. ORGANIZATIONAL DESIGNATIONS		DDP/SR Far East Area			
Washington, D. C.		11. HEADQUARTERS					
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL			
13. VETERAN'S PREFERENCE				14. POSITION CLASSIFICATION ACTION			
BODY 10-POINT DISAB OTHER 3				NEW HIRE L.A. REPR YES NO			
15. SEX RACE		17. APPROPRIATION		18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
M M		FROM: 5-3400-20 TO: 5-3400-55-015		Yes		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: HI.	
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.							
*This action amends Item #9, on the "from" side, on Notification dated 11 Jan. 1955, to show the correct salary, previously shown as \$3360.00 per annum.							
Subject to approved medical clearance prior to being sent overseas.							
"Transfer TO Unvouchered funds FROM Vouchered funds."							
ANCE PERFORMANCE RATING: duty Assistant Director for Personnel							



STANDARD FORM 50 (8 PART)  
REV. APRIL 1981  
PREPUBLISHED BY  
U. S. CIVIL SERVICE COMMISSION  
CHAPTER 81, FEDERAL PERSONNEL MANUAL

CENTRAL INTELLIGENCE AGENCY

## NOTIFICATION OF PERSONNEL ACTION Conc. 6 Jan. 1955 rva

1. NAME (MR., MISS, MRS., MRS. GIVE NAME, INITIALS, AND SURNAME) <b>MR. JACQUES O. RICHARDSON</b>		2. DATE OF BIRTH <b>20 Jan. 1924</b>	3. JOURNAL ACTION NO.	4. DATE <b>11 Jan. 1955</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>PROMOTION</b>		6. EFFECTIVE DATE <b>16 Jan 1955</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 J</b>	
FROM		TO		
<b>Area Ops Officer (Br. Ch) BC-171-13</b>  <b>GS-0136.01-13 \$2360.00 per annum</b> <b>Y060</b>  <b>DDP/SR</b> <b>SR/5</b>  <b>Washington, D. C.</b>		<b>Area Ops Officer BCF-189-14</b>  <b>GS-0136.01-14 \$2960.00 per annum</b>  <b>DDP/SR</b> <b>Far East Area</b>  <div style="border: 1px solid black; height: 20px; width: 100px;"></div> <div style="border: 1px solid black; height: 20px; width: 100px;"></div>		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> WHITE <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input checked="" type="checkbox"/> 10-POINT <input type="checkbox"/> (10-POINT) (10-POINT)		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>BD-FI</b>		
15. SEX <b>M</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>5-3400-20</b> TO: <b>5-3400-55-015</b>		18. SUBJECT TO C. S. RETIREMENT ACT (YES NO) <b>Yes</b>
		19. DATE OF APPOINTMENT AFFIDAVIT (ACCORDING ONLY)		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Md.</b>
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
Subject to approved medical clearance prior to being sent overseas.				
"Transfer TO Unvouchered funds FROM Vouchered funds."				
<div style="text-align: right;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>FORWARDED</b>   <b>JAN 17 1955</b> </div> </div>				
ENTRANCE PERFORMANCE RATING: <b>GOOD</b> Deputy Assistant Director for Personnel				

4. PERSONNEL FOLDER COPY

U. S. GOVERNMENT PRINTING OFFICE: 1955

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIAL(S), AND SURNAME) <b>Mr. Jacques G. Richardson</b>		2. DATE OF BIRTH <b>20 Jan. 24</b>		3. JOURNAL OR ACTION NO.		4. DATE <b>16 Feb. 54</b>	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Reassignment</b>				6. EFFECTIVE DATE <b>28 Feb. 54</b>		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 DECA 403 J</b>	
FROM <b>Deputy Chief (IO) BC 190-13</b>  <b>GS-132-13</b>  <b>BR-5 (Far East Branch) Office of the Chief</b>				8. POSITION TITLE  <b>Area Ops. Officer (Br. Ch) BC171-13</b>  <b>GS-0136.01-13 \$8360.00 per annum</b>  <b>EDP/BR</b> <b>BR-5</b>  <b>Washington, D. C.</b>		TO	
9. SERVICE, SERIES, GRADE, SALARY				10. ORGANIZATIONAL DESIGNATIONS			
11. HEADQUARTERS				12. FIELD OR DEPT'L			
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL				<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL			
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>				14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L. A. <input type="checkbox"/> REAL <input type="checkbox"/>			
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F				16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> N <input type="checkbox"/> O			
17. APPROPRIATION FROM: <b>4-3400-20</b> TO: <b>same</b>				18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>yes</b>		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:							
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.							
22. SIGNATURE OR OTHER AUTHENTICATION							

EXISTENCE PERFORMANCE RATING

Deputy Assistant Director for Personnel

4. PERSONNEL FOLDER COPY

STANDARD FORM 50  
REV. APRIL 1951  
PREVIOUS EDITIONS  
U. S. CIVIL SERVICE COMMISSION  
CHAPTER VI, FEDERAL PERSONNEL MANUAL

## CENTRAL INTELLIGENCE AGENCY

## NOTIFICATION OF PERSONNEL ACTION

882

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIAL(S), AND SURNAME) <b>Mr. Jacques O. Richardson</b>		2. DATE OF BIRTH <b>20 Jan. 24</b>		3. JOURNAL OR ACTION NO.		4. DATE <b>3 July 53</b>	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Promotion</b>				6. EFFECTIVE DATE <b>5 July 53</b>		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Sch. A-6.116(b)</b>	
FROM <b>Deputy Chief I. O. DC-190-12</b>  <b>GS-132-12 \$7040.00 per annum</b>  <b>DDP/SR Division</b> <b>SR-5 Far East</b> <b>Office of the Chief</b>  <b>Washington, D. C.</b>				8. POSITION TITLE  9. SERVICE, SERIES, GRADE, SALARY  10. ORGANIZATIONAL DESIGNATIONS  11. HEADQUARTERS		TO <b>Deputy Chief I. O. DC-190-13</b>  <b>GS-132-13 \$8360.00 per annum</b>  <b>DDP/SR Division</b> <b>SR-5 Far East</b> <b>Office of the Chief</b>  <b>Same</b>	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL				<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL			
13. VETERAN'S PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT DISAB. OTHER				14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I.A. <input type="checkbox"/> REAL			
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F		16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> N		17. APPROPRIATION FROM: <b>3400-20</b> TO: <b>Same</b>		18. SUBJECT TO C. S. RETIREMENT ACT (YLS-NO) <b>Yes</b>	
19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:					
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.							
<p>ENTRANCE PERFORMANCE RATING: <b>882</b></p> <p>Acting Chief, Personnel Division</p> <p>Signature of Official: <i>[Signature]</i></p>							

U. S. GOVERNMENT PRINTING OFFICE: 1948  
 PUBLISHED BY  
 CHAPTER 1. FEDERAL PERSONNEL MANUAL  
 U. S. CIVIL SERVICE COMMISSION

**CENTRAL INTELLIGENCE AGENCY**

## NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR. — MISS — MRS. — ONE GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH		3. JOURNAL OR ACTION NO.		4. DATE	
Mr. Jacques C. Richardson		20 Jan 24		F510		16 Feb 52	
This is to notify you of the following action affecting your employment:							
5. NATURE OF ACTION (USE STANDARD TERMS ONLY)				6. EFFECTIVE DATE		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment				17 Feb 52		Schedule A-6, 116(b)	
FROM				TO			
Operations Officer		8. POSITION TITLE		Operations Officer			
GS-12-132 \$7440.00 p. a.		9. SERVICE SERIES (GRADE, SALARY)		GS-12-132 \$7040.00 p. a.			
OPC		10. ORGANIZATIONAL DESIGNATIONS		OPC			
FE				EE			
FE-3		11. HEADQUARTERS		EE-4			
Washington, D. C.				Great Russian Section			
				Washington, D. C.			
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT L		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL			
13. VETERAN'S PREFERENCE				14. POSITION CLASSIFICATION ACTION			
NONE <input type="checkbox"/> NEW <input type="checkbox"/> OTHER <input type="checkbox"/> S. PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>				NEW <input type="checkbox"/> VET <input type="checkbox"/> S.A. <input type="checkbox"/> REAL <input type="checkbox"/>			
<input checked="" type="checkbox"/>				Dis 9845 1/17/52			
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> W		16. RACE <input type="checkbox"/> W <input type="checkbox"/> O		17. APPROPRIATION FROM 2123900 TO 2011		18. SUBJECT TO C. S. RETIREMENT ACT (YES — NO) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
						19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	
						20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: MD.	
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.							
(SLEO)							
ENTRANCE EFFICIENCY RATING:							
Personal Division							
22. SIGNATURE OR OTHER AUTHENTICATION							

**4. PERSONNEL FOLDER COPY**

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION (hr)

1. NAME (Last, first, middle initial, and surname) <b>Mr. Jacques C. Richardson</b>		2. DATE OF BIRTH <b>20 Jan. 1924</b>	3. JOURNAL OR ACTION NO. <b>9930</b>	4. DATE <b>18 Jan. 58</b>																		
This is to notify you of the following action affecting your employment:																						
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Promotion</b>		6. EFFECTIVE DATE <b>20 Jan. 58</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Conduct 1-6.115(b)</b>																			
FROM		TO																				
<b>Intelligence Officer GS-11</b>		<b>Operations Officer GS-12</b>																				
<b>GS-11-132 \$5940.00 per annum</b>		<b>GS-12-132 \$7040.00 per annum</b>																				
<b>OFC</b>		<b>OFC</b>																				
<b>FE</b>		<b>FE</b>																				
<b>FE-3</b>		<b>FE-3</b>																				
<b>Washington, D.C.</b>		<b>Washington, D.C.</b>																				
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL																				
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION																				
<table border="1"> <tr> <td>None</td> <td>10%</td> <td>Other</td> <td>5%</td> <td>10%</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> </tr> </table>		None	10%	Other	5%	10%	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>P.A.</td> <td>REAL</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> </tr> </table>			NEW	VICE	P.A.	REAL			<input checked="" type="checkbox"/>	
None	10%	Other	5%	10%																		
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>																				
NEW	VICE	P.A.	REAL																			
		<input checked="" type="checkbox"/>																				
15. SEX <b>M</b>		16. RACE <b>W</b>		17. APPROPRIATION FROM <b>2123900</b> TO <b>2017</b>																		
18. SUBJECT TO C. S. RETIREMENT ACT (YES - NO) <b>YES</b>		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE <b>Maryland</b>																		
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.																						
<b>(517)</b>																						
<div style="border: 1px solid black; width: 150px; height: 30px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>																						
<div style="text-align: center;"> <b>Personnel Division</b>              22. SIGNATURE OR OTHER AUTHENTICATION           </div>																						

ENTRANCE EFFICIENCY RATING:

STANDARD FORM 50  
OCTOBER 1949  
PROMULGATED BY  
U. S. CIVIL SERVICE COMMISSION  
CHAPTER 81, FEDERAL PERSONNEL MANUAL

## CENTRAL INTELLIGENCE AGENCY

## NOTIFICATION OF PERSONNEL ACTION

(a1)

1. NAME (MR.-MISS-MRS.—ONE GIVEN NAME, INITIALS, AND SURNAME) <b>Mr. James G. Richardson</b>		2. DATE OF BIRTH <b>20 Jan. 1924</b>	3. JOURNAL OR ACTION NO. <b>5729</b>	4. DATE <b>23 April 1951</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Transfer and Promotion</b>		6. EFFECTIVE DATE <b>29 April 1951</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-6, 116(b)</b>	
8. POSITION TITLE <b>Intelligence Officer, GS-9</b>		9. SERVICE, SERIES, GRADE, SALARY <b>GS-9-132 \$4600.00 per. annum.</b>		
10. ORGANIZATIONAL DESIGNATIONS <b>OPC FE FE-3 Japan Section</b>		11. HEADQUARTERS <b>Washington, D. C.</b>		
12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER		
14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>		15. DATE OF APPOINTMENT OF AFFIDAVITS (ACCESSIONS ONLY) <b>Bu. #8996 CSC#3032 6/2/52</b>		
16. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <input checked="" type="checkbox"/>		17. DATE OF APPOINTMENT OF AFFIDAVITS (ACCESSIONS ONLY) <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED		
18. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.		19. STATE: <b>MD.</b>		
20. ENTRANCE EFFICIENCY RATING:				
21. PERSONNEL DIVISION IDENTIFICATION				

(778)

PERSUANT TO DCI DIRECTIVE

5740

4. PERSONNEL FOLDER COPY

ER R

STANDARD FORM NO. 10 (PART 1)  
 PREVIOUS EDITIONS  
 REPEATED BY  
 CHAPTER 1, FEDERAL PERSONNEL MANUAL  
 U. S. CIVIL SERVICE COMMISSION

## CENTRAL INTELLIGENCE AGENCY

## NOTIFICATION OF PERSONNEL ACTION

P.C. 1/19/51  
 (nl)

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIAL, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mr. Jacques G. Richardson		20 Jan. 1924	44938	19 Feb. 1951
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Excepted Appointment		19 Feb. 1951	Schedule A-6.116(h)	
FROM		TO		
		8. POSITION TITLE	Intelligence Officer, GS-9	
		9. SERVICE, SERIES, GRADE, SALARY	GS-9-132-\$4600.00 per. annua.	
		10. ORGANIZATIONAL DESIGNATIONS	OPC FE FE-3, Japan Section	
		11. HEADQUARTERS	Washington, D. C.	
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> S-PT. <input type="checkbox"/> 10-POINT DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I.A. <input type="checkbox"/> REAL <input type="checkbox"/> Du. #2974 CSC/3051 6/2/49		
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> N	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES--NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
		FROM: 2115900 TO: 341-101	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	19 Feb. 1951
		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:		
21. REMARKS: THIS ACTION IS SUBJECT TO ALL APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELLED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
Trial period has been completed.				
ENTRANCE EFFICIENCY RATING: PERSONNEL DIVISION 1619-351 09				

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME RICHARDSON, JACQUES G.		DATE 9 January 1951
NATURE OF ACTION Resignation		EFFECTIVE DATE <i>16 Feb 1951</i>
	FROM	TO
TITLE	Intelligence Officer V	
GRADE AND SALARY	GS-9, \$4600 p/a	
OFFICE	OPC	
DIVISION	FE	
BRANCH	FE-3 Japan Section	
OFFICIAL STATION		
QUALIFICATIONS	APPROVAL	
	EXECUTIVE	
CLASSIFICATION	Chief, FE Division PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS:		
S-49 FE-39 JFEDICT Transfer leave <sup>to</sup> <del>from</del> unvouchered funds.		
<i>- not due US for travel 60000</i>		



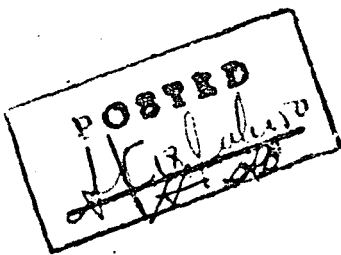

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME Jacques G. Richardson		DATE 7 September 1950
NATURE OF ACTION Promotion		EFFECTIVE DATE 1 October 1950
	FROM	TO
TITLE	Intelligence Assistant	Intelligence Assistant <i>Officer</i> ✓
GRADE AND SALARY	GS-7 \$3625 p/a	GS-9 \$4600 p/a
OFFICE	OIC	OIC
DIVISION	FE	FE
BRANCH	FE 3	FE 3
OFFICIAL STATION		
QUALIFICATIONS	EXECUTIVE	
<i>2 ? ? ? ? ? ? ? ?</i>	<i>1 ? ? ? ? ? ? ? ?</i>	
	PERSONNEL OFFICER	
	<i>1 ? ? ? ? ? ? ? ?</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON ROSTER _____		
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS: Employee EOD with CIA 20 Nov 49 as GS-7 130 changed to FE-11, JEDICT, Position No. <sup>49</sup> X, Japan <div style="text-align: right;"><i>BRO H</i></div>		

**SECRET**

**CONFIDENTIAL**

**RESTRICTED**

ENTRANCE ON DUTY RECORD		DATE 18 July 1950	
TO:  OPC		BUILDING  "X"	ROOM  1044
FROM:  PERSONNEL OFFICER		EOO DATE  18 July 1950	
NAME OF EMPLOYEE RICHARDSON, Jacques			
POSITION TITLE Intelligence Assistant		GRADE GS-7	SALARY \$3825.00 per annum
PAYROLL unvouchered funds		DUTY STATION	
DATE SECURITY CLEARED 10 June 1949		DATE OATH OF OFFICE ADMINISTERED 18 July 1950	
DATE PERMANENT IDENTIFICATION REQUESTED 18 July 1950		DATE FINGERPRINTED 18 July 1950	
DATE BRIEFED BY SECURITY 18 July 1950		DATE OF PHYSICAL EXAMINATION Not Applicable	
DATE 24 MONTH AGREEMENT SIGNED 18 July 1950			
EMPLOYEE'S EMERGENCY ADDRESS		(Wife)	
Silver Spring, Maryland - SL 3955			
EMPLOYEE'S LOCAL ADDRESS			
Same as above			
REMARKS:			
<div style="text-align: center;">  </div>			
SIGNATURE OF PERSONNEL OFFICER			
ROBERT S. MATTLES			

**RESTRICTED**

**CONFIDENTIAL**

**SECRET**

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME: <u>RICHARDSON, Jacques G.</u> <del>Ballou, James (Source)</del>	DATE: <u>15 July 1950</u>	
NATURE OF ACTION: <u>Resignation</u>		EFFECTIVE DATE: <u>COB 17 July 1950</u>
	FROM	TO
TITLE	<u>Intelligence Assistant</u>	
GRADE AND SALARY	<u>GS 7, \$3825 p/a</u>	
OFFICE	<u>CFO</u>	
DIVISION	<u>Operations</u>	
BRANCH	<u>FED</u>	
OFFICIAL STATION	<u>Unassigned</u>	
QUALIFICATIONS	<div style="text-align: center; font-size: x-small;">APPROVAL</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; text-align: center;"> <small>FOR ASSISTANT DIRECTOR</small>  <div style="border: 1px solid black; height: 30px; width: 100%;"></div> </div> <div style="width: 50%; text-align: center;"> <small>EXECUTIVE</small>  <div style="border: 1px solid black; height: 30px; width: 100%;"></div> </div> </div>	
CLASSIFICATION	<div style="text-align: center; font-size: x-small;">PERSONNEL OFFICER</div> <div style="text-align: center;"> </div>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <div style="float: right; text-align: right;"> <input type="checkbox"/> YES    <input type="checkbox"/> NO           </div>		
A H OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
_____ <small>SIGNATURE OF AUTHENTICATING OFFICER</small>		
REMARKS: <p style="font-family: cursive;">Subject to be entered on duty on unvouchered funds in his true name of Jacques G. Richardson. The effective date of his true name appointment is 18 July 1950.</p> <div style="text-align: right; margin-top: 20px;">   <div style="border: 1px solid black; padding: 2px; display: inline-block;">             Authorized Certifying Officer           </div> </div>		

SECRET

SECRET

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME <u>RICHARDSON, JAMES G.</u>		DATE <u>7 November 1949</u>
NATURE OF ACTION <u>Exempted Appointment</u>		EFFECTIVE DATE <u>20 November 1949</u>
	FROM	TO
TITLE		Intelligence Center GS-7
GRADE AND SALARY		GS-7, \$3825.00
OFFICE		CPC Ops Staff
BRANCH		FID Area III
DIVISION		SO-11-JBEDICT
OFFICIAL STATION		
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
PATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON <u>21 November 1949</u>		
SECURITY CLEARED ON <u>10 June 1949</u>		
OVERSEAS AGREEMENT SIGNED <u>21 November 1949</u>		
ENTERED ON DUTY <u>20 November 1949</u>		
NOG-C7/C5/53 OSECID - 17/10/49 NOA M 176/49		
		SIGNATURE OF AUTHENTICATING OFFICER
REMARKS: <u>Opending Acknowledged 21 November 1949 JSC</u>		
IS VERIFIED BY <u>104</u> DATE <u>1-13-51</u> Frederick W. [unclear] Authorized Certification Officer		

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, Jeffrey</i> GENERAL				006102	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
<i>[REDACTED]</i>		20 Jan 24	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Off		DDP/EUR			
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 checked="" 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 May 1971		12. REPORTING PERIOD (From - to) 1 April 1970 to 31 March 1971			
SECTION B PERFORMANCE EVALUATION					
<p><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.</p> <p><u>M-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> <p><u>P-Proficient</u> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><u>S-Strong</u> Performance is characterized by exceptional proficiency.</p> <p><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.</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).					
1. <i>[REDACTED]</i> for the purpose of further developing access to Station targets and appreciably lowering the overall cost of the operations in which he is involved.					RATING LETTER O
2. Uses <i>[REDACTED]</i> to gain access to MHIARSH personnel and spot leads on eventual access and support-type assets directed against the local MHIARSH and TPFAS targets.					RATING LETTER S
3. Develops and assesses MHIARSH officials with whom he has made contact as well as access prospects to the local MHIARSH and TPFAS targets.					RATING LETTER P
4. Responds to various Station requirements including investigative work.					RATING LETTER S
5. Reports on the above activities.					RATING LETTER P
6.					RATING LETTER S
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

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.

During the period under review, Subject managed to gain [redacted]

[redacted] He did this without help from Headquarters or the Station. Such an achievement is a tribute to Subject's fluency in [redacted] his ability to write, his general scientific know-how and his good business sense. [redacted]

[redacted] Subject's contribution to the Station operations in the MHARSH and TPFASST fields against which he is targetted temporarily decreased somewhat. Subject continued, however, to maintain contact with three local MHARSH officials and initiated contact with three others. He also continued to search for new leads to personalities in the priority areas assigned to him. Subject has the capability to call on local scientists or technicians of just about any nationality with the possible exception of TPFASST citizens. He has used this near-unique potential well.

Subject has had occasional difficulty switching from "professional" or intellectual subjects in his development of MHARSH personalities or access prospects to more down-to-earth interests necessary --con't--

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT and D.		
DATE	SIGNATURE OF EMPLOYEE	
9 June 1971	/s/ Thomas B. CASASIN	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
18 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
	Handling Officer	/s/ [redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
The Station submitted comments on Subject officer recently in OFPT-16549 (8 April 1971), to which we should add that Subject has, largely on his own merits, acquired a solid and potentially highly useful		
[redacted]		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
24 May 1971	DCOS	/s/ Hugh Montgomery

SECRET

S E C R E T

- 2 -

## FITNESS REPORT

Section C (continued)

to the development of human relations. His forte is therefore more in the field of spotting and making operational contacts than in that of more than short-range operational development. Subject's operational situation makes it impossible for him to attempt recruitments. Thus, his very real achievements are not by essence of the spectacular variety.

Subject's reporting has been satisfactory and continue to be copious. He could, however, further improve the selectivity of the leads provided the Station and make more of an effort to "digest" the information contained in his reports.

Although Subject has, at present, no supervisory function, he has repeatedly requested such a responsibility. He is careful with operational expenses and has exercised good security.

During the period under review, additional efforts have been made to make full use of Subject's potential and integrate him further in the work of the station component with which he works. He is a particularly valuable asset for the Station programs directed against the local MHIARSH and TPFAS targets.

Section D (continued)

substantial. In a word, is it worth it? We do not yet know, although our initial impressions are favorable.

On the fitness report itself, this rater would have preferred an "S" rating for specific duty number one; Subject may ultimately deserve an "O", but it does not seem warranted at the present time. Moreover, I believe the overall rating would more properly have been in the higher range of the "P" category, rather than "S", but it is of course a subjective judgment of the rating officer, who is more intimately and directly involved with Subject on a frequent basis.

In sum, [ ] is superb, and only time will reveal to what extent the [ ] requirements permit a full measure on behalf of the Organization. We are following this aspect closely and will be commenting upon it subsequently as we gain experience and knowledge.

S E C R E T

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (Last, first, middle initial only if SA)	DATE (from item 5-2)	NAME OF SUPERVISOR (true)	DATE (from item 5-2)	
<i>Richardson J.</i>	17 Oct 69			
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:		
12 December 1969	OFPT-15240			
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
20 I 1924	CS	S&T project manager, Area Ops Off, GS 15		
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	
5 Sep 1967	Please see 11B	Summer 1970	o/a 1 October, 1970	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
2: (at that time) 42 and 17				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
<p>I would like very much to use my fluent <input type="text"/> in my next assignment, as well as make use of my extensive exposure to science and technology -- both operations and and the larger world of the scientist and the engineer in today's evolving societies and economies. I would most especially hope to use my long experience in <input type="text"/> activities and the managerial exposure accumulated thereby.</p>				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)				
<ul style="list-style-type: none"> <li>I planned, established and operated a long-range S&amp;T spotting-assessment activity against sensitive targets, and a shorter range similar local activity during a period marked largely by an adverse political climate.</li> <li>I planned, developed and exploited, and modified a <input type="text"/> in order to mask our operational activity, and integrated these into the broader ranging overall activities of a major field Station.</li> <li>I managed the <input type="text"/> activity of <input type="text"/> organizations. The tasks included many business and production aspects as well as management of the <input type="text"/> personnel in the field and from the home office.</li> <li>I assisted other Stations and Bases, upon their request, in spotting-assessment activities, in local search and surveillance of targets, and in recruitment.</li> <li>As my original <input type="text"/> became modified as a result of <input type="text"/> I was able to develop, alone, continuing cover to serve our needs of operational access as well as those of <input type="text"/></li> </ul>				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
<p>(a) the senior-most management course offered through the Organization;          (b) a review course of activities within the CS and the Organization as a whole;          (c) at least audit the S&amp;T course, if that is still being offered.</p> <p>If (a) is possible through a civil school away from Headquarters, I would have no objection to the displacement involved.</p>				



## SECRET

<p>11. PREFERENCE FOR NEXT ASSIGNMENT:</p> <p>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.</p> <p>First choice: to manage a large-scale [ ] project in a [ ] speaking technically advanced locale.</p> <p>Second choice: chief of station or base [ ] in an area where I can combine my experience and linguistic ability.</p> <p>Third choice: to be assigned to Staff training, preferably training (a) senior unit or project managers, or (b) JOTs.</p> <p>Fourth choice: to be assigned to Staff personnel work -- above the Division level -- where new personnel are screened, tested and evaluated, then assigned.</p> <p>Fifth choice: to work on the Intelligence side of the house.</p>	
<p>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, &amp; 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.</p> <p><input type="checkbox"/> EXTEND TOUR _____ MONTHS AT CURRENT STATION TO _____ (DATE)</p> <p><input checked="" type="checkbox"/> BE ASSIGNED TO POSTS FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAFF, OR OFFICE. 1ST CHOICE <u>Staff training</u> 2ND CHOICE <u>personnel</u> 3RD CHOICE <u>Intelligence</u></p> <p><input checked="" type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION; INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION 1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____</p> <p><input checked="" type="checkbox"/> RETURN TO MY CURRENT STATION, with different responsibilities</p>	
<p>TO BE COMPLETED BY FIELD STATION</p> <p>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:</p> <p>Station recommends that Subject return PCS to Headquarters at the end of his current tour. We would welcome a replacement who is capable of functioning in the same general [ ] context, but any such individual must also be able to spot and thoroughly access agent candidates. He should also handle a number of agents in the same field. We are, in short, seeking an officer who will aggressively exploit his [ ]</p> <p>----- continued -----</p>	
<p>TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE</p> <p>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.</p> <p>No decision has been made concerning next assignment</p> <p>DATE <u>24 Aug 70</u> TITLE <u>C/E/PERS</u> SIGNATURE [ ]</p>	
<p>FOR USE BY CAREER SERVICE</p> <p>14. APPROVED ASSIGNMENT:</p> <p>15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATED: _____ CABLE NO. _____ DATED: _____</p> <p>CAREER SERVICE REPRESENTATIVE: _____ (SIGNATURE) _____ DATE: _____</p>	

SECRET

## S E C R E T

## Field Reassignment Questionnaire (continued)

12. develop new operational leads on his own initiative, and at the same time be prepared to take over and run assets related to his own

S E C R E T

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, Richard</i> GENERAL				006102	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
<i>[Redacted]</i>		20 Jan 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION			
Ops Off		DDP/EUR/			
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 checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 April 1969 - 31 March 1970		
SECTION B 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 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>					
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 Established and maintains a [ ] for the purpose of developing natural access to Station targets.					RATING LETTER S
SPECIFIC DUTY NO. 2 Uses [ ] to develop leads on eventual access or support type assets to be used by the Station against the local MINHARSH target.					RATING LETTER S
SPECIFIC DUTY NO. 3 Responds to various Station requirements including investigative work.					RATING LETTER S
SPECIFIC DUTY NO. 4 Initiates contact with selected local MINHARSH targets and undertakes to develop sufficient rapport with them to provide operational assessments.					RATING LETTER S
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, 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

(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 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>The comments of the rating officer are limited to the period from October 1969 to March 1970 during which he worked with Subject. The previous rating officer has added his comments to allow coverage of the total indicated period from April 1969 to March 1970. During this period Subject was integrated in a new team assigned to the local S&amp;T and Commercial MEMBERS target. Subject's recent activity has been very productive indeed. Subject used the excellent potential given to him by his [ ] to skillfully spot and assess access agent candidates. As Subject's operational situation [ ] precludes making recruitment, the most promising of these candidates was placed in contact with a Station officer during social events Subject organized. At the same time, Subject continued his efforts to develop personal relationship with several MEMBERS. The beginning of personal, as opposed to purely professional, relations with a major MEMBERS target enabled him to obtain insight into the target's beliefs and personality which was the best the Station had to date. Subject also managed to establish contact with two other MEMBERS representatives of interest. This, in one case, required almost six months to accomplish via a combination of patience, skill and determination. Subject is an experienced officer. He is cost conscious and practices good security. The Station has no other asset with the necessary scientific and editorial know-how, fluent [ ] and local knowledge to replace Subject. In view of this and the recent progress made by Subject in response to very specific requirements and his willingness to try to establish personal and, hopefully, social relations with access prospects and MEMBERS targets, the Station recently recommended that he be extended in [ ]. At the same time, the Station recommended that Subject's [ ]</p>			
SECTION D		ACTION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
	/s/ [ ]		
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	
	Handling Officer Chief, SR II	/s/ [ ] /s/ [ ]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>As previous Station correspondence and fitness reports will reflect, this officer has been the subject of varying evaluations and projections in recent years. In fairness to him, however, it is equally true that an officer [ ] reflects, in the level and quality of his performance, the amount and type of guidance, direction and push he receives from the responsible inside case officer. Making allowances for these variables, this officer's past record has not been impressive; however, it is also correct to note that he has improved substantially during the latter part of the period under review, and that if the Station can work out some fiscal arrangement which will reduce the heavy financial input</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
19 May 1970	DCOS	/s/ Hugh Montgomery	

SECRET

**SECRET****Section D3 continued**

from the Organization, his continued presence at this Station definitely appears to be warranted for a sufficient period to reach more definite conclusions concerning the level of sustained performance over a somewhat longer period than that reflected by this report.

On balance, we are pleased that this officer has responded so well to greater case officer direction and that he has undertaken somewhat more aggressive efforts to expand his range of contacts in immediate proximity to the primary Station targets. This officer does bring many talents to bear on his operational activity: he has absolutely fluent [ ] a solid and [ ] and a vast range of contacts in the local community. Nonetheless, it will require additional time to explore these contacts in depth, select those which appear to be operationally viable, and pursue them actively either to the point of recruitment by another officer or elimination from further development, for whatever reason.

In sum, in spite of the recognized and commendable improvement in this officer's performance during the period under review, the reviewer submits that the letter grade for specific duties 2 and 4 would more properly have been a "P", and that the overall rating, at this point, would more accurately be set at a level between "P" and "S", probably closer to the former than the latter.

This reviewing comment has been read by the officers who prepared the Fitness Report.

**SECRET**

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, Eugene</i> GENERAL				006102	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
<i>[Redacted]</i>		20 Jan 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION			
Ops Officer		DDP/EUR			
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 checked="" type="checkbox"/> INITIAL <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.			12. REPORTING PERIOD (From - to)		
			1 October 1964 - 31 March 1969		
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> 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>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>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.</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					RATING LETTER
Establishes and maintains <i>[Redacted]</i> for the purpose of developing natural access to Station targets.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Develops <i>[Redacted]</i> pretexts to meet WOLADY and third national of operational interest in the S&T community.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Responds to Station ad-hoc requirements on the local internal target.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Develops potential agent prospects in the S&T community to the point where they can be recommended as Station agent candidates.					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<i>20 Oct 69</i>					
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

## 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.

During this reporting period subject had very <sup>6/29</sup> ~~highly~~ <sup>1-25</sup> ~~highly~~ increased the tempo of his activities and contacts. Many agent prospects have been screened and contacts were established with people of interest to several elements of the Station. Subject is particularly thorough and outstanding on specific investigations where he utilized [ ] in a skillful and imaginative way. He has improved in terms of people development but in this respect he is still best with people in a professionally related context rather than a contrived social context. As mentioned in the previous report subject's [ ] does not allow him to make recruitments. Subject has a high degree of cost consciousness and does not exercise any supervisory responsibilities.

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

11 June 1969

SIGNATURE OF EMPLOYEE

/s/ [ ]

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

5 June 1969

OFFICIAL TITLE OF SUPERVISOR

Ops Officer

TYPED OR PRINTED NAME AND SIGNATURE

/s/ [ ]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I do not concur in this rating. I would have given the employee STRONG in the performance of his [ ] responsibilities, that is to say in the manner in which he has created and expanded [ ] I would have restricted myself to PROFICIENT, however, in assessing his exploitation [ ] for operational purposes. For a fuller treatment of this staff agent's performance, suggest that reference be made to the [ ] Status Report, submitted 26 May 1969, via OPA-99925.

DATE

23 JUNE 1969

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/ David KE. Murphy

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, Eugene</i> GENERAL				006102	
1. NAME <i>Richardson, Eugene</i> (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
		20 Jan 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/EUR			
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"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
		1 April 1967 - 30 September 1967			
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> 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>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>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.</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					RATING LETTER
Establishes and maintains [redacted] for the purpose of developing natural [redacted] to station targets.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Develops [redacted] pretenses to meet WGLADY and third national of operational interest in the S&T community.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Responds to Station ad-hoc requirements on the local internal target.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Develops potential agent prospects in the S&T community to the point where they can be recommended as Station agent candidates.					P
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



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. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Since the last reporting period subject's efforts were directed by the Station toward the spotting, developing and assessing NCIA/S&amp;T agent candidates in terms of recruitment and inclusion in the Station's S&amp;T spotting network.</p>			
<p>Subject has done thorough and at times imaginative spade work in this field despite the fact that the mission was not as successful as anticipated. Recent progress however would indicate that the next reporting period would be more productive.</p>			
<p>Subject continues to respond to ad-hoc specific assignments in an exemplary manner.</p>			
<p>Because of the nature of his [redacted] Subject is not authorized to make recruitments.</p>			
<p>Subject has a high degree of cost consciousness. He does not exercise any supervisory responsibilities [redacted]</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		
24 Oct. 1968	/s/ [redacted]		
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	
28 Oct. 1968	Ops Officer	/s/ [redacted]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
See attached.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
	Chief of Station	/s/ David E. Murphy	

SECRET

14-00000

ADDENDUM, Form 45 (Fitness Report), for period March 67-March 68.

Section D

As the individual being rated, I would like to add some remarks to those prepared by the rating officer.

The assignment I have includes managerial responsibilities which (a) are essential to the continued existence and security of the

In the case of (a), I must engage in a constant orchestration of

it follows, must be accomplished according to the high standards of thoroughness and accuracy which they have set.

In the case of (b) -- which derives from (a) -- and can prove to be so demanding that the needs of

Having previously managed both [redacted] and the principal denied-areas operating component of a major field Station, I can report quite honestly that my present managerial responsibilities exceed the former -- despite the apparent lack of "supervisory responsibilities" in my present position.

SECRET

3. It is difficult to place in the proper perspective the contribution of this senior staff agent to [ ] Station operations. On the one hand, Subject has established superb [ ] in the scientific and technical field which should have afforded him virtually unlimited access to persons of interest to us, both Soviet and potential access agents. In evaluating the manner in which the employee set up and managed [ ], I would tend to agree with his comments to the fitness report on the managerial demands on him although these comments are somewhat overdrawn.

The principal difficulty has been the time it has taken to relate the [ ] to the specific operational requirements of the Station. We have not received from CASSIN as many leads and assessment reports to persons of operational interest in the S&T field as we think he could have produced. It may be that the earlier listing of the project (viewed as a regional undertaking) contributed to this.

Recently we have noted significant improvement in that we have received responses to requests we have made for assessment and development of potential access agents [ ]. We hope, therefore, that this last year of CASSIN's stay will be the most productive ever. It is unfortunate that the [ ] must end because of the [ ] decisions over which we had no control.

/s/ David E. Murphy

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, Eugene</i> GENERAL				006102 ✓	
1. NAME (Last)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
<i>[REDACTED]</i>		20 Jan 24	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR		8. CURRENT STATION	
Ops Officer		DDP/EUR/			
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			
CAREER-PROVISIONAL (See Instructions - Section C)		XXX ANNUAL		REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):		SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
		1 April 1966 - 31 March 1967			
SECTION B PERFORMANCE EVALUATION					
<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>					
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					RATING LETTER
Establishes and maintains a [REDACTED] for the purpose of developing natural access to Soviet S&T personnel.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Develops [REDACTED] pretexts to meet, assess, and recommend as agent candidates WOLADY and Third Nationals in the HBFAIRY S&T community.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Contacts and develops local Soviet Bloc personnel.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Develops [REDACTED] pretexts to attend selected scientific conferences.					S
SPECIFIC DUTY NO. 5					RATING LETTER
Responds to local Station adhoc operational requirements.					S
SPECIFIC DUTY NO. 6					RATING LETTER
[REDACTED]					S
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

## 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.

Subject continues to maintain a secure effective [redacted]  
In this reporting period the whole thrust and objectives of this [redacted]  
[redacted] have been changed from pursuit of targets designated by Headquarters at international conferences to pursuit of the local Soviet presence. This has caused a major readjustment and Subject is now beginning to produce the type of leads that help the Station achieve its local operational objectives.

Subject continues to show a well organized methodical approach to his [redacted] operational tasks.

Subject is cost conscience.

HQRS.NOTE: Subject has no supervisory responsibilities.

[redacted]  
Chief, E/R

## 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 is on h/l. Report will be shown to him upon his return.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

9 August 1967

Ops Officer

/s/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I rarely see the written product of this employee's efforts and know little of his work except as I am informed of it by his supervisor in the Station. I have the impression, however, that the employee is responding to his supervisor's guidance and is not by any means simply drifting along paths indicated by his [redacted] which can be a temptation when an employee has, as is true in this case, rather limited contact with his colleagues who work [redacted] on the same target. I thus concur in the evaluation on the basis of limited knowledge.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

9 August 1967

Ops Officer

/s/Robert E. Owen

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL				006102	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
[REDACTED]		20 Jan. 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE Ons Officer		7. OFF/DIV/BR OF ASSIGNMENT DDP/WE		8. CURRENT STATION Paris	
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 checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):		SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to) 3 June 1965 - 31 March 1966			
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> 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 probation, to reassignment or to separation. Describe action.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory or excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are obtained.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>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.</p>					
List up to six of the most important specific manner in which employee performs EACH specific duty. Consider ONLY performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). Insert rating letter which best describes the					
SPECIFIC DUTY NO. 1 Establishes and maintains [REDACTED] for the purpose of developing natural access to Soviet S&T personnel					RATING LETTER O
SPECIFIC DUTY NO. 2 Develops [REDACTED] pretexts to attend selected scientific conferences where targeted Soviet S&T personnel are expected					RATING LETTER S
SPECIFIC DUTY NO. 3 Contacts, develops and assesses Soviet S&T personalities at international conferences.					RATING LETTER S
SPECIFIC DUTY NO. 4 Participates as an inside spotter, manager, and key team member in recruitment operations against Soviet S&T personnel					RATING LETTER S
SPECIFIC DUTY NO. 5 Spots, develops and assesses Soviet, third national and PRRIME agent candidates in H2FAIRY					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER S
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

## 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.

Subject has done an outstanding job in creating [redacted] which enables direct access to an important target group. This job was performed efficiently, securely, intelligently and imaginatively. Subject is an experienced, highly capable senior professional officer in every sense of the term. He is a thoroughly organized self-disciplined person who can operate effectively [redacted]. He has the supple mind required to learn highly technical [redacted] tasks and perform these in a skilled manner. He organizes the performance of these [redacted] duties in such a manner as to extract the most operational mileage. Subject has spotted, assessed, developed, and in special cases recruited. He is extremely articulate, and an excellent writer. Despite his [redacted] status, he submits timely finished operational and information reports. His management, administration, and record keeping of both [redacted] and operational duties is excellent.

Although Subject has had long experience in supervisory capacities, his present [redacted] status does not require supervisory duties.

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 4 May 1966	SIGNATURE [redacted]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 4 May 1966	OFFICIAL TITLE OF SUPERVISOR Ops Officer	/s/ [redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
[redacted]		
DATE 4 May 1966	OFFICIAL TITLE OF REVIEWING OFFICIAL Ops Officer	TYPED OR PRINTED NAME AND SIGNATURE /s/Robert E. Owen

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, James</i> GENERAL				006102	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
<i>Richardson, James</i>		20 Jan. 1924	M	15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/WE/		Paris	
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 type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
		1 April 1964 - 2 June 1965			
SECTION B PERFORMANCE EVALUATION					
<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>					
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 Contact, cultivation and assessment of, and collection of biographic and operational intelligence on Soviet scientific and technical targets, and on other Soviets and other nationalities to whom he has access					RATING LETTER 0
SPECIFIC DUTY NO. 2 Spotting and assessment of potential operational assets to be used against the targets specified under Specific Duty No. 1.					RATING LETTER S
SPECIFIC DUTY NO. 3 Execution of operational assignments as directed by Hqs and field stations concerned, whether of a KUTUBE, KUWOLF or KUDESK nature.					RATING LETTER O
SPECIFIC DUTY NO. 4 Preparation or acquisition of written material as operational information to increase his access and flexibility in furtherance of Specific Duties Nos. 1 through 3.					RATING LETTER O
SPECIFIC DUTY NO. 5 Planning, directing and managing to meet operational requirements.					RATING LETTER O
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER O *
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 of 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.					
30 JUN 1965					



SECRET

(When Filled In)

OFFICE OF PERSONNEL

## 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. Performance of managerial or supervisory duties described, if applicable.

In addition to operational

activity in his country of assignment, he has also been used in Hqs-directed activity in other countries, usually involving direct contact with target individuals, and in addition he has contributed greatly to the acquisition of operational information for the use of Hqs components in their overall approach to Soviet scientific and technical targets.

It would be difficult to fault this employee with respect to energy, professional skills, and mental capacity. He is a keen student of his operational environment and very skillful in analyzing the possibilities it offers for application toward operational objectives. He shows considerable resourcefulness in devising logical and credible

(continued)

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

1 June 1965

SIGNATURE OF EMPLOYEE

/s/

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

1 June 1965

OFFICIAL TITLE OF SUPERVISOR

Ops Officer

TYPED OR PRINTED NAME AND SIGNATURE

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Since the Reviewing Officer in the field has not indicated his views on this Fitness Report, I would like to make a comment of my own. Without wishing to detract from anything the Supervisor has said about Subject's performance, I feel obliged to note that the ratings given him in this report are higher than those given, for example, to any Branch Chief in this Division, and, as such, are inconsistent with the grading pattern of the Division as a whole.

Reviewing Officer

2 June 1965 Chief, External Operations Section /s/ Robert E. Owen

DATE

24 June 65

OFFICIAL TITLE OF REVIEWING OFFICIAL

DC/WE

TYPED OR PRINTED NAME AND SIGNATURE

Edward Ryan

SECRET

14-00000

SECTION C continued

approaches to operational problems and personalities, and expends considerable effort in maintaining a level of specialized knowledge sufficient to [redacted] and to ensure the maximum exploitation of his contacts with target organizations and individuals. His command of spoken, written, and technical [redacted] is excellent.

From the point of view of supervision, this employee in his present position requires guidance only insofar as to identify specific targets and for him to protect himself in situations where he does not have, by virtue of his not having access to official files, specialized information. Otherwise, he requires no supervision other than the periodic provision of policy and operational directives.

This employee has always been conscious and punctilious in his preparation of operational and administrative reports, including financial accountings, and his reporting in general, despite the burdens imposed by the necessity for minimizing the risks inherent in the lack of access to classified storage, leaves nothing to be desired.

Other than the funds for operational activities, this employee currently has no responsibility for the programming and use of personnel, space, equipment, and funds.

With respect to dedication to his job, this employee has practically speaking

[redacted] . His dedication to and enthusiasm for accepting the challenge of this assignment, and his willingness to continue on in it, deserve particular mention, particularly since he would perhaps justifiably feel that his present assignment may leave him outside the mainstream of competitive organization progression.

This employee's health and family situations leave nothing to be desired, as his proven mobility in the execution of operational assignments attests.

It should further be noted that with respect to the problem endemic to [redacted]

While this employee's assignment to date has essentially been a one-man show, it is recommended that serious consideration be given to expanding the operational complex which he has created in order to capitalize on his experience, the work he has put in to date, and his own management capabilities.

\*(Section B) - No special recognition of Subject's "Outstanding" overall performance is being requested at this time.

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
SECTION A <i>Richardson, Eugene</i> GENERAL				006102	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
<i>Richardson, Eugene</i>		20 Jan 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF. DIV. OR OF ASSIGNMENT		8. CURRENT STATION	
Ops. Officer		DDP/NE		Paris	
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) SPECIAL (Specify):		<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From- to-)			
31 May 1964		1 April 1963 - 31 March 1964			
SECTION B PERFORMANCE EVALUATION					
<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>					
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).					RATING LETTER
SPECIFIC DUTY NO. 1 Finding, cultivating unwittingly and assessing new target personalities among Soviet scientists, engineers and other technical specialists.					S
SPECIFIC DUTY NO. 2 Continuing the assessment and unwitting development of established targets in the same category.					S
SPECIFIC DUTY NO. 3 Development of similar leads on target personalities from other denied areas; making recruitments outside base country.					S
SPECIFIC DUTY NO. 4 Development and assessment of technical personalities of interest to Station's internal (domestic) programs.					S
SPECIFIC DUTY NO. 5					0
SPECIFIC DUTY NO. 6 Researching, writing and editing own and others' material					0
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.					S
26 JUN 1964					

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 retaining. 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.

This employee combines the relatively rare combination of a senior and broadly experienced intelligence officer under [redacted] providing both long-term status in his country of residence (and in Europe in general) and access for a variety of operational functions, including spotting, assessing, contact with Soviet bloc nationals of specific interest, investigative measures, assessment in depth of [redacted] persons, and attendance at a broad range of national and international specialized meetings. Development of the capability operationally to exploit [redacted] has been the achievement of the employee himself. In so doing he has at the same time achieved genuine acceptance by his [redacted] associates [redacted] his colleagues [redacted] and related professions.

In undertaking operational tasks this employee has consistently shown initiative, imagination, security consciousness, and application of both operational and substantive background to the problem at hand. He has put a conscious effort into improving his already excellent command of the [redacted] language, and his grasp of a variety of specialized scientific and technical fields has been achieved basically as a result of his own efforts.

His management of operational reporting, finances, and the administrative problems [redacted] has been exemplary.

It should be noted that during the reporting period, this employee has not had the benefit at all times of specific pinpointed operational direction. As of the end of the reporting period, Headquarters assumed control of his activities against

## SECTION D

## CERTIFICATION AND COMMENTS

specific Soviet targets on a

1. BY EMPLOYEE Europe-wide basis.

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

DATE

SIGNATURE OF EMPLOYEE

25 May 1964

/s/ [redacted]

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

Eighteen

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

25 May 1964

Ops. Officer

/s/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

25 May 1964

Ops. Officer

/s/ Robert E. Owen

SECRET

**SECRET**  
(When Filled In)

<b>FITNESS REPORT</b> <i>Richard J. Leguina</i>				EMPLOYEE SERIAL NUMBER <b>037367</b> <i>016112</i>	
<b>SECTION A</b>					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
[REDACTED]		20 Jan 1924	M	GS-15	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/SR		Paris	
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.		12. REPORTING PERIOD (From - to)			
31 May 1963		10 September 1962 - 31 March 1963			
<b>SECTION B</b>					
<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
Establishment and maintenance of [REDACTED]					O
SPECIFIC DUTY NO. 2					RATING LETTER
Spotting and assessing persons of operational interest to [REDACTED] Station and to other stations.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Investigating of organizations and phenomena of operational interest to the Station.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Collection of positive and operational information [REDACTED]					S
SPECIFIC DUTY NO. 5					RATING LETTER
[REDACTED]					
SPECIFIC DUTY NO. 6					RATING LETTER
[REDACTED]					
<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
15 JUL 1963					S

SECRET

(When Filled In)

## SECTION C

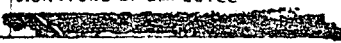
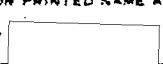
## NARRATIVE COMMENTS

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 managerial or supervisory duties must be described, if applicable.

See attached sheet.

## 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	
15 May 1963	 /s/	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
6½ months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
15 May 1963	Ops Officer	/s/ 
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
See attached sheet.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
20 May 1963	OPS Officer	/s/ Edward Ryan

SECRET

**SECRET***Richard J. Lee***SECTION C****NARRATIVE COMMENTS**

The assignment of this employee to the field [redacted] was designed to compensate for the loss of an employee in an [redacted] slot which was cut from the Station's [redacted] allotment of personnel positions.

During the reporting period this employee has accomplished with success [redacted]

During the reporting period he has developed a wide circle of contacts in the scientific and journalistic fields and applies a long background in a variety of assignments in KUDOVE to the determination and assessment of operational potential among these contacts. At the same time his [redacted]

This employee requires a minimum of detailed operational supervision; it is necessary in specific cases only to indicate the operational or informational objectives.

From the point of view of administrative support, his attention to detail and meticulousness reduce the problems of his support by the Station to a minimum.

This employee uses the [redacted] language continuously, and his facility is such as to permit him to handle himself excellently in a broad range of complex technical subjects. He has in addition undertaken specialized [redacted] language training to develop this capability further. His operational reporting is excellent both with regard to clarity and pertinence.

In the immediate future he will be assigned case work, for the most part in fields where it will complement, and be complemented by, his independent operational activities [redacted]

**SECRET**

SECRET

JUN  
1962  
*M*

6107

6 August 1962

[REDACTED]  
Memorandum in Lieu of Fitness Report *Richardson, Eugene*Subject: [REDACTED]  
[REDACTED]

My last statements concerning the performance of  
[REDACTED] should be extended to cover the  
remainder of his service as Chief of SR/6. He de-  
parted headquarters for a field assignment 31 July  
1962.

*Quentin C. Johnson*  
QUENTIN C. JOHNSON  
Chief of Operations and Plans  
SR Division

CONCUR: *Howard J. Osborn*HOWARD J. OSBORN  
Chief, SR Division



150  
1961SECRET  
(When Filled In)Recorded by  
CSPD

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
SECTION A				GENERAL		
1. NAME (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	
[REDACTED]		20 January 1924		M	GS-14	
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		
D		Branch Chief		OC/SR/6		
8. CAREER STAFF STATUS			9. TYPE OF REPORT			
NOT ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR		
PENDING	DECLINED	DENIED	X ANNUAL	REASSIGNMENT/EMPLOYEE		
10. DATE REPORT DUE IN O.P.			11. REPORTING PERIOD			
			From July 1960 - October 61 To			
			SPECIAL (Specify)			
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).						
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
SPECIFIC DUTY NO. 1 Supervises large functional branch of [REDACTED] staff and [REDACTED] contract personnel.		RATING NO. 5	SPECIFIC DUTY NO. 4 Conducts liaison with various components of the Agency and with other agencies.		RATING NO. 6	
SPECIFIC DUTY NO. 2 Plans and programs for operations support, including initiation of new support activities.		RATING NO. 5	SPECIFIC DUTY NO. 3 Prepares and presents briefings.		RATING NO. 6	
SPECIFIC DUTY NO. 3 Supervises preparation of, and sometimes personally prepares, special studies both on own initiative and on request.		RATING NO. 5	SPECIFIC DUTY NO. 5 Supervises maintenance of SR Division records on Soviet defectors, supports exploitation of defectors and participates in their resettlement.		RATING NO. 5	
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.						
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. 5	
SECTION D DESCRIPTION OF THE EMPLOYEE						
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee						
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree		
CHARACTERISTICS			NOT APPLICABLE	NOT OBSERVED	RATING	
					1 2 3 4 5	
GETS THINGS DONE						
RESOURCEFUL					X	
ACCEPTS RESPONSIBILITIES					X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES					X	
DOES HIS JOB WITHOUT STRONG SUPPORT					X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE					X	
WRITES EFFECTIVELY					X	
SECURITY CONSCIOUS					X	
THINKS CLEARLY					X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS					X	
OTHER (Specify):						
SEE SECTION "E" ON REVERSE SIDE						

SECRET

(When Filled In)

## SECTION E

## NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. [REDACTED] has a good knowledge of Soviet matters and generally is very well informed. He continually demonstrates much initiative and a high degree of productivity. He is stimulating to his associates, businesslike and delegates work easily. He appears very self-confident and he is dynamic.

Mr. [REDACTED] supervises a very large and key branch engaged in a wide variety of activities, a difficult job which he does well.

## SECTION F

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 9 November 1961	SIGNATURE OF EMPLOYEE [REDACTED] b1	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION Twelve	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS		REPORT MADE WITHIN LAST 90 DAYS
OTHER (Specify):		
DATE 9 November 1961	OFFICIAL TITLE OF SUPERVISOR SR/Chief of Plans and Operations	TYPED OR PRINTED NAME AND SIGNATURE QUENTIN J. SCHUCHMAN
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE 21 NOV 1961	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, SR Division	TYPED OR PRINTED NAME AND SIGNATURE JOHN M. MAURY

SECRET

**SECRET**  
(When Filled In)

<b>FITNESS REPORT</b>						EMPLOYEE SERIAL NUMBER			
<b>SECTION A GENERAL</b>									
1. NAME (Last) (First) (Middle) <b>RICHARDSON Jacques</b>			2. DATE OF BIRTH <b>20 Jan 1924</b>		3. SEX <b>M</b>		4. GRADE <b>GS-14</b>		
5. SERVICE DESIGNATION <b>DI</b>		6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT <b>FE/ /SR</b>				
8. CAREER STAFF STATUS				9. TYPE OF REPORT					
<input type="checkbox"/> NOT ELIGIBLE <input type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED				<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P.				11. REPORTING PERIOD					
				From <b>1 Apr 59</b> To <b>31 June 60</b> SPECIAL (Specify)					
<b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>									
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).									
1 - Unsatisfactory    2 - Barely adequate    3 - Acceptable    4 - Competent    5 - Excellent    6 - Superior    7 - Outstanding									
SPECIFIC DUTY NO. 1 <b>Chief, Soviet Branch, responsible for activities of [ ] staff and [ ] contract employees</b>				SPECIFIC DUTY NO. 4 <b>Case officer</b>		RATING NO. <b>5/6</b>			
SPECIFIC DUTY NO. 2 <b>Responsible for station SR planning, budgeting, and operating activities</b>				SPECIFIC DUTY NO. 5		RATING NO.			
SPECIFIC DUTY NO. 3 <b>Representing the station at varied levels in all SR matters</b>				SPECIFIC DUTY NO. 6		RATING NO.			
<b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>									
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.									
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.							RATING NO. <b>5</b>		
<b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>									
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee									
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree		5 - Outstanding degree	
CHARACTERISTICS						NOT APPLICABLE		NOT OBSERVED	
								RATING	
								1 2 3 4 5	
GETS THINGS DONE								X	
RESOURCEFUL								X	
ACCEPTS RESPONSIBILITIES								X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X	
DOES HIS JOB WITHOUT STRONG SUPPORT								X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE								X	
WRITES EFFECTIVELY								X	
SECURITY CONSCIOUS								X	
THINKS CLEARLY								X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								X	
OTHER (Specify):									
SEE SECTION "E" ON REVERSE SIDE									

## SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE		
<p>Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his <del>present</del> <sup>past</sup> development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.</p> <p>In most respects, this officer is one of the <del>best</del> <sup>best</sup> I have known in this agency. He has a broad and deep knowledge of his target area, as well as of his "host" country; an excellent and proven degree of operational "know-how"; the ability to write and speak lucidly and effectively and with apparent ease; and a very high degree of motivation and devotion to duty. He can be expected to continue his dynamic and imaginative pursuit of a most difficult target. It is my opinion that this officer has great potential and is ready for increased responsibilities which would involve the promotion for which he has been recommended. As for training, a good managerial course might help to bring into even sharper focus his many talents.</p>		
<p>This report has been prepared in accordance with FE Division standards which recognize the principle of rating the individual against the group. Thus an 'average' rating reflects an entirely satisfactory performance.</p>		
SECTION F CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 23 June 1960	SIGNATURE OF EMPLOYEE Jacques Richardson/s/ on transmittal	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS		REPORT MADE WITHIN LAST 90 DAYS
OTHER (Specify):		
DATE 23 June 1960	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE signed on Adam Brindle(F) transmittal
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. <input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	COS, Tokyo	John Baker/s/ on transmittal

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle) <b>RICHARDSON, Jacques</b>				2. DATE OF BIRTH <b>20 January 1921</b>		3. SEX <b>M</b>	4. GRADE <b>GS-11</b>
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT <b>SR,</b>		
8. CAREER STAFF STATUS				9. TYPE OF REPORT			
<input type="checkbox"/> NOT ELIGIBLE		<input checked="" type="checkbox"/> MEMBER		<input type="checkbox"/> DEFERRED		<input type="checkbox"/> INITIAL	
<input type="checkbox"/> PENDING		<input type="checkbox"/> DECLINED		<input type="checkbox"/> DENIED		<input checked="" type="checkbox"/> ANNUAL	
10. DATE REPORT DUE IN O.P. <b>31 May 1959</b>				11. REPORTING PERIOD <b>10 Apr 58 - 31 Mar 59</b>		12. SPECIAL (Specify)	
<b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).							
1 - Unsatisfactory		2 - Barely adequate		3 - Acceptable		4 - Competent	
5 - Excellent		6 - Superior		7 - Outstanding			
SPECIFIC DUTY NO. 1 Supervises and directs operational branch of some persons				RATING NO. <b>5</b>	SPECIFIC DUTY NO. 4 Case officer		
SPECIFIC DUTY NO. 2 Conducts operational liaison with local intelligence and security services.				RATING NO. <b>6</b>	SPECIFIC DUTY NO. 5		
SPECIFIC DUTY NO. 3 Conducts liaison with U.S. military and civilian intelligence services				RATING NO. <b>6</b>	SPECIFIC DUTY NO. 6		
<b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.							
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.							RATING NO. <b>5</b>
<b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>							
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee							
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree	
5 - Outstanding degree							
CHARACTERISTICS				NOT APPLI- CABLE	NOT OB- SERVED	RATING	
						1 2 3 4 5	
GETS THINGS DONE							
RESOURCEFUL							
ACCEPTS RESPONSIBILITIES							
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							
DOES HIS JOB WITHOUT STRONG SUPPORT							
FACILITATES SMOOTH OPERATION OF HIS OFFICE							
WRITES EFFECTIVELY							
SECURITY CONSCIOUS							
THINKS CLEARLY							
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							
OTHER (Specify):							
SEE SECTION "E" ON REVERSE SIDE							

SECRET

(When Filled In)

**SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Subject continues as one of the most capable, professional and hard working of the branch chiefs in the Station. Working against a tough denied area problem, he demonstrates imagination, drive, excellent area background and knowledge, and a high degree of productivity. He definitely has the potential for an even more responsible position.

JUN 22 11 19 AM '59

MAIL ROOM

**SECTION F CERTIFICATION AND COMMENTS****1. BY EMPLOYEE**

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE  
27 April 1959SIGNATURE OF EMPLOYEE  
signed on transmittal**2. BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION  
22

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

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE  
27 April 1959OFFICIAL TITLE OF SUPERVISOR  
DC [redacted]TYPED OR PRINTED NAME AND SIGNATURE  
William Nelson  
signed on transmittal**3. BY REVIEWING OFFICIAL**☒

I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

☐ I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.☐ I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.☐ I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE  
27 April 1959OFFICIAL TITLE OF REVIEWING OFFICIAL  
[redacted]TYPED OR PRINTED NAME AND SIGNATURE  
John E. Baker signed on transmittal

SECRET

SECRET

(When Filled In)

SR 8

## FITNESS REPORT (Part I) PERFORMANCE

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

## SECTION A.

## GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
RICHARDSON JACQUES	20 Jan 1924	M	DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
FE, TOKYO,		Area Cus Officer	
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-14		1 October 1957 - 9 April 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	Promotion

## SECTION B.

## CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ WAS ☐ WAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

## A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/>	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "E" IN CI OR D, A WARNING LETTER HAS BEEN SENT TO HIM BY A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/>	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input type="checkbox"/>	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE **27 May 1958** C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR **William E. Nelson** D. SUPERVISOR'S OFFICIAL TITLE

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
Posted Pos. Control	11 JUL 1958
Reviewed by TCD	7/24/58

THIS REPORT HAS BEEN SUBMITTED UNDER CRITERIA  
ESTABLISHED AT THIS OFFICE AND IN CONFORMANCE  
WITH THE ORGANIZATION'S POLICY THAT THE RATER  
SHOULD EVALUATE THE INDIVIDUAL AS HE STANDS  
BEFORE HIM.

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE **27 May 1958** B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL **John E. Baker** C. OFFICIAL TITLE OF REVIEWING OFFICIAL

## SECTION C.

## JOB PERFORMANCE EVALUATION

## 1. RATING ON GENERAL PERFORMANCE OF DUTIES:

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- 5/6
- DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
  - DARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
  - PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
  - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
  - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
  - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

Performance

(4)

## SECRET

(When Filled In)

## 2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

## DIRECTIONS:

- a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- f. Be specific. Examples of the kind of duties that might be rated are:
- |                             |                                |                                |
|-----------------------------|--------------------------------|--------------------------------|
| ORAL BRIEFING               | HAS AND USES AREA KNOWLEDGE    | MAIL ROOM INTERROGATIONS       |
| GIVING LECTURES             | DEVELOPS NEW PROGRAMS          | PREPARES SUMMARIES             |
| CONDUCTING SEMINARS         | ANALYZES INDUSTRIAL REPORTS    | TRANSLATES GERMAN              |
| WRITING TECHNICAL REPORTS   | MANAGES FILES                  | DEBRIEFING SOURCES             |
| CONDUCTING EXTERNAL LIAISON | OPERATES RADIO                 | KEEPS BOOKS                    |
| Typing                      | COORDINATES WITH OTHER OFFICES | DRIVES TRUCK                   |
| TAKING DICTATION            | WRITES REGULATIONS             | MAINTAINS AIR CONDITIONING     |
| SUPERVISING                 | PREPARES CORRESPONDENCE        | EVALUATES SIGNIFICANCE OF DATA |
- g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE RATING NUMBER	1. INCOMPETENT IN THE PERFORMANCE OF THIS DUTY		6. PERFORMS THIS DUTY IN AN OUTSTANDING MANNER	
	2. BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY		FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS	
DESCRIPTIVE RATING NUMBER	3. PERFORMS THIS DUTY ACCEPTABLY		7. EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY	
	4. PERFORMS THIS DUTY IN A COMPETENT MANNER			
DESCRIPTIVE RATING NUMBER	5. PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB			
SPECIFIC DUTY NO. 1	As branch chief directs and plans operations of denied area branch.	RATING NUMBER 5/6	SPECIFIC DUTY NO. 4	Conducts liaison with other U.S. agencies
SPECIFIC DUTY NO. 2	Conducts operational liaison with local security services.	RATING NUMBER 6	SPECIFIC DUTY NO. 5	
SPECIFIC DUTY NO. 3	Develops and handles agents	RATING NUMBER 6	SPECIFIC DUTY NO. 6	

## 3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

Subject is an exceedingly well-equipped operations officer. He is mature, intelligent, has a thorough background in operations in his area and the ability to grow in his job. His operational planning and execution is usually impeccable. He has the loyalty of his subordinates and the respect of his equals and supervisors. He is particularly effective in dealing in the liaison field where his good sense and disinterest in "fighting the problem" produces a maximum of cooperation and good will. If he has any minor fault as a supervisor, it is not in impatience with his subordinates, as reflected in previous evaluations, but in an occasional unwillingness to say no to them.

## SECTION D.

## SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED
2. OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW
3. A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION
4. OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION
5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS
6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION
7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? ☐ YES ☒ NO. IF YES, EXPLAIN FULLY:

SECRET



## SECRET

(When Filled In)

## FITNESS REPORT (Part II) POTENTIAL

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any notation. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the US no later than 30 days after the due date indicated in item 3 of Section "F" below.

## SECTION E.

## GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
RICHARDSON JACQUES	20 Jan 1924	M	DI
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
FE, [ ]	Area Ops Officer		
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-11		1 October 1957 - 9 April 1958	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	X Promotion

## SECTION F.

## CERTIFICATION

1. FOR THE DATED: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
27 May 1958	William E. Nelson	
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
27 May 1958	John E. Baker	

## SECTION G.

## ESTIMATE OF POTENTIAL

## 1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

INSTRUCTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

5 RATING NUMBER	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

## 2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION		
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) where contact with immediate subordinates is frequent (First line supervisors)		
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)		
	3	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)		
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT		
3		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION		
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX		
		Other (Specify)		

## SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION					
10 months					
4. COMMENTS CONCERNING POTENTIAL					
<p>His potential for advancement is excellent. He has the right blend of operational know-how and supervisory talent to undertake positions of wider scope than he now holds. Although his advancement has been rapid for his age, his security, poise, and common sense almost completely eliminate age as a factor in his potential for a more senior job.</p>					
SECTION II. FUTURE PLANS					
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL					
<p>Subject deserves at sometime within the next year or two the opportunity to broaden his experience either by command of a small station or advancement to a more responsible job in a large one.</p>					
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS					
None					
SECTION I. DESCRIPTION OF INDIVIDUAL					
<p><b>DIRECTIONS:</b> This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.</p>					
<p>3. CATEGORY NUMBER</p> <p>1 - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL</p> <p>2 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE</p> <p>3 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE</p> <p>4 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE</p> <p>5 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE</p> <p>6 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE</p>					
CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAD HIGH STANDARDS OF ACCOMPLISHMENT	5	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
5	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. BODIES WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
5	8. HAS MEMORY FOR FACTS	5	18. IS OBSERVANT	5	28. HIS CRITICISM IS CONSTRUCTIVE
4	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
4	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

U of Pers.

## FITNESS REPORT (Part I) PERFORMANCE

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A, below.

## SECTION A.

## GENERAL

1. NAME (Last) <b>RICHARDSON</b> (First) <b>Jacques</b> (Middle)	2. DATE OF BIRTH <b>20 Jan. 1924</b>	3. SEX <b>M</b>	4. SERVICE DESIGNATION <b>DI</b>
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE <b>Area Operations Officer</b>	
7. GRADE <b>GS-14</b>	8. DATE REPORT DUE IN CP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) <b>1 October 1956 to 30 September 1957</b>	
10. TYPE OF REPORT (Check one)	INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/>	REASSIGNMENT-SUPERVISOR <input type="checkbox"/> SPECIAL (Specify) REASSIGNMENT-EMPLOYEE <input type="checkbox"/>	

## SECTION B.

## CERTIFICATION

1. FOR THE RATER: THIS REPORT ☐ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.  
**Completed at Headquarters; subject not available (Copy sent to field).**

## A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" IN CI OR D, A WARNING LETTER WAS SENT TO HIM OR A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

## B. THIS DATE

**16 Oct 1957**

## C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR

## D. SUPERVISOR'S OFFICIAL TITLE

**Edward Marchin, Chief SOV Branch**

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

DATE <b>1 NOV 1957</b>
Posted For Cert. <b>LM</b>
Reviewed by <b>EF 11/1/57</b>

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

## A. THIS DATE

**23 OCT 57**

## B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL

OFFICIAL

**11 OCT 57**

## C. OFFICIAL TITLE OF REVIEWING OFFICIAL

## SECTION C.

## JOB PERFORMANCE EVALUATION

## 1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

6 INSERT RATING NUMBER	1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
	2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

## SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p><b>DIRECTIONS:</b></p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
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SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p><b>OFFICE OF PERSONNEL</b>  <b>MAIL ROOM</b></p>																											
<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY  2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY  3 - PERFORMS THIS DUTY ACCEPTABLY  4 - PERFORMS THIS DUTY IN A COMPETENT MANNER  5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB  6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS  7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>																											
DESCRIPTIVE RATING NUMBER	SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4																								
	Deputy to Branch Chief	5	Supervising																								
	SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5																								
	Conducts Foreign Liaison	6	Prepares correspondence and reports and handles administrative routine																								
	SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6																								
	Prepares and Manages Projects	4	Developes and handles Agents																								
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p><b>DIRECTIONS:</b> Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Subject has excellent natural equipment for employment in this organization in terms of his intelligence and natural aptitudes. Additionally, he brings a great deal of area knowledge and language ability to his present assignment. During the period covered by this report he has displayed great industry and devotion to duty in a variety of circumstances and achieved notable results in production and in the creation of both short and long-term assets for his unit. On the debit side I would say that he is somewhat too businesslike in many personal situations to the point of being almost humourless. This, however, is a quality which he does not permit to intrude upon the necessities of his operational work although it often shows in office relationships.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p><b>DIRECTIONS:</b> Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED  2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW  3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION  4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION  5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS  6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION  7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
7																											
RATING NUMBER																											
IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:																											

SECRET

SECRET

(When Filled In)

## FITNESS REPORT (Part II) POTENTIAL

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CF no later than 30 days after the due date indicated in item 8 of Section "E" below.

## SECTION E.

## GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
RICHARDSON Jacques	20 Jan. 1924	M	DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
REDACTED	Area Operations Officer		
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-14		1 October 1956 to 30 September 1957	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT-EMPLOYEE	

## SECTION F.

## CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
23 Oct 57	Lloyd GEORGE	REDACTED
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
16 Oct 1957	Edward M. ...	Chief SOV Branch

## SECTION G.

## ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES  
 DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

7 RATING NUMBER	1. ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2. HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3. MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4. READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5. WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6. ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

## 2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☐ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
1	BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	
2	BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
3	BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
2		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisor)
	3	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR POLICY, ORGANIZATION AND POLICY (Executive level)
3		WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
3		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		OTHER (Specify)

## SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RAILED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION  
15

OFFICE OF PERSONNEL

## 4. COMMENTS CONCERNING POTENTIAL

Subject is well suited for this business and the business should progress steadily to positions of great responsibility.

Oct 20 11:50 PM '57

MAIL ROOM

## SECTION II.

## FUTURE PLANS

## 1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Normal refresher a/o preparatory training as required.

## 2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

No limiting factors or personal circumstances known to the rater

## SECTION I.

## DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER

1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE

2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE

3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE

4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE

5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES	3	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
3	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
5	8. HAS MEMORY FOR FACTS	5	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
X	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

## FITNESS REPORT (Part I) PERFORMANCE

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section "A" below.

## SECTION A.

## GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
RICHARDSON Jacques	20 Jan. 1924	M	DI
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
(REDACTED)	Area Operations Officer		
7. GRADE	8. DATE REPORT DUE IN DP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-14		1 October 1955 to 30 September 1956	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	

## SECTION B.

## CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. (IF NOT SHOWN, EXPLAIN WHY NOT)

## A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/>	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "E" IN C1 OR D, A WARNING LETTER HAS BEEN SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/>	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	
<input checked="" type="checkbox"/>	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

8. THIS DATE 15 November 1956 C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR E. Edward M. Arlino D. SUPERVISOR'S OFFICIAL TITLE Chief, Soviet Branch

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DNE
18 Nov 56	
1-22-57	

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 21 November 1956 B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL W. Lloyd George C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Operations

## SECTION C. JOB PERFORMANCE EVALUATION

## 1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

6 INSERT RATING NUMBER	1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
	2 - BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

## SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES			
<b>DIRECTIONS:</b> a. State in the spaces below up to six of the more important SPECIFIC duties performed by the individual during rating period. Place the most important first. Do not include minor or unimportant duties. b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty. c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only). d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility. e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties. f. Be specific. Examples of the kind of duties that might be rated are: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 30%;">             ORAL BRIEFING              GIVING LECTURES              CONDUCTING SEMINARS              WRITING TECHNICAL REPORTS              CONDUCTING EXTERNAL LIAISON              TYPING              TAKING DICTATION              SUPERVISING           </div> <div style="width: 30%;">             HAS AND USES AREA KNOWLEDGE              DEVELOPS NEW PROGRAMS              ANALYZES INDUSTRIAL REPORTS              MANAGES FILES              OPERATES RADIO              COORDINATES WITH OTHER OFFICES              WRITES REGULATIONS              PREPARES CORRESPONDENCE           </div> <div style="width: 30%;"> <b>OFFICE OF PERSONNEL</b>  <div style="text-align: right; font-weight: bold;">JAN 3 11 13 AM '57</div> <b>MAIL ROOM</b>              CONDUCTS INTERROGATIONS              PREPARES SUMMARIES              TRANSLATES GERMAN              DEBRIEFING SOURCES              KEEPS RECORDS              DRIVES TRUCK              MAINTAINS AIR CONDITIONING              EVALUATES SIGNIFICANCE OF DATA           </div> </div>			

SECRET



## SECRET

(When Filled In)

## FITNESS REPORT (Part II) POTENTIAL

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OF no later than 30 days after the due date indicated in item 8 of Section F below.

## SECTION E.

## GENERAL

1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
RICHARDSON JACQUES		20 Jan. 1924	M	DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE		
(REDWOOD)		Area Operations Officer		
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)		
32-17		1 October 1955 to 30 September 1956		
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)	
	ANNUAL	REASSIGNMENT-EMPLOYEE		

## SECTION F.

## CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED		
4. THIS DATE	5. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	6. SUPERVISOR'S OFFICIAL TITLE
15 November 1956	Edward M. Melius	Chief, Soviet Branch
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
4. THIS DATE	5. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	6. OFFICIAL TITLE OF REVIEWING OFFICIAL
21 November 1956	W. Lloyd George	Chief of Operations

## SECTION G.

## ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

7	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

## 2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	
	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
2		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	3	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
3		WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
3		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		OTHER (Specify)

SECRET

Potential

(4)

## SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION <div style="text-align: center;">Six</div>		OFFICE OF PERSONNEL	
4. COMMENTS CONCERNING INDIVIDUAL  <div style="display: flex; justify-content: space-between;"> <div>Subject has a high all around potential. With respect to subordinates, he tends to support subordinates from his own energy rather than to bring them along the hard way, and a normal tendency to avoid the categorical "no" - both tendencies easily correctable.</div> <div style="text-align: right;"> <div style="border: 1px solid black; padding: 2px;">JAN 3 11 54 AM '57</div> MAIL ROOM </div> </div>			
SECTION II.		FUTURE PLANS	
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL  <div style="text-align: center;">Routine refresher training as appropriate.</div>			
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS  <div style="text-align: center;">All normal. No limiting factors.</div>			
SECTION I.		DESCRIPTION OF INDIVIDUAL	
<p><b>DIRECTIONS:</b> This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.</p>			
<p>X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL</p> <p>1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE  2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE  3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE  4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE  5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE</p>			
CATEGORY NUMBER		CATEGORY	
CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY
5	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES
5	4. IS ANALYTIC IN HIS THINKING	3	14. ADMITS HIS ERRORS
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION
4	6. SHOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT
3	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS
5	8. HAS MEMORY FOR FACTS	5	18. IS OBSERVANT
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY
X	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS
		4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
		3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
		3	23. IS THOUGHTFUL OF OTHERS
		4	24. WORKS WELL UNDER PRESSURE
		4	25. DISPLAYS JUDGEMENT
		4	26. IS SECURITY CONSCIOUS
		5	27. IS VERSATILE
		4	28. HIS CRITICISM IS CONSTRUCTIVE
		4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
		5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

**SECRET**  
(When Filled In)

## FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

### INSTRUCTIONS

**TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER:** Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

**TO THE FIELD SUPERVISOR:** Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make the report accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that you know where he stands.

**FIELD REPORT**

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS

Reviewed by PUD *RR* 12/7/55

Posted Pos. Control *P95* 29 NOV 1955

### SECTION I

LEAVE BLANK - FOR HEADQUARTERS USE ONLY

*Garth Richardson*

1. DATE OF BIRTH

20 Jan 1924

2. SEX

M

3. SERVICE DESIGNATION

(1) FI, (2) PP

4. GRADE

GS-11

5. STATION DESIGNATION (Current)

USSR Base,

6. DUE DATE OF THIS REPORT

30 September 1955

7. PERIOD COVERED BY THIS REPORT (Inclusive dates)

17 February - 30 September 1955

### SECTION II (To be completed by field supervisor)

1. CURRENT POSITION

Chief, USSR Base,

0136.01

2. DATE ASSUMED RESPONSIBILITY FOR POSITION

17 February 1955

3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)

#### A. As Chief of Operating Base:

1. Manage and direct all operations against target area, and monitor products.
2. Supervise system of development and exploitation of operational leads.
3. Supervise proper administration and support of operations, including finances.
4. Conduct or supervise effective liaison with other KUBARK elements, with other Government agencies abroad and, when appropriate, with representatives of other governments.

#### B. As Senior SR Division Officer in Area:

1. Consult with or advise other KUBARK and non-KUBARK units on target area, government, and IS characteristics.
2. Make available to other KUBARK and non-KUBARK units area specialists, as required.

### SECTION III (To be completed at headquarters only)

**DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY**

#### AUTHENTICATION OF REPORT AND SIGNATURES

1. NAME OF FIELD SUPERVISOR	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
<i>Garth Richardson</i>	<i>W. Lloyd Jones</i>
3. THIS REPORT <input checked="" type="checkbox"/> WAS <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.	
4. DATE REPORT AUTHENTICATED AT HQS.	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS
7 Nov. 1955	<i>[Signature]</i>

**DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY**

**SECRET**  
(When Filled In)

**SECTION IV**

**OFFICE OF PERSONNEL**

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply to most people. On the right hand side of the page are four major categories of descriptions. The scale on the right category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS		CATEGORIES					
		NOT OB- SERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES			X			
B. PRACTICAL.						X	
1. A GOOD REPORTER OF EVENTS.							X
2. CAN MADE DECISIONS ON HIS OWN WHEN NEED ARISES.							X
3. CAUTIOUS IN ACTION.						X	
4. HAS INITIATIVE.							X
5. UNEMOTIONAL.							X
6. ANALYTIC IN HIS THINKING.							X
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.							X
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.							X
9. HAS SENSE OF HUMOR.						X	
10. KNOWS WHEN TO SEEK ASSISTANCE.							X
11. CALM.							X
12. CAN GET ALONG WITH PEOPLE.						X	
13. MEMORY FOR FACTS.							X
14. GETS THINGS DONE.							X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.							X
16. CAN COPE WITH EMERGENCIES.						X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.							X
18. HAS STAMINA. CAN KEEP GOING A LONG TIME.						X	
19. HAS WIDE RANGE OF INFORMATION.							X
20. SHOWS ORIGINALITY.						X	
21. ACCEPTS RESPONSIBILITIES.							X
22. ADMITS HIS ERRORS.						X	
23. RESPONDS WELL TO SUPERVISION.							X
24. EVEN DISPOSITION.					X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.						X	

**SECRET**

**SECRET**  
(When Filled In)

26. CAN THINK ON HIS FEET.																		X	
27. COMES UP WITH SOLUTIONS TO PROBLEMS.																		X	
28. STIMULATING TO ASSOCIATES; A "SPARK PLUG".																		X	
29. TOUGH MINDED.																		X	
30. OBSERVANT.																		X	
31. CAPABLE.																		X	
32. CLEAR THINKING.																			X
33. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS.																		X	
34. EVALUATES SELF REALISTICALLY.																		X	
35. WELL INFORMED ABOUT CURRENT EVENTS.																			X
36. DELIBERATE.																		X	
37. EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES.																		X	
38. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS.																		X	
39. THOUGHTFUL OF OTHERS.																			X
40. WORKS WELL UNDER PRESSURE.																		X	
41. DISPLAYS JUDGEMENT.																			X
42. GIVES CREDIT WHERE CREDIT IS DUE.																		X	
43. HAS DRIVE.																		X	
44. IS SECURITY CONSCIOUS.																		X	
45. VERSATILE.																			X
46. HIS CRITICISM IS CONSTRUCTIVE.																		X	
47. ABLE TO INFLUENCE OTHERS.																		X	
48. FACILITATES SMOOTH OPERATION OF HIS OFFICE.																		X	
49. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION.																			X
50. A GOOD SUPERVISOR.																		X	

SECTION V

A. WHAT ARE HIS OUTSTANDING STRENGTHS?

Capable operations officer with broad understanding of Soviet problems.

B. WHAT ARE HIS OUTSTANDING WEAKNESSES?

**SECRET**

**SECRET**  
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTLIGHS ALL OTHER CONSIDERATIONS:  
**OFFICE OF PERSONNEL**

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, **4/22 11 07 AM '55**

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?  
**431 ROOM**

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

**SECTION VI**

*Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D*

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☐ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☒ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION... IRKED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION... ADTERRED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION... THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- ☒ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- ☐ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☒ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☐ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- ☐ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☐ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- ☒ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

**SECRET**

**SECRET**  
SECURITY INFORMATION

CY 7 DATE

**PERSONNEL EVALUATION REPORT**

*M. L. Lufkin*  
Rm. 8/11/54

Items 1 through 6 will be completed by Administrative or Personnel Officers

1. NAME (Last) <b>Richardson</b>	(First) <b>Jacques</b>	(Middle) <b>B.G.</b>	2. GRADE <b>GS-13</b>	3. POSITION TITLE <b>Area Ops. Officer CD-PI</b>
4. OFFICE <b>DDP</b>	STAFF OR DIVISION <b>SR</b>	BRANCH <b>SR/5</b>	<input type="checkbox"/> DEPT'L. <input type="checkbox"/> FIELD	IF FIELD, SPECIFY STATION
5. PERIOD COVERED BY REPORT From <b>18 July 1953</b> To <b>17 July 1954</b>		6. TYPE OF REPORT <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.

18 July 53 - 31 Jan 54

- Manage and direct the activities of an overseas operating branch.
- Assist the division chief of operations in the planning of new and continued oper'ns.
- Assist the division chief in personnel programming in support of branch and field station activities.

1 Feb 54 - 17 Jul 54

- Establish new domestic activities branch.
- Develop and manage operational program of this branch, insuring (1) continuity of treatment by qualified personnel, (2) processing of intelligence requirements, and (3) expeditious movement of finished intelligence.
- Multilateral liaison with other elements of CIA, the Government, and foreign IS.

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
Counterespionage (OTR)	Washington	3 weeks	22 January 1954

(In addition to the duties indicated in §7 above, I also give a 3-hour lecture at the CE course (advanced phase) approximately every six weeks.)

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED? I am primarily interested in a foreign assignment where I could apply the various espionage and CE techniques it has been my responsibility to manage and plan for in recent years.

My work at headquarters has become somewhat narrowing in that I am losing language abilities and opportunity for direct contact with foreigners.

10.

3 July 1954  
DATE


*Jacques B. Richardson*  
SIGNATURE

Items 11 through 18 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

Richardson is a superior officer in the performance of his duties. He is efficient, precise, and energetic, and brings considerable imagination and foresight to the operational problems confronting him. His concept of staff organization and responsibility is of a high caliber. In handling personnel, he is perceptive and serious, and his judgment and motivation are of the highest quality.

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12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING? This officer has been outstanding as a staff officer. He is unusually talented in his balancing of jurisdictional entities. This ability reflects a broad competence, however, and should not be construed so as to limit his future duties.
13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT? This officer's devotion to his duties and professional convictions sometimes inclines him toward inflexible declarations of position. This fault, a minor one in officers of considerable potential, will be corrected by increased responsibility and experience.
14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE. This officer is prepared for promotion and for increased responsibilities in command or staff duties.
15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.) Richardson is presently well placed. See below.
16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON? Tradecraft training and a field assignment. Both are planned in the next six months. <i>FI/Training</i>
17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.
18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.
<div>29 July 54 DATE</div> <div><i>P. de Sil</i> SIGNATURE OF SUPERVISOR</div>
19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in item 20.) <div>21 July '54 DATE</div> <div> SIGNATURE OF REVIEWING OFFICIAL</div>
20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)

SECRET



**SECRET**  
SECURITY INFORMATION

CC

**PERSONNEL EVALUATION REPORT**

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. NAME (Last) <b>RICHARDSON</b>	(First) <b>Jacques</b>	(Middle) <b>D G.</b>	2. GRADE <b>GS-13</b>	3. POSITION TITLE <b>Dep. Intell. Off. (Chief)</b>	<b>CD F1</b>
4. OFFICE <b>DDP</b>	STAFF OR DIVISION <b>SR</b>	BRANCH <b>SR 5 FE Br.</b>	<input checked="" type="checkbox"/> DEPT'L <input type="checkbox"/> FIELD	IF FIELD, SPECIFY STATION	
5. PERIOD COVERED BY REPORT From <b>2-18-53</b> To <b>7-18-53</b>		6. TYPE OF REPORT <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor			

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.  
 a. Supervise and manage a foreign geographic branch; this includes a total of ☐ authorized personnel at Hq and in the field stations. b. Direct and coordinate all project development. c. Detect and explore potential operational leads. d. Coordinate intra-division activities with appropriate branches; inter-division activities with appropriate divisions, senior staffs, and elements outside DD/P and CIA. e. Determine the suitability of new personnel, continued employment and rotation of incumbent personnel, and make available incumbent personnel on loan basis to other divisions, etc. f. Apportion the operational and administrative workloads within the branch sections and desks, and their personnel. g. Adapt changing field situations and problems to the organization and operation of the branch, making the branch best serve the needs of the field stations. h. Review continuously all requirements imposed on the branch, and transmit them clearly to the field.

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
None (I was overseas part of the time covered by this report).			

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED? I am principally interested in the building and successful operation of American intelligence abroad, both in theory and in practice.  
 IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS). The only remark/can make here is the one I stated in the previous report: the administrative responsibilities of a branch chief do not enable him to be a purely operational individual. If it were possible to carry less of an administrative load, I would enjoy devoting all of my time to the refinement of the intelligence process and its techniques in my area of concern.

22 October 1953  
DATE

*Jacques Richardson*  
SIGNATURE

Items 11 through 18 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

During this period Mr. Richardson was promoted from Deputy Branch Chief to Branch Chief, in recognition of his extremely good performance. Not enough time has elapsed to be able to evaluate him fully on all aspects of his new position. However, his handling of the Branch has been unusually good from a management point of view and there is every reason to believe that in the planning and direction of operational activities the same high standard will prevail.

JPH

**SECRET**  
SECURITY INFORMATION

<p>12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING?</p> <p>He is a good organizer and a good leader. He is methodical and thorough in his planning and supervision of substantive activities, while at the same time he maintains close and sympathetic relations with his subordinates. His knowledge of them and of their personalities and problems is outstanding.</p>
<p>13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?</p> <p>He should continue to develop his knowledge of operations and operational procedures.</p>
<p>14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.</p> <p>He is well equipped to advance through increasing levels of responsibility.</p>
<p>15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)</p> <p>Well placed at present.</p>
<p>16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?</p> <p>Assignment to a field position in the not-too-distant future.</p>
<p>17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.</p>
<p>18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.</p>
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>26 October 1953</p> <p style="text-align: center; font-size: small;">DATE</p> </div> <div style="width: 45%; text-align: center;"> <div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div> <p style="text-align: center; font-size: small;">SIGNATURE OF SUPERVISOR</p> </div> </div>
<p>19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in item 20.)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><i>26 October 1953</i></p> <p style="text-align: center; font-size: small;">DATE</p> </div> <div style="width: 45%; text-align: center;"> <div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div> <p style="text-align: center; font-size: small;">SIGNATURE OF REVIEWING OFFICIAL</p> </div> </div>
<p>20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)</p>

**SECRET**

**SECRET**  
SECURITY INFORMATION

## PERSONNEL EVALUATION REPORT

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. NAME (Last) <b>RICHARDSON,</b>	(First) <b>Jacques</b>	(Middle) <b>G.</b>	2. GRADE <b>GS-12</b>	3. POSITION TITLE <b>I.O. (Dep. Chief)</b>
4. OFFICE <b>DDP</b>	STAFF OR DIVISION <b>SR</b>	BRANCH <b>SR-5 Far East</b>	<input checked="" type="checkbox"/> DEPT'L. IF FIELD, SPECIFY STATION <input type="checkbox"/> FIELD	
5. PERIOD COVERED BY REPORT From <b>2-18-52</b> To <b>2-18-53</b>		6. TYPE OF REPORT <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES. Assist the Branch Chief in management of the Branch and its overseas stations (3); at present, I act as Branch Chief about 25%-30% of the year. Supervise the planning and preparation for approval of all basic plans, programs, and projects. This involves thorough discussion with each of [ ] desk chiefs of the purposes and procedures for accomplishing any single mission under any given project, including target analysis (whether FI or PP), preparation of intelligence annexes, logistic and fiscal requirements, specific personnel needs, etc. Am responsible for working directly with the Division's Intelligence Branch for control of requirements, ops intelligence, and reports. Am responsible for maintaining liaison with appropriate staffs and other Divisions who must coordinate any action or document. Assist or direct, as required, specific mission planning at overseas stations on TDY. Supervise preparation of all periodic reports; interview candidate empl's.

Name of Course	Location	Length of Course	Date Completed
International Politics, Graduate School 102	Georgetown University, Washington.	4 months: 3 hours' credit	5 June 1952

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

I am primarily interested in the conception, planning, and operational management of FI and PP activities, and ops policy and control.  
 IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).  
 This differs from my present assignment essentially in that a Branch Chief or his Deputy becomes so involved in administrative detail that he cannot always give his undivided attention to project management and agent handling problems. Otherwise, I feel that my background and experience qualify me for the functions I aspire to perform.

10.

7 February 1953

DATE

SIGNATURE

Items 11 through 18 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE. As Deputy Branch Chief, Mr. Richardson has performed his duties, taken as a whole, in a superior manner. His timely and efficient preparation of intelligence annexes, logistic and fiscal requirements and reports has been particularly outstanding. During three to four months of the past year, Mr. Richardson has acted as Branch Chief. The review of Branch operations under Mr. Richardson's direction, during the writer's absence, indicated his complete competence in supervising Branch activities. His supervision of the planning and preparation for approval of basic plans and projects of the [ ] desk chiefs has been superior. Mr. Richardson also participated in the planning and dispatch of a difficult operational mission, acting in the capacity of Senior Case Officer. On this mission his liaison with representatives of one of the Military Services was conducted in a manner which enhanced cooperation between that Service and this Agency.

SECRET  
SECURITY INFORMATION

12.	<p>IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING?</p> <p>Mr. Richardson's performance was noticeably outstanding with respect to his thorough knowledge of every activity of the Branch. He was in position to assume direction of Branch activities at any time. He also kept himself thoroughly briefed on Division policies and planning in order to give timely instruction and guidance to the Branch overseas stations.</p>
13.	<p>ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?</p> <p>Mr. Richardson has a very thorough background in two (2) languages, [redacted] He would benefit substantially by learning the Russian language. He is meticulous with respect to his attention to details, sometimes to the point of concealing the broader picture from his view. It would be well for Mr. Richardson to direct his attention to the broad scope of Branch activities rather than to concentrate on its details.</p>
14.	<p>COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.</p> <p>Mr. Richardson is fully qualified to assume the duties of the chief SR Division representative at a field station. In order to assume this responsibility in the most efficient manner, it is recommended that Mr. Richardson serve a minimum period of time of approximately six (6) months as the assistant to the present chief of the field station.</p>
15.	<p>ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)</p> <p>Mr. Richardson could serve effectively in a staff function for either FI or PP activities. This does not mean, however, that his present duties are not better suited to his qualifications.</p>
16.	<p>WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?</p> <p>Mr. Richardson has already been recommended for overseas assignment in the Far East during the past year. He has area knowledge and command of the [redacted] language, having served previously with the United States Army. His duties at Headquarters have been so pressing that his departure for overseas assignment is being delayed until an adequate replacement may be trained.</p>
17.	<p>IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.</p>
18.	<p>THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.</p>
<div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="text-align: center;"><p><i>March 31 1953</i></p><p>DATE</p></div><div style="text-align: center;"><p><i>George G. Kiser</i></p><p>SIGNATURE OF SUPERVISOR</p></div></div>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"><div style="text-align: center;"><p><i>1 March 30 1953</i></p><p>DATE</p></div><div style="text-align: center;"><p>[redacted]</p><p>SIGNATURE OF REVIEWING OFFICIAL</p></div></div>	
19.	<p>I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in Item 20.)</p>
20.	<p>COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)</p>

SECRET

WARNING—Do not fill out this form until you have read all instructions.		<b>DESIGNATION OF BENEFICIARY</b> <b>CIVIL SERVICE RETIREMENT SYSTEM</b>		STANDARD FORM NO. 2808 JUNE 1966 U.S. Civil Service Commission FPM Supplement 831-1 2808-104	
<b>A. INFORMATION CONCERNING THE DESIGNATOR</b>					
1. NAME (Last) (First) (Middle) <b>RICHARDSON Jacques Gabriel</b>			2. DATE OF BIRTH (Month) (Day) (Year) <b>JAN 20 1924</b>		3. SOCIAL SECURITY NUMBER [REDACTED]
4. DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU OR DIVISION [REDACTED]				5. CLAIM NUMBER IF RETIRED <b>CSA—</b>	
I, the employee or former employee identified above, canceling any and all previous designations of beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any lump-sum benefit which may become payable under the Civil Service Retirement Act after my death. I understand that this designation of beneficiary will not affect the rights of any survivors who may qualify for annuity benefits after my death, and that this designation will remain in full force and effect unless or until canceled by me in writing.					
<b>B. INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES</b>					
TYPE OR PRINT FIRST NAME, MIDDLE INITIAL, AND LAST NAME OF EACH BENEFICIARY		TYPE OR PRINT ADDRESS (Including ZIP Code) OF EACH BENEFICIARY		RELATIONSHIP	SHARE TO BE PAID TO EACH BENEFICIARY (See Example)
Pamela A. Richardson		5 villa Madrid, [REDACTED]		Dau	One half
Michelle D. Richardson		5 villa Madrid, [REDACTED]		Dau	One half
I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary or beneficiaries who may die before a lump-sum benefit becomes payable shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. If none of the beneficiaries are alive when the lump-sum benefit becomes payable, this designation shall be void.					
January 12, 1972 DATE OF THIS DESIGNATION (MONTH) (DAY) (YEAR)					
(SIGNATURE OF DESIGNATOR—DO NOT PRINT)					
<b>C. WITNESSES</b> (1 witness is ineligible to receive payment as a beneficiary)					
INSTRUMENT WAS SIGNED IN OUR PRESENCE.					
[REDACTED]		13219 Alantown Ave		Rockville, Md.	
(SIGNATURE OF WITNESS—DO NOT PRINT)		(NUMBER AND STREET)		(CITY, STATE, AND ZIP CODE)	
[REDACTED]		[REDACTED]		[REDACTED]	
PRINT OR TYPE YOUR NAME AND ADDRESS (Including ZIP Code) TO INSURE RETURN OF COPY <b>Jacques G. Richardson</b> <b>722 South Royal Street</b> <b>Alexandria VA 22134</b>				(Reserved for Receiving Stamp of U. S. Civil Service Commission) MAR 2 1972 PERSONAL AFFAIRS	

THIS DUPLICATE WILL BE RETURNED TO YOU

Standard Form No. 1152  
Form prescribed by:  
Comptroller General, U. S.  
October 23, 1950  
(Gen. Reg. No. 104, Supp. No. 1)

# DESIGNATION OF BENEFICIARY UNPAID COMPENSATION OF DECEASED CIVILIAN EMPLOYEE

**IMPORTANT**  
Read instructions  
on back of duplicate  
before filling in this form

## INFORMATION CONCERNING THE EMPLOYEE:

NAME—	(Last)	(First)	(Middle)	DATE OF BIRTH (Month, day, year)
RICHARDSON	Jacques	Gabriel		Jan 20 1924

## DEPARTMENT OR AGENCY IN WHICH EMPLOYED

(Department or agency)

(Bureau)

(Division)

I, the employee identified above, canceling any and all previous Designations of Beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any UNPAID COMPENSATION due and payable under existing law after my death. I understand that this Designation of Beneficiary relates solely to Unpaid Compensation as defined in section 2 of the act of August 3, 1950, Public Law 636, and in no wise will affect the disposition of any benefit which may become payable under the Retirement Act applicable to my Government service. I further understand that this Designation of Beneficiary will remain in full force and effect, unless or until canceled by me in writing, so long as I am continuously employed in the above department or agency.

## INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Pamela A. Richardson		Dau	One half
Michelle D. Richardson		Dau	One half

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change any designation of beneficiary at any time in the manner and form prescribed by the Comptroller General of the United States, and without knowledge or consent of the beneficiary.

January 12 1972

(Date of execution—month, day, year)

(Signature of employee)

## WITNESSES TO SIGNATURE:

(Signature of witness)

(Signature of witness)

13219 Monticello Ave.

(Number and street)

Locksville N.C.

(City, zone number, and State)

(Signature of witness)

(Number and street)

(City, zone number, and State)

## PRINT OR TYPE NAME AND ADDRESS OF EMPLOYEE

Jacques G. Richardson  
722 South Royal Street  
Alexandria VA 22314

## THIS SPACE RESERVED FOR RECEIVING DATA FROM EMPLOYING AGENCY

20 JAN 11 1972

PERSONNEL AFFAIRS  
(Indicate date and by whom received)

DELIVER BOTH COPIES TO THE PROPER OFFICER OF YOUR AGENCY—DUPLICATE WILL BE NOTED AND RETURNED

**DUPLICATE**

16-52210-1

Standard Form No. 84  
January 1948  
U.S. Civil Service Commission  
FPM Supplement 990-1  
54-104

**DESIGNATION OF BENEFICIARY  
FEDERAL EMPLOYEES GROUP LIFE  
INSURANCE PROGRAM**

**IMPORTANT**  
Read instructions  
on back of duplicate:  
before filling in this form

**INFORMATION CONCERNING THE INSURED:**

NAME (Last) (First) (Middle) DATE OF BIRTH (Month, day, year)

PLACE AN "X" IN THE APPROPRIATE BOX BELOW TO SHOW WHETHER YOU ARE:

☐ AN EMPLOYEE ☐ RETIRED, OR AN APPLICANT FOR RETIREMENT ☐ RECEIVING FEDERAL EMPLOYEES' COMPENSATION BENEFITS OR AN APPLICANT FOR SUCH BENEFITS

IF YOU ARE RETIRED OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION BENEFITS, GIVE YOUR "CSA" "CSL" "A" or "X" NUMBER

(CSA, CSL, A, or X number)

DEPARTMENT OR AGENCY IN WHICH PRESENTLY EMPLOYED (If retired, former department or agency):

(Department or agency)

(Bureau)

(Division)

(Location—City, State, and ZIP Code)

I, the individual identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees Group Life Insurance Program heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of LIFE INSURANCE and ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as it is automatically canceled (see regulation "f" on reverse side of duplicate copy).

**INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES (SEE EXAMPLES OF DESIGNATIONS):**

Type or print first name, middle initial, and last name of each beneficiary	Type or print address (including ZIP Code) of each beneficiary	Relationship	Share to be paid to each beneficiary

For each type of insurance (regular and optional): (1) I hereby direct, unless otherwise indicated above, that if more than one beneficiary is named, the share of any beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. (2) I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change this Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

(Date of execution—month, day, year)

(Signature of insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

(Signature of witness) 13219 Monticello Rockville, Md.  
(Number and street) (City, State, and ZIP Code)

(Signature of witness)

(Number and street)

(City, State, and ZIP Code)

PRINT OR TYPE NAME AND ADDRESS (including ZIP Code) OF INSURED

THIS SPACE RESERVED FOR RECEIVING AGENCY

(Indicate date and by whom received)

SEE REVERSE SIDE OF DUPLICATE COPY FOR INSTRUCTIONS ON WHERE TO FILE THESE FORMS.  
DO NOT FILE WITH THE OFFICE OF FEDERAL EMPLOYEES' GROUP LIFE INSURANCE.

**DUPLICATE**

<b>DISPATCH</b>		CLASSIFICATION <b>SECRET</b>	PROCESSING ACTION
TO	Chief, European Division		MARKED FOR INDEXING
INFO.			NO INDEXING REQUIRED
FROM	Chief of Station, <span style="border: 1px solid black; padding: 0 20px;"> </span>		ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT	ADMIN/Personnel <del>                    </del> - Change of Beneficiary Forms <i>4A</i>		
ACTION REQUIRED - REFERENCES <i>Richardson, Jacques</i>			
<p>Forwarded herewith and under separate cover are change of beneficiary forms completed by <del>                    </del>. Since <del>                    </del> will be at Headquarters during home leave towards the end of February, it is suggested that he be contacted during his TDY if additional information is required.</p> <p style="text-align: right;"><i>Carolyn A. Tanzola</i> Carolyn A. TANZOLA</p>			
<p>Attachments:</p> <ol style="list-style-type: none"> <li>1. Flight &amp; Accident Plan, h/w <del>                    </del> by <i>SF/PAC</i></li> <li>2. SF-2808, U/S/C via TNP</li> <li>3. SF-54, U/S/C via TNP</li> <li>4. SF-1152, U/S/C via TNP</li> </ol>			
<p>Distribution:</p> <p>3-Chief, Eur-Div w/att #1-h/w; #2,3,4-usc-tnp</p> <p style="text-align: right;"><b>CABLE BOARD</b> 21 FEB 1972</p> <p style="text-align: right;"><i>Dick</i></p>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER		DATE
<div style="border: 1px solid black; padding: 2px; width: fit-content;">GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION</div>	OFPT-17469		10 February 1972
	CLASSIFICATION <b>SECRET</b>		HQS FILE NUMBER



**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) <i>Richardson, George</i>	DATE OF BIRTH (month, day, year) <i>20 Jan 1924</i>	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



**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



**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



**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 STUB." THEN RETURN  
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print) *Richardson, George*

DATE *1 March 1968*

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

UNITED STATES GOVERNMENT  
89. HJ ch 3 61 24V

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

STANDARD FORM NO. 176-2  
JANUARY 1955  
(For use until April 14, 1968)  
176-222

**SECRET**

S. 101-101

31 July 1962

Date

THIS IS TO CERTIFY THAT THE PROVISIONS OF THE PROVISIONS  
OF REGULATION 101-101 (101-101) CONCERNING  
THE PERSONAL OFFICE OF THE EMPLOYEES OVERSEAS.

[REDACTED]

S. 101-101

S. 101-101

CAP'S SECRETARIAT DISSEMINATION		CLASSIFIED MESSAGE	TOTAL COPIES 17	ROUTING AND/OR INITIAL SET BY		
PERSON UNIT NOTIFIED		<b>SECRET</b> (When Filled In) REPRODUCTION OF THIS COPY PROHIBITED	GROUP 1	5		
ADVANCE COPY <input type="checkbox"/> ISSUED <input type="checkbox"/> SLOTTED			EXEMPT FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION	2	6	
BY _____ AT _____ Z			3	7		
DISSEM BY <u>92</u> PER _____			4	8		
ACTION UNIT		FILE, VR				
ACTION NO. <u>071</u>		<u>9/10/72</u> <u>9/10/72</u> <u>9/10/72</u> <u>9/10/72</u> <u>9/10/72</u>				

SECRET 011654Z JUN 72 CITE [REDACTED] (RILANDER ACTING)

DIRECTOR

1 JUN IN 625469

RYBAT ADMIN PERS TOPSY WODEEP WOGAME

REF: DIRECTOR 271979

1. APPRECIATE REF ACTION WHICH WILL HELP AVOID ANY SECURITY PROBLEM FOR [REDACTED] RE PARA TWO REF THERE IS NO CHANCE THAT [REDACTED] WILL QUERY FEDERAL RECORDS CENTER DIRECTLY. [REDACTED] CONDUCTS NO APPLICANT INVESTIGATIONS ITSELF. SECURITY CLEARANCE FOR AMERICAN APPLICANTS IS U.S. GOVT, NOT [REDACTED], REQUIREMENT. THEREFORE, BELIEVE UNNECESSARY TO TAKE ANY FURTHER ACTION TO BACKSTOP PRIOR EMPLOYMENT. ONLY REQUIREMENT NOW IS FOR ROUTING REPORT FROM [REDACTED]

[REDACTED] INDICATING FAVORABLE SECURITY DETERMINATION

FOR [REDACTED]

2. NO FILE. GP-1

SECRET

SECRET

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
<i>Retention Request</i> DO NOT COMPLETE FOR HEADQUARTERS USE ONLY				
NAME OF EMPLOYEE (Last, first, middle initial only if SA)		DATE (from item S-2)	NAME OF SUPERVISOR (true)	DATE (from item S-2)
[REDACTED]		3 Feb. 1969	David Murphy	3 Feb. 1969
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
20 February 1969		TM-798947		
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
20 J 1924	CS	S&T project manager, Area Ops Off, GS 15	[REDACTED]	LPCOVER
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	
5 Sep 1967	Please see 11B	Summer 1970	o/a 15 August 1970	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
3: (at that time) 42, 19 and 16				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
<p>My younger daughter should graduate from high school in Europe in June, 1970. Because she should not be transferred at that critical scholastic juncture, I would like to remain in the field another nine months to see her through her senior year.</p> <p>In my next assignment, I would like to use my fluent [REDACTED] from time to time, if possible.</p>				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)				
<ul style="list-style-type: none"> <li>I planned, established and operated a long-range S&amp;T spotting-assessment activity against sensitive targets, and a shorter-range similar local activity in an adverse political climate.</li> <li>I planned, developed and exploited an adapted [REDACTED] to mask the operational activity, integrated into the further-ranging overall activities of a major Station.</li> </ul>				
[REDACTED]				
<ul style="list-style-type: none"> <li>I assisted other Stations and Bases, at their request, in spotting-assessment activities, in local search and surveillance activities, and in recruitment.</li> </ul>				
[REDACTED]				
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
<p>I would like to take (a) the seniormost management course offered by or through the Organization as well as (b) a review course of activities within the CS and the Organization as a whole.</p> <p>In addition, I would also like to (c) audit, at least, the S&amp;T course, if that is still being offered.</p> <p>If (a) is possible through a civil school away from Headquarters, I would have no objection to the displacement involved.</p>				

## 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.

First choice: to manage a large-scale [redacted] project in another [redacted] -speaking, technically advanced area (such as metropolitan [redacted] or [redacted]).

Second choice: chief of station or base [redacted] in an appropriate area.

Third choice: to be assigned to Staff training, preferably training (a) senior unit or project managers or (b) JCTs.

Fourth choice: to be assigned to Staff personnel work -- above the Division level -- where new personnel are screened, tested and evaluated, then assigned.

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 nine MONTHS AT CURRENT STATION TO June 15, 1970 (DATE)

☐ BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STATE 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, with different responsibilities.

## 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:

We are anxious to have this employee remain in his present assignment until 1970. You will note his first choice in para 11-A, to manage a large scale [redacted] project. It is possible we will have such a requirement here by 1970, but cannot yet be definite. If this develops positively, we will discuss with the employee.

## 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.

EUR Division recommends that ~~the above~~ request for an extension of his current tour until June 1970 be approved.

DATE 3/11/69 TITLE C/E/PERS SIGNATURE [redacted]

## FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT

Extended to June 1970

15. EMPLOYEE NOTIFIED BY DISPATCH NO.

CEPS-1126 DATED: 11 July 69

CABLE NO. \_\_\_\_\_

DATED: \_\_\_\_\_

CAREER SERVICE REPRESENTATIVE:

(SIGNATURE)

Charles B. Edwards

7/16/69

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FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY			
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (Type)	DATE (from item 5-2)	NAME OF SUPERVISOR (Type)	DATE (from item 5-2)
<i>[Signature]</i>	9 Dec 1963	[ ]	27 Dec 1963
NAME OF EMPLOYEE OF WHOM OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			
[ ]			
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE	7A. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
20 Jan 1924	GS-15	Operations Officer, GS-15	10 September 1962
4. SERVICE DESIGNATION (if known)		5. CURRENT STATION OR FIELD BASE	7B. EXPECTED DATE OF DEPARTURE FROM FIELD
		Paris	September 1965
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7C. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>Staff agent assigned to a major overseas station, exploiting the [ ]</p> <p>I take my instructions from a section chief within the station, and report in writing on the progress of my [ ] development and its operational exploitation.</p> <p>For operational reasons, I develop and assess operational leads in the FI, CI and CA areas, principally against denied area targets. I also handle local investigations and such cases as the station determines will fit [ ] or which I can otherwise handle in alias. I travel to other field stations to handle such tasks as they request or Hq directs. I handle all [ ] tasks as they appear.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
<p>A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.</p> <p>I would like to continue to serve essentially in the same capacity as described above, although I would like eventually to add more supervisory and managerial functions to my responsibilities. I would like to expand the operating base [ ] by taking on several journeymen case officers to work with me against both denied area and host country targets, and to make [ ] of more versatile use to both the station and to KUDCOVE as a whole.</p> <p>My second choice would be to return to Hq, and use the knowledge and experience I have gained in my present job to (1) select staff personnel who will be placed in [ ], (2) select the [ ] proper, (3) train our personnel for the proper discharge of their total responsibilities [ ]</p>			
<p>B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):</p> <p>The completion of work toward a master's or doctor's degree in the physical or life sciences, or in the management/administration of the sciences and their personnel.</p>			

SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:	
<input type="checkbox"/> RETURN TO MY CURRENT STATION, after a one-year extension of my present tour	
<input checked="" type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY, WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS.	
INDICATE CHOICE OF COMPONENT:	
1ST. CHOICE <u>OCB</u> 2ND. CHOICE <u>Cover Group</u> 3RD. CHOICE <u>Office/Personnel</u>	
<input type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION, WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION.	
INDICATE CHOICE OF AREA OR SPECIFIC STATION, BASED ON QUALIFICATION:	
1ST. CHOICE <u>                    </u> 2ND. CHOICE <u>                    </u> 3RD. CHOICE <u>                    </u>	
10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? <span style="float: right;">INDICATE NUMBER OF WORK DAYS <u>25</u></span>	
11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:	
Wife, will be 37 in 1965; two daughters, 15 and 12 in 1965	
11A. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT	
Next post should have high school facilities teaching in French or in English.	
12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.	
TO BE COMPLETED BY SUPERVISOR AT FIELD STATION	
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:	
<p>Chief, External concurs in subject's wish for one year extension and return for second tour after home leave in the fall of 1965. However, subject's wish as expressed in 9.A. of having case officers working under him is not feasible at this time.</p>	
14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.	
TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS	
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:	
<p>Recommend Home Leave and return for another tour.</p> <p style="text-align: right;">SR Concurs. <i>A. B. [Signature]</i> 2-20-64</p>	
16. NAME OF CAREER SERVICE OFFICER OR PERSONNEL OFFICER	SIGNATURE <u>                                    </u>
DATE <u>6 February 1964</u>	<u>                                    </u> (E.C.D.)
FOR USE OF CAREER SERVICE	
17. EMPLOYEE <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE <u>7995</u> DISPATCH NO. <u>OFPS-</u> CABLE NO. <u>                    </u>
19. <u>                    </u> OR PRINTED NAME	20. SIGNATURE <u>                                    </u>
21. TITLE <u>Secretary, CS Agent Panel</u>	22. DATE: <u>26 February 1964</u>
23. COMMENTS	
Approved extension of present tour to September 1965, followed by home leave, and then second tour.	

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CONTRACT INFORMATION AND CHECK LIST			CASE OFFICER		DIVISION	
INSTRUCTIONS: Use R 10-10.2 and R 10-10.3 for guidance. Complete all items, inserting NA when items are not applicable. Forward original and TWO copies for preparation of contract.			X6356		SR	
TELEPHONE EXTENSION			For contract info		DATE	
					9 July 1962	
SECTION I GENERAL CHIL BY JOHNSON X59-3						
1. NAME <input checked="" type="checkbox"/> PSEUDO <input type="checkbox"/> TRUE <i>Richardson, Eugene</i>		2A. PROJECT NA		3. ALLOTMENT NO. 3234-1008-1000		4. SLOT NO. 240
5. PREVIOUS CIA PSEUDONYM OR ALIASES		2B. PERMANENT STATION		3A. FUNDS		
				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
		6. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) Staff Employee since 1949				
7. SECURITY CLEARANCE (Type and date) SI		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		
		<input type="checkbox"/> CONTAINED <input checked="" type="checkbox"/> INITIATED <input type="checkbox"/> NOT DES'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				10. PROPOSED CATEGORY (Contract agent, contract employee, etc.)		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO						
SECTION II PERSONAL DATA						
11. CITIZENSHIP U.S.		12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO		13. AGE 38		14. DATE OF BIRTH (Month, day, year) January 20, 1924
15. LEGAL RESIDENCE (City and state or country) Alexandria, Virginia				16. CURRENT RESIDENCE (City and state or country) Alexandria, Virginia		
17. MARITAL STATUS (Check as appropriate) <input checked="" 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:  Three - Wife, age 34 Daughter, age 8 Daughter, Age 11				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 RELATIONSHIP:		
SECTION III U.S. MILITARY STATUS						
20. RESERVE NA		21. VETERAN Yes		22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)		
23. BRANCH OF SERVICE U. S. Army		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 type="checkbox"/> NO
SECTION IV COMPENSATION						
27. BASIC SALARY Pay entitlements equating to GS-14 (step 6) including premium pay \$13,570		28. POST DIFFERENTIAL		29. COVER (Breakdown, if any)		30. FEDERAL TAX WITHHOLDING
						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 In accordance with regulations		32. POST		33. OTHER		
34. COVER (Breakdown, if any)						
SECTION VI TRAVEL						
35. TYPES <input checked="" type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL				36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
37. HME TO BE SHIPPED		37A. HME TO BE STORED		38. PERSONAL VEHICLE TO BE SHIPPED		39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH Wife, U. S. Citizen, age 34, DOB 19 June 1928 Daughter, U. S. Citizen, age 8, DOB 5 September 1953 Daughter, U. S. Citizen, age 11, DOB September 1950						
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input checked="" type="checkbox"/> COVER POLICIES AND PROCEDURES						
SECTION VII OPERATIONAL EXPENSES						
42. PURCHASE OF INFORMATION As authorized		43. ENTERTAINMENT As authorized		44. OTHER As authorized		
45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH						



SECRET

CONTRACT INFORMATION AND CHECK LIST (CONTINUED)		CASE OFFICER <div style="border: 1px solid black; padding: 2px;">X6356</div>	DIVISION SR
NOTE: SEE INSTRUCTIONS ON FIRST SHEET.		For contract info	DATE 9 July 1962
SECTION VIII OTHER BENEFITS call by Johnson X523			
48. BENEFITS (See R 20-615, R 20-620, R 20-670, R 20-1000, and HB 20-620-1, HB 20-1000-1 and of successor regulations for benefits applicable to various categories of contract personnel.)			
All Staff Employee benefits			
SECTION IX COVER ACTIVITY			
47. STATUS (Check)	<input type="checkbox"/> PROPOSED <input checked="" type="checkbox"/> ESTABLISHED	49. TYPE (Check)	<input type="checkbox"/> PROPRIETARY <input type="checkbox"/> SUBSIDIZED <input type="checkbox"/> CULTURAL <input type="checkbox"/> EDUCATIONAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> MILITARY <input type="checkbox"/> TOURIST <input type="checkbox"/> OTHER
49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL			
SECTION X OFFSET OF INCOME			
50. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.) <input checked="" type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input type="checkbox"/> NONE			
SECTION XI TERM			
51. DURATION	52. EFFECTIVE DATE	53. RENEWABLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
DAYS MONTHS YEARS			
54. TERMINATION NOTICE (Number of days)		55. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION <input type="checkbox"/> YES <input type="checkbox"/> NO	
SECTION XII FUNCTION			
56. PRIMARY FUNCTION (CI, FI, PP, other) FI and CA			
SECTION XIII DUTIES			
57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED  Handling and supervision of field agents already recruited. Spotting, assessment and development of agent candidates or projects. Recruitment of agent candidates outside _____ when necessary. Clandestine support of own and other station operations.			
SECTION XIV QUALIFICATIONS			
58. EXPERIENCE Photographic equipment salesman Newspaper assistant <del>XXXX</del> editor Assistant to planning division of housing authority of a major city Operations Officer for past 12 years			
59. EDUCATION			
(Check Highest Level Attained)	GRADE SCHOOL <input type="checkbox"/> HIGH SCHOOL GRADUATE <input type="checkbox"/> TRADE SCHOOL GRADUATE <input type="checkbox"/>		
	BUSINESS SCHOOL GRADUATE <input type="checkbox"/> COMMERCIAL SCHOOL GRADUATE <input type="checkbox"/>		
	COLLEGE (No degree) <input checked="" type="checkbox"/> COLLEGE DEGREE <input type="checkbox"/> POST GRADUATE <input type="checkbox"/> MA <input type="checkbox"/> PHD <input type="checkbox"/>		
60. LANGUAGE COMPETENCY			
(Check Appropriate Degree Competency)	LANGUAGE	SPEAK	WRITE
		FLUENT AVERAGE POOR	FLUENT AVERAGE POOR
	French	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Japanese	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
	Russian	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
61. INDIVIDUAL'S COUNTRY OF ORIGIN USA			
62. AREA KNOWLEDGE Canada, Japan, Western Europe thru residence, study and travel			
SECTION XV EMPLOYMENT PRIOR TO CIA			
63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING Newspaper assistant editor - \$2,100 Assistant to planning division of housing authority \$3,100			
SECTION XVI ADDITIONAL INFORMATION			
64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)			

☐ OVER

APPROVAL

**SECRET**

9 December 1958

MEMORANDUM FOR: Secretary, CS/CSB


SUBJECT : Recommendation for Promotion to Grade GS-15 -  
Jacques G. RICHARDSON

REFERENCE : Your memorandum dated 8 October 1958

1. The SR Division and the Chief of Station, [redacted] attached) recommend the promotion of Jacques G. Richardson to GS-15.

2. Mr. Richardson was last promoted 16 January 1955. On 17 February 1955 he arrived in [redacted] to serve as the senior SR officer in the FE field area, his present assignment. In this position he has continued to display qualities of leadership, initiative, imagination and thoroughness which resulted in his rapid rise in the Agency.

3. The very facts of Mr. Richardson's youth in relation to his responsibilities and the fact that promotion to his present level has been rapid, caused the Division and the Chief of Station, [redacted] to hold until this time a recommendation for his promotion which was submitted in June 1957. Most careful consideration has convinced us that not only is Mr. Richardson deserving of the recommended promotion, but his elevation to the higher grade will be in the best interest of the Career Service and meet definite Division requirements for a senior officer at the GS-15 level.

  
CHARLES KATER  
Acting Chief, SR Division

Distribution:  
Orig & 6 - Addr

**SECRET**

OFFICIAL

CLASSIFICATION

DISPATCH

TO Chief, SR		INFORMATION ADDRESSEE Chief, FK	
FROM Chief of Station, [REDACTED]			
SUBJECT REDWOOD/ADMINISTRATIVE Promotion of [REDACTED]		HEADQUARTERS FILE NO.	DISPATCH SYMBOL AND NO. FJTW-1950
			DATE

## REFERENCE(S)

FJTW-11531 (RYBAT), dated 11 October 1957  
ACTION REQUIRED: See paragraph 2

Richardson - 1  
Baker - 2  
Murray - 3  
Nelson - 4

1. In line with paragraph 2 of Reference, after a period of six months we submitted an additional promotion fitness report on [REDACTED] under cover of [REDACTED] dated 26 May 1958. Inasmuch as [REDACTED] was then at Headquarters on TDY, we requested that he review this fitness report and assured that in doing so he would also discuss with [REDACTED] promotion, which both he and [REDACTED] felt was to be strongly recommended.

2. [REDACTED] was, however, not shown this fitness report at Headquarters, nor did he have the opportunity to discuss [REDACTED]'s promotion with [REDACTED]. In reviewing our records we are now concerned at the possibility of some administrative slip-up and would appreciate a word of advice as to how this promotion action is proceeding. We would like to reiterate that we now have not the slightest hesitation in recommending [REDACTED] for promotion and find that the fitness report submitted with [REDACTED] still reflects our current high appreciation of his abilities and progress.

20 November 1958

Distributions:  
2 - Chief, SR  
2 - Chief, FK

✓ Pen 15/Pen  
Pen

☐ CONTINUED →

OFFICIAL DISPATCH

SECRET

COPY  
Attachment to  
FJTA-19609

MEMORANDUM No. 360

18 June 1957

TO : Chief of Station

FROM : Chief, Soviet Branch

SUBJECT: [REDACTED] - Recommendation for Promotion  
② Jacques RICHARDSON

1. [REDACTED] has been under my supervision as Deputy and Case Officer for approximately fifteen months. Based on the knowledge of [REDACTED] as an individual gained during this period and upon his actual performance, I recommend that he be entered for consideration on the SR Division GS-14 to GS-15 promotion list at this time - June 1957. The slot and job which he now occupies, Chief, Soviet Branch, is, of course, adequate to accommodate such a promotion.

2. [REDACTED] operational performance has been outstanding and notably versatile during this period. He has engaged primarily in liaison and has been personally effective in terms of results achieved almost daily, in terms of reports, operational data, and joint enterprises; while, overall, he has established enduring professional relationships from which the organization as a whole should benefit for some time to come. In addition, owing in large part to unique personal talents, linguistic and otherwise, [REDACTED] has handled a number of unilateral cases most effectively. In the office, too, as well as in face-to-face operational situations, [REDACTED] has been outstanding. He has a flair for and a facility with the written word as evidenced by the amount of general and particular correspondence which he has initiated, and he knows the organizational "drill" intimately and from way back. Thus, I feel that he is qualified for the recommended promotion by ability and experience in both the internal and external aspects of the profession.

3. Relative to the more personal characteristics involved in the term managerial ability, judgments are necessarily more subjective but here, too, I consider [REDACTED] to be qualified in maturity, in judgment, and in experience. He would most certainly be a supervisor who could perform all the chores or handle all the situations which he would be calling upon subordinates to take care of, in itself, the beginning of any good supervisory relationship. In actual fact, he has had considerable experience in this regard already and the principal shortcoming I have noticed is a tendency to "carry" others by an extension of his own industry. [REDACTED] is not without his difficulties in the area of personal relationships. He is a purist at times and manifestly impatient in certain human situations where a shrug of the shoulders would be the

SECRET

Page 2.

**SECRET**

best reply. These characteristics do not always make for the best personal relations but are frequently obviated by intellect and above all are correctable and are being corrected.

4. In sum, ~~his~~ qualifications, broad experience and proven abilities dominate his age, the only factor militating against a promotion at this time. It is therefore my sincere recommendation that a promotion recommendation be forwarded to Headquarters for consideration in the current mid-year lists.

Edward MARFLIN ~~SECRET~~

**SECRET**

9 December 1958

MEMORANDUM FOR: Secretary, CI/CSS

SUBJECT: Recommendation for Promotion to Grade GS-15 -  
Jacques G. RICHARDSON

REFERENCE: New memorandum dated 8 October 1958

1. The SA Division and the Chief of Station, [redacted] attached) recommend the promotion of Jacques G. Richardson to GS-15.

2. Mr. Richardson was last promoted 16 January 1955. On 17 February 1955 he arrived in [redacted] to serve as the senior SA officer in the FS field area, his present assignment. In this position he has continued to display qualities of leadership, initiative, imagination and thoroughness which resulted in his rapid rise in the Agency.

3. The very facts of Mr. Richardson's youth in relation to his responsibilities and the fact that promotion to his present level has been rapid, caused the Division and the Chief of Station, [redacted] to hold until this time a recommendation for his promotion which was submitted in June 1957. Most careful consideration has convinced us that not only is Mr. Richardson deserving of the recommended promotion, but his elevation to the higher grade will be in the best interest of the Career Service and meet definite Division requirements for a senior officer at the GS-15 level.

[redacted]  
Acting Chief, SA Division

Distribution:

Orig & 6 - Air

5-121

**C O P Y**

**FJTT-1950**

**TO: Chief, SR**

**25 November 1958**

**FROM: Chief of Station, [ ]**

**SUBJECT: Promotion of Jacques G. RICHARDSON**

**REFERENCE: FJTW-11531 (RIBAT) dated 11 Oct 1957**

1. In line with paragraph 2 of Reference, after a period of six months we submitted an additional promotion fitness report on RICHARDSON under cover of [ ] dated 28 May 1958. Inasmuch as Baker was then at Headquarters on TDY, we requested that he review this fitness report and assumed that in doing so he would also discuss with Maury RICHARDSON's promotion, which both he and Nelson felt was to be strongly recommended.

2. Baker was, however, not shown this fitness report at Headquarters, nor did he have the opportunity to discuss RICHARDSON's promotion with Maury. In reviewing our records we are now concerned at the possibility of some administrative slip-up and would appreciate a word of advice as to how this promotion action is proceeding. We would like to reiterate that we now have not the slightest hesitation in recommending RICHARDSON for promotion and find that the fitness report submitted with [ ] still reflects our current high appreciation of his abilities and progress.

**WILLIAM E. NELSON**

**SECRET**

COPY  
Attachment to  
FJTA-19609

MEMORANDUM No. 360

18 June 1957

TO: Chief of Station

FROM: Chief, Soviet Branch

SUBJECT: Jacques RICHARDSON - Recommendation for Promotion

1. Jacques Richardson has been under my supervision as Deputy and Case Officer for approximately fifteen months. Based on the knowledge of Richardson as an individual gained during this period and upon his actual performance, I recommend that he be entered for consideration on the SR Division GS-14 to GS-15 promotion list at this time - June 1957. The slot and job which he now occupies, Chief, Soviet Branch, is, of course, adequate to accommodate such a promotion.

2. Richardson's operational performance has been outstanding and notably versatile during this period. He has engaged primarily in liaison and has been personally effective in terms of results achieved almost daily, in terms of reports, operational data, and joint enterprise; while, overall, he has established enduring professional relationships from which the organization as a whole should benefit for some time to come. In addition, owing in large part to unique personal talents, linguistic and otherwise, Richardson has handled a number of unilateral cases most effectively. In the office, too, as well as in face-to-face operational situations, Richardson has been outstanding. He has a flair for and a facility with the written word as evidenced by the amount of general and particular correspondence which he has initiated, and he knows the organizational "drill" intimately and from way back. Thus, I feel that he is qualified for the recommended promotion by ability and experience in both the internal and external aspects of the profession.

3. Relative to the more personal characteristics involved in the term managerial ability, judgments are necessarily more subjective but here, too, I consider Richardson to be qualified in maturity, in judgment, and in experience. He would most certainly be a supervisor who could perform all the chores or handle all the situations which he would be calling upon subordinates to take care of, in itself, the beginning of any good supervisory relationship. In actual fact, he has had considerable experience in this regard already and the principal shortcoming I have noticed is a tendency to "carry" others by an extension of his own industry. Richardson is not without his difficulties in the area of personal relationships. He is a purist at times and manifestly impatient in certain human situations where a shrug of the shoulders would be the best reply. These characteristics do not always make for the best personal relationships but are frequently obviated by intellect and above all are correctable and are being corrected.



E. In sum, Richardson's qualifications, broad experience and proven abilities dominate his age, the only factor militating against a promotion at this time. It is therefore my sincere recommendation that a promotion recommendation be forwarded to Headquarters for consideration in the current mid-year lists.

EDWARD MARELIUS

SECRET

1 June 1959

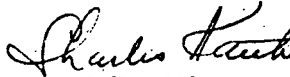
MEMORANDUM FOR: Chairman, CS Career Service Board

SUBJECT : Nominations for Promotion to GS-15

REFERENCE : Memorandum dated 14 May 1958 from  
Secretary, CS Career Service Board

1. After reviewing GS-14 employees assigned to the SR Division, I wish to again recommend the promotion of Jacques Richardson, Chief, Soviet Branch, [ ] to GS-15. I concur also in the attached recommendation for the promotion of [ ] prepared by the Chief of Base, Berlin.

2. The Chief of Station, [ ] and I recommended Mr. Richardson's promotion in December 1958. This earlier recommendation presented the personal qualities of Mr. Richardson. I wish simply to point out at this time that since early 1954, Mr. Richardson has more than fully discharged responsibilities at the GS-15 level. I believe that it is definitely time to elevate him to the level at which he has been performing more than satisfactorily for over 5½ years.

  
CHARLES KATEK  
Acting Chief, SR Division

Distributions:  
Orig & 6 Addressee w/att

STANDARD FORM 144  
JANUARY 1952  
U. S. CIVIL SERVICE COMMISSION  
FFM CHAPTERS LI AND R3

# STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

**IMPORTANT:** The information on this form will be used in determining creditable service for leave purposes and retention credits for reduction in force. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I—EMPLOYEE'S STATEMENT										PART II—THIS COLUMN IS FOR PERSONNEL OFFICE USE			
1. NAME (Last, first, middle initial)						2. DATE OF BIRTH				3. RETENTION GROUP			
RICHARDSON, Jacques C.						20 January 1921							
4. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service.)										10. CSC STATUS (For permanent employees only) <input type="checkbox"/> YES <input type="checkbox"/> NO			
NAME AND LOCATION OF AGENCY			FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN		11. SERVICE YEAR MONTH DAY		
			YEAR	MONTH	DAY	YEAR	MONTH	DAY					
None CIA			1949			11							
			20										
4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."													
BRANCH			FROM—			TO—			DISCHARGE (Hon. or dishon.)		12. TOTAL SERVICE YEAR MONTH DAY		
			YEAR	MONTH	DAY	YEAR	MONTH	DAY					
United States Army			43			Feb 15			1948 Oct 27		Yes; honorable		
			5			8							
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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.										13. NONCREDITABLE SERVICE (Leave purposes only):			
TYPE IF KNOWN (LWOP, Furl. Susp. AWOL, Mor Mar)			FROM—			TO—			TOTAL		14. NONCREDITABLE SERVICE (RIF purposes only):		
			YEAR	MONTH	DAY	YEAR	MONTH	DAY					
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)										15. NEEMPLOYMENT RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
7. ARE YOU:										16. RETENTION RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										17. EXPIRATION DATE OF RETENTION RIGHTS			
B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO													
C. THE UNREMARKED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO													
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.													
1 August 57													
Subscribed and sworn to before me on this _____ day of _____ 1957 at _____ (CITY) (STATE)													
SEAL													
NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.													

(OVER)

16-66482-3

CONFIDENTIAL  
(When Filled In)

TRAVEL AGREEMENT BY STAFF EMPLOYEES ASSIGNED TO PERMANENT  
DUTY STATION OUTSIDE CONTINENTAL UNITED STATES

1. In accordance with the policy of the Central Intelligence Agency, I agree to serve outside the continental United States a minimum tour of 24 months from the date of my arrival at my permanent post of duty, unless said tour is sooner terminated by the Government for its convenience, or it is terminated by the Agency for circumstances that are considered by it to be beyond my control.

2. It is understood and agreed that if I terminate for reasons within my control in less than 12 months from the date of arrival at said post, I shall reimburse CIA for all travel expenses, including storage and per diem, incurred in the transporting of myself, my dependents, my household and personal effects and my automobile to my permanent post of duty, and shall pay all return travel and transportation expenses to the United States.

3. It is further understood and agreed that if I terminate for reasons within my control subsequent to the twelfth month but prior to the completion of my tour of duty, I shall pay all return expenses for the travel and transportation of myself, my dependents, my household and personal effects and my automobile to the United States.

WITNESS:

*Jacques G. Richardson*  
(Employee)

Jacques G. Richardson

9 August 1957

Office of Personnel

## INSURANCE QUESTIONNAIRE

126 Xerox 1400  
10-1

1. NAME (Last) (First) (Middle) <b>RICHARDSON Jacques G.</b>	2. THIS DATE <b>28 DEC 54</b>
3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME:	
<input checked="" type="checkbox"/> BAR AGENCIES EMPLOYEES PROTECTIVE ASSOCIATION (BAEPA)	<input checked="" type="checkbox"/> MUTUAL BENEFIT OF OHAMA
<input checked="" type="checkbox"/> GROUP HOSPITALIZATION INCORPORATED	<input checked="" type="checkbox"/> AIR TRIP INSURANCE

4. ITINERARY (To be completed only for individuals making application for Air Trip Insurance):

5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE FOLLOWING INSURANCE PROGRAMS:

TYPE OF POLICY	DESIRED	NOW HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID
GEHA - Health	HT	✓			
Fed. Emp. Ben.		✓			

SIGNATURE

6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS:

SIGNATURE

7. EMPLOYEE

CPB:

IACB:

SIGNATURE

8. REMARKS:

These forms were returned to me 17 Feb 55 in envelope. The forms have not been signed by the Insurance office indicating that individual did not report to that office. Plus

Per phone info from insurance office 21 Feb 55 P/R deductions are to start eff. 26 Feb 55 RUC

When completed, the original of this form should be forwarded to TARB for incorporation in the employee's official personnel folder. The copy should be forwarded to CPB for retention in CPB file



DEPARTMENT OF THE ARMY  
OFFICE OF THE ASSISTANT CHIEF OF STAFF, G-2, INTELLIGENCE  
WASHINGTON 25, D. C.

1-3688

G2-AP

3 DEC 1954

SUBJECT: Letter of Appreciation

TO: Director of Central Intelligence  
Washington 25, D. C.  
ATTN: Deputy Director of Plans

*Jacques J. Richardson*

1. I have received a letter from Major General Boniface Campbell, Commanding General, Army Intelligence Center, expressing appreciation for a presentation by Mr. [REDACTED] at Fort Holabird in October 1954. Mr. [REDACTED] also arranged for presentations by two other speakers at the Army Intelligence Center. A copy of General Campbell's letter is attached.

2. The remarks contained in this letter are a source of real satisfaction to me, and I take this opportunity to add my appreciation to that expressed by General Campbell.

*Arthur G. Tamm*

ARTHUR G. TAMM  
Major General  
A. C. of S.

1 Incl  
Cy ltr fr Gen  
Campbell dtd  
12 Nov 54

RECEIVED  
G-2  
12 DEC 1954



## DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (Name and number, street and State)			
Rd Silver Spring Md.			
2. (A) DATE OF BIRTH	(B) PLACE OF BIRTH (City or town and State or country)		
20 Jan 1924	Baltimore Md.		
3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY	(B) RELATIONSHIP	(C) STREET AND NUMBER, CITY AND STATE	(D) TELEPHONE NO.
HARRIET D.	WIFE	5001 Old Lee Hwy Md-SS-Hd	SL-3783
4. 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
If so, for each such relative fill in the blanks below. If additional space is necessary, continue under Item 10.			

NAME	PAST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE
		1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			
		1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			
		1. 2. 3. 4. 5. 6. 7. 8. 9. 10.			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
1. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X			
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes", give details in Item 10.		X		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.		X		
8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.		X		
9. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED, OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO POST BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION, OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORTY DOLLARS OR LESS WAS IMPOSED)? If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any; or other disposition of the case. If appointed, your fingerprints will be taken.		X		

### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) **Identity of appointee.**—The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) **Age.**—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) **Citizenship.**—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form of citizenship an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) **Members of Family.**—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members of family preference does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.



## ESPIONAGE

1. Unlawfully obtaining or permitting to be obtained information affecting national defense.—That (a) Whoever, for the purpose of obtaining information respecting the national defense with intent or reason to believe that the information to be obtained is to be used to the injury of the United States, or to the advantage of any foreign nation, goes upon, enters, flies over, or otherwise obtains information concerning any vessel, aircraft, work of defence, navy yard, naval station, submarine base, coaling station, fort, battery, torpedo station dockyard, canal, railroad, arsenal, camp, factory, mine, telegraph, telephone, wireless, or signal station, building, office, or other place connected with the national defense, owned or constructed, or in progress of construction by the United States or under the control of the United States, or of any of its officers or agents, or within the exclusive jurisdiction of the United States, or any place in which any vessel, aircraft, arms, munitions, or other materials or instruments for use in time of war are being made, prepared, repaired, or stored, under any contract or agreement with the United States, or with any person on behalf of the United States, or otherwise on behalf of the United States, or any prohibited place within the meaning of section 6 of this title; or (b) whoever for the purpose aforesaid, and with like intent or reason to believe, copies, takes, makes, or obtains, or attempts, or induces or aids another to copy, take, make, or obtain, any sketch, photograph, photographic negative, blueprint, plan, map, model, instrument, appliance, document, writing, or note of anything connected with the national defense; or (c) whoever, for the purpose aforesaid, receives or obtains or agrees or attempts or induces or aids another to receive or obtain from any person, or from any source whatever, any document, writing, code book, signal book, sketch, photograph, photographic negative, blueprint, plan, map, model, instrument, appliance, or note, of anything connected with the national defense, knowing or having reason to believe, at the time he receives or obtains, or agrees or attempts or induces or aids another to receive or obtain it, that it has been or will be obtained, taken, made or disposed of by any person contrary to the provisions of this title; or (d) whoever, lawfully or unlawfully having possession of, access to, control over, or being intrusted with any document, writing, code book, signal, book, sketch, photograph, photographic negative, blueprint, plan, map, model, instrument, appliance, or note relating to the national defense, willfully communicates or transmits or attempts to communicate or transmit the same to any person not entitled to receive it, or willfully retains the same and fails to deliver it on demand to the officer or employee of the United States entitled to receive it; or (e) whoever, being intrusted with or having lawful possession or control of any document, writing, code book, signal book, sketch, photograph, photographic negative, blueprint, plan, map, model, note, or information, relating to the national defense, through gross negligence permits the same to be removed from its proper place of custody or delivered to anyone in violation of his trust, or to be lost, stolen, abstracted, or destroyed, shall be punished by imprisonment for not more than ten years and may, (2145)

in the discretion of the court, be fined not more than \$10,000. (Sec. 1, Title I, act 15 June 1917 (40 Stat. 217), as amended by sec. 1, act 28 March 1940 ( 54 Stat. 79; 50 U.S.C. 31)).

2. Unlawfully disclosing information affecting national defense.—  
 (a) Whoever, with intent or reason to believe that it is to be used to the injury of the United States or to the advantage of a foreign nation, communicates, delivers, or transmits, or attempts to, or aids or induces another to, communicate, deliver, or transmit, to any foreign government, or to any faction or party or military or naval force within a foreign country, whether recognized or unrecognized by the United States, or to any representative, officer, agent, employee, subject, or citizen thereof, either directly or indirectly, any document, writing, code book, signal book, sketch, photograph, photographic negative, blueprint, plan, map, model, note, instrument, appliance, or information relating to the national defense, shall be punished by imprisonment for not more than twenty years: Provided, That whoever shall violate the provisions of subsection (a) of this section in time of war shall be punished by death or by imprisonment for not more than thirty years; and (b) whoever, in time of war, with intent that the same shall be communicated to the enemy, shall collect, record, publish, or communicate, or attempt to elicit any information with respect to the movement, numbers, description, condition, or disposition of any of the armed forces, ships, aircraft, or war materials of the United States, or with respect to the plans or conduct, or supposed plans or conduct of any naval or military operations, or with respect to any works or measures undertaken for or connected with, or intended for the fortification or defense of any place, or any other information relating to the public defense, which might be useful to the enemy, shall be punished by death or by imprisonment for not more than thirty years. (Sec. 2, act 15 June 1917 (40 Stat. 218; 50 U.S.C. 32)).

*I have read and understand the provisions of the above:*

*[Signature]*

*Witness:*

*[Signature]*

*21 November 1949*

## APPOINTMENT AFFIDAVITS

**IMPORTANT.**—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

CIA

OPC

WASHINGTON, D. C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, RICHARD J. JONES, 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 a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

### C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

### D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. SF-57, dated 1 October, 1948, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

Subscribed and sworn before me this 21st day of November, A. D. 1949,

at Washington, D. C.  
(City) (State)

[SEAL]

(Signature of officer)

(Title)

**NOTE.**—If the oath is taken before 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. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State)

2. (A) DATE OF BIRTH

(B) PLACE OF BIRTH (city or town and State or country)

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY

(B) RELATIONSHIP

(C) STREET AND NUMBER, CITY AND STATE

(D) TELEPHONE NO.

HARRIENE D. [REDACTED]

WIFE

722 S. LOYAL ST.,  
ALEXANDRIA, VA.

TE 8506

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (OTHER 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 blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATION- SHIP	MAR- RIED (Check one)	SINGLE
		1. _____ 2. _____ 3. _____			
		1. _____ 2. _____ 3. _____			
		1. _____ 2. _____ 3. _____			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN

YES NO

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?

6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?

If your answer is "Yes", give details in Item 10.

7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?

If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.

8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?

If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.

9. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED, OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO REPOSEY BAL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION, OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)?

If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.

## INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) *Identity of appointee.*—The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history in agreement with his previous statements.

(2) *Age.*—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) *Citizenship.*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form 61 constitutes an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) *Members of Family.*—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members-of-family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

SECRET

(When Filled In)

 PERIODIC SUPPLEMENT  
 PERSONAL HISTORY STATEMENT

THIS DATE

7 August 1957

## INSTRUCTIONS

This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.

## SECTION I

## GENERAL

1. FULL NAME (Last-First-Middle)

RICHARDSON, Jacques Gabriel

2. CURRENT ADDRESS (No., Street, City, Zone, State)

Box 888 APO 500  
San Francisco, California

3. PERMANENT ADDRESS (No., Street, City, Zone, State)

722 South Royal Street  
Alexandria, Virginia

4. HOME TELEPHONE NUMBER

2636-3928

5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE

Virginia

## SECTION II

## PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S.

2. RELATIONSHIP

Father-in-law

3. HOME ADDRESS (No., Street, City, Zone, State, Country)

722 South Royal Street, Alexandria, Virginia

4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE

Council of State Governments, 1025 Connecticut Avenue, Washington, D.C.

5. HOME TELEPHONE NUMBER

Temple 6-8506

6. BUSINESS TELEPHONE NUMBER

Executive 3-6715

7. BUSINESS TELEPHONE EXTENSION

8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.

(Brother), Street NW, Washington, D.C. (WH-3-6093)

## SECTION III

## MARITAL STATUS

1. CHECK (X) ONE: ☐ SINGLE ☒ MARRIED ☐ WIDOWED ☐ SEPARATED ☐ DIVORCED ☐ ANNULLED

2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancée.

3. NAME (First) (Middle) (Maiden) (Last)

4. DATE OF MARRIAGE

5. PLACE OF MARRIAGE (City, State, Country)

6. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country)

7. LIVING

YES ☐ NO ☐

8. DATE OF DEATH

9. CAUSE OF DEATH

10. CURRENT ADDRESS (Give last address, if deceased)

11. DATE OF BIRTH

12. PLACE OF BIRTH (City, State, Country)

13. IF BORN OUTSIDE U.S., DATE OF ENTRY

14. PLACE OF ENTRY

15. CITIZENSHIP (Country)

16. DATE ACQUIRED

17. WHERE ACQUIRED (City, State, Country)

18. OCCUPATION

19. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers)

20. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)

SECTION III CONTINUED TO PAGE 2

FORM 444b USE PREVIOUS EDITIONS.  
4-57

SECRET

1

(4)

SECRET

FORM 100-10-1

## SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE OF SPOUSE (From and To) MONTH AND YEAR	
22. BRANCH OF SERVICE	23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED
24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN	

## SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1. FULL NAME (Last-First-Middle) Mrs Henry	2. RELATIONSHIP Mother's aunt	3. AGE 65?
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES Edith Cavell, Nice, Alpes Maritimes, France		
5. CITIZENSHIP (Country) France	6. FREQUENCY OF CONTACT About 3 times a year, by mail	7. DATE OF LAST CONTACT May 1957
1. FULL NAME (Last-First-Middle) M.	2. RELATIONSHIP Mother's 2d cousin	3. AGE 70?
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES Greneta, Paris XII <sup>e</sup> , France		
5. CITIZENSHIP (Country) France	6. FREQUENCY OF CONTACT Once a year, by mail	7. DATE OF LAST CONTACT Christmas, 1956
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

## 5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

I have met each of the above relatives only once in my life.

## SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-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 YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.		
3. 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? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.		
5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS. Annual dividends on modest investments in stocks, credit union, and cooperative.		

SECTION V CONTINUED TO PAGE 3

SECRET

SECRET

(When Filled In)

SECTION V CONTINUED FROM PAGE 2							
6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS							
NAME OF INSTITUTION				ADDRESS (City, State, Country)			
Clarendon Trust Company,				Arlington 10, Virginia			
7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY?				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)							
SECTION VI CITIZENSHIP							
1. COUNTRY OF CURRENT CITIZENSHIP USA			2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE <input checked="" type="checkbox"/> BIRTH <input type="checkbox"/> MARRIAGE <input type="checkbox"/> OTHER (Specify):				
3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			4. GIVE PARTICULARS				
5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (FBI FILE NUMBER, ETC.)							
SECTION VII EDUCATION							
1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED							
LESS THAN HIGH SCHOOL GRADUATE			OVER TWO YEARS OF COLLEGE - NO DEGREE				
HIGH SCHOOL GRADUATE			BACHELOR'S DEGREE				
TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE			<input checked="" type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE				
TWO YEARS COLLEGE OR LESS			MASTER'S DEGREE		DOCTOR'S DEGREE		
2. COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE RECEIVED	DATE RECEIVED	SEMESTER HRS. COMPLETED (Specify)
	MAJOR	MINOR	FROM	TO			
Graduate School, Georgetown University	Int'l Rel's		Jun 51	May 52	N o n e		24 hours
3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS			
		FROM	TO				
4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)							
NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS			
		FROM	TO				
5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE							

SECRET

SECRET

(When Filled In)

SECTION X CONTINUED FROM PAGE 8

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, 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. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE  
An experienced intelligence briefer.

10. 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.  
Member, British Interplanetary Society, London.  
Associate member, American Astronautical Association, New York.

SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From- and To-) Nov 1949 - Oct 1951	2. GRADE 7 - 11	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT CPC/PS/3 - Desk intelligence officer
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION [ ]	5. OFFICIAL POSITION TITLE Soviet desk officer	
6. DESCRIPTION OF DUTIES Prepared, conjointly with CSC/PS/PS, operational plans against Soviet Far Eastern targets.		
1. INCLUSIVE DATES (From- and To-) Oct 1951 - Dec 1953	2. GRADE 12- 13	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/SS/5; deputy chief, then chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION [ ]	5. OFFICIAL POSITION TITLE Branch deputy chief, then Branch chief	
6. DESCRIPTION OF DUTIES Supervised and directed SS plans and projects targeted against Soviet Far East.		
1. INCLUSIVE DATES (From- and To-) Jan 1954 - Dec 1954	2. GRADE 13	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/SS/COFS/DR - Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION [ ]	5. OFFICIAL POSITION TITLE Chief of special defector [ ] project	
6. DESCRIPTION OF DUTIES [ ]		
1. INCLUSIVE DATES (From- and To-) Feb 1955 - Mar 1956	2. GRADE 14	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/SS - MA/SS [ ] - Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION [ ]	5. OFFICIAL POSITION TITLE Chief of Base	
6. DESCRIPTION OF DUTIES Direct and supervise field plans and projects based in [ ] targeted against Soviet Far Eastern targets.		
1. INCLUSIVE DATES (From- and To-) Mar 1956 - Jun 1957	2. GRADE 14	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/SS - [ ] Soviet Branch Deputy Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION [ ]	5. OFFICIAL POSITION TITLE Deputy chief of branch	
6. DESCRIPTION OF DUTIES Assist Branch Chief in development and management of all [ ]-based operations against USSR and Soviet Embassy [ ]		

(Use additional pages if required)

SECRET



**SECRET**  
(When Filled In)

SECTION XII CHILDREN AND OTHER DEPENDENTS							
1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.			2	2. NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepparents, sister, etc.) WHO DEPEND ON YOU FOR AT LEAST 50% OF THEIR SUPPORT, OR, CHILDREN OVER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.			3
3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS							
NAME	RELATIONSHIP	YEAR OF BIRTH	SEX		CITIZENSHIP	ADDRESS	
			M	F			
Harriette [REDACTED]	Wife	1928		X	USA	Same as mine	
[REDACTED]	Daughter	1950		X	"	"	
[REDACTED]	"	1953		X	"	"	

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

DATE COMPLETED: 7 August 1956

SIGNATURE OF EMPLOYEE: *Walter B. Richardson*

**SECRET**

## PERSONAL HISTORY STATEMENT

37833

- Instructions: 1. Answer all questions completely. If question does not apply write "not applicable." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.
2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? YES

## SEC. 1. PERSONAL BACKGROUND

Telephone: \_\_\_\_\_  
 Office: NOT  
 Home: 40-7983

A. FULL NAME: JACQUES GABRIEL RICHARDSON  
 (Use No Initials) First Middle Last

PRESENT ADDRESS ST-BALTIMORE, MD, USA  
 St. & No. City State Country

PERMANENT ADDRESS ST-BALTIMORE, MD, USA  
 St. & No. City State Country

B. NICKNAME JACK WHAT OTHER NAMES HAVE YOU USED? NONE

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? NOT APPLICABLE

HOW LONG? \_\_\_\_\_ IF A LEGAL CHANGE, GIVE PARTICULARS \_\_\_\_\_

C. DATE OF BIRTH 20 JAN 1924 PLACE OF BIRTH BALTIMORE, MD, USA  
 Where? By What Authority City State Country

D. PRESENT CITIZENSHIP USA BY BIRTH? YES BY MARRIAGE? \_\_\_\_\_  
 Country

BY NATURALIZATION CERTIFICATE? NOT APPLICABLE  
 ISSUED Date BY \_\_\_\_\_

AT \_\_\_\_\_  
 City State Country

HAVE YOU HAD A PREVIOUS NATIONALITY? NO  
 Yes or No Country

HELD BETWEEN WHAT DATES? \_\_\_\_\_ TO \_\_\_\_\_ ANY OTHER NATIONALITY? \_\_\_\_\_  
 Country

GIVE PARTICULARS NOT APPLICABLE

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? NO GIVE PARTICULARS \_\_\_\_\_

2

B. IF BORN OUTSIDE U.S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? N/A

PORT OF ENTRY? \_\_\_\_\_ ON PASSPORT OF WHAT COUNTRY? \_\_\_\_\_

LAST U.S. VISA \_\_\_\_\_

Number

Type

Place of Issue

Date of Issue

SEC. 2. PHYSICAL DESCRIPTION

AGE 24 SEX MALE HEIGHT 5'9 1/2" WEIGHT 140  
EYES BROWN HAIR BROWN COMPLEXION DARK SCARS FOREHEAD  
BUILD SLENDER OTHER DISTINGUISHING FEATURES NONE

SEC. 3. MARITAL STATUS

A. SINGLE YES MARRIED \_\_\_\_\_ DIVORCED \_\_\_\_\_ WIDOWED \_\_\_\_\_

STATE DATE, PLACE, AND REASON FOR SEPARATION, DIVORCE OR ANNULMENT \_\_\_\_\_

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE — INCLUDE ANNUL-  
MENTS — USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND  
GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE NOT APPLICABLE

First

Middle

Initials

Last

PLACE AND DATE OF MARRIAGE \_\_\_\_\_

HIS (OR HER) ADDRESS BEFORE MARRIAGE \_\_\_\_\_

St. & No.

City

State

Country

LIVING OR DECEASED \_\_\_\_\_ DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_

PRESENT, OR LAST, ADDRESS \_\_\_\_\_

St. & No.

City

State

Country

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

City

State

Country

IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY \_\_\_\_\_

CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_

City

State

Country

OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

EMPLOYER'S OR BUSINESS ADDRESS \_\_\_\_\_

St. & No.

City

State

Country

MILITARY SERVICE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_

Date

Date

COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T. SERVICE, U.S. OR FOREIGN \_\_\_\_\_

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents)

1. NAME NOT APPLICABLE RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME [REDACTED]  
First Middle Last

LIVING OR DECEASED LIVING DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_

PRESENT, OR, LAST, ADDRESS [REDACTED] ST, BALTIMORE-18-MD-USA  
St. & No. City State Country

DATE OF BIRTH 21 NOV 1893 PLACE OF BIRTH CENTREVILLE, MARYLAND, USA  
City State Country

IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY N/A

CITIZENSHIP USA WHEN ACQUIRED? BIRTH WHERE? \_\_\_\_\_  
City State Country

OCCUPATION AUTO DEALER LAST EMPLOYER EAST END AUTO CO-BALTIMORE

EMPLOYER'S OR OWN BUSINESS ADDRESS 6505 PULASKI HWY, BALTIMORE MD, USA  
St. & No. City State Country

MILITARY SERVICE FROM 1915 TO 1919 BRANCH OF SERVICE ARMY AVIATION  
Date Date

COUNTRY USA, GT. BRITAIN DETAILS OF OTHER GOVT SERVICE, U.S. OR FOREIGN, NONE

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME [REDACTED]  
First Middle Last

LIVING OR DECEASED DECEASED DATE OF DECEASE 5 DEC 1947 CAUSE CANCER

PRESENT, OR, LAST, ADDRESS [REDACTED] AV, BALTIMORE, MD, USA  
St. & No. City State Country

DATE OF BIRTH 14 AUG 1908 PLACE OF BIRTH ROMANS, DROME, FRANCE

CITIZENSHIP USA WHEN ACQUIRED? 1921 (2) WHERE? BALTO, MD, USA  
City State Country

IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY NOV. 1919 - NEW YORK

OCCUPATION MILLINERY LAST EMPLOYER EMPORIUM WORLD HILL'Y CO.  
BUYER  
 EMPLOYER'S OR OWN BUSINESS ADDRESS UNKNOWN, CHICAGO, ILL, USA  
St. & No. City State Country  
 MILITARY SERVICE FROM NONE TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_  
 COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOVT SERVICE, U.S. OR FOREIGN.  
NONE

SEC. 7. BROTHERS AND SISTERS (Including half, step, and adopted brothers and sisters)

DL  
73452

1. FULL NAME \_\_\_\_\_ AGE 23  
First Middle Last  
 PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship  
AV. BALTIMORE, MD, USA-USA

2. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
 PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

3. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
 PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

4. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
 PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

5. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle Last  
 PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

SEC. 8. FATHER-IN-LAW

FULL NAME NOT APPLICABLE  
First Middle Last  
 LIVING OR DECEASED \_\_\_\_\_ DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_  
 PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country  
 DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
 IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country  
 OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

SEC. 9. MOTHER-IN-LAW

FULL NAME NOT APPLICABLE  
First Middle Last  
LIVING OR DECEASED \_\_\_\_\_ DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_  
PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country  
DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country  
OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

1. NAME HENRY RELATIONSHIP GREAT-UNCLE AGE 65(?)  
CITIZENSHIP FRENCH ADDRESS CAVEL, NICE, FRANCE  
St. & No. City State Country  
2. NAME MARIE RELATIONSHIP \_\_\_\_\_ AGE 55(?)  
CITIZENSHIP USA ADDRESS 10015 ELEVATORS, BUENOS AIRES ARGENT.  
St. & No. City State Country  
3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State Country

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U.S. OR OF A FOREIGN GOVERNMENT.

1. NAME CMDR RELATIONSHIP COUSIN AGE 30  
CITIZENSHIP USA ADDRESS N.O.B. NORFOLK, VIRGINIA  
St. & No. City State  
TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_  
2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State  
TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_  
3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
St. & No. City State  
TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

SEC. 12. EDUCATION

DS #63  
 ELEMENTARY SCHOOL Mc DONOUGH SCH. ADDRESS BALTIMORE, MD, USA  
City State Country  
 DATES ATTENDED 1930-34-37 GRADUATE? YES  
 HIGH SCHOOL LYONS HIGH MONTREAL, ADDRESS MONTREAL QUE, CANADA  
City State Country  
 DATES ATTENDED 1937-1940 GRADUATE? YES  
 COLLEGE SIR GEO WILLIAMS COLL., ADDRESS MONTREAL, QUE, CANADA  
City State Country  
 DATES ATTENDED 1940-1942 DEGREE NONE  
 COLLEGE U OF MICHIGAN, ADDRESS ANN ARBOR, MICH, USA  
City State Country  
 DATES ATTENDED 1945 (see P 13) DEGREE B.A.

SEC. 13. MILITARY, NAVAL OR OTHER GOV'T SERVICE — U.S. OR FOREIGN

USA ARMY 1/LT FEB 1943-OCT 1945  
Country Service Rank Date of Service  
GHC-FEC- 0-937200 HONORABLE  
Last Station Serial No. Type of Discharge  
 REMARKS: WHILE ENLISTED, SERIAL WAS

RELATIVE SERVICE BOARD NUMBER 5-A ADDRESS HARTFORD, CONN.

IF REFERRED GIVE REASON

SEC. 14. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST.

FROM 15 AUG 45 TO 30 SEP 48

EMPLOYING FIRM OR AGENCY DEPT / ARMY  
 ADDRESS CCD-GHC-FEC APC 500 POSTMASTER SAN FRANCISCO, USA  
St. & No. City State Country  
 KIND OF BUSINESS CIVIL CENSORSHIP NAME OF SUPERVISOR ROBT SPAULDING  
 TITLE OF JOB LIAISON OFFICER SALARY \$ 251 PER MONTH  
 YOUR DUTIES INTELLIGENCE ANALYST; REPORTS COORDINATOR & WRITER  
 REASONS FOR LEAVING RETURN TO USA FOR SEPARATION FROM ARMY

(MILITARY)

FROM 1 APR 45 TO 15 AUG 45

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS CCD. GHQ. FEC APO 500 POSTMASTER, SAN FRANCISCO, USA  
St. & No. City State Country

(MILITARY)

KIND OF BUSINESS CIVIL CENSORSHIP NAME OF SUPERVISOR VINCENT MERCOLA

TITLE OF JOB DEPUTY CHIEF, NEWS AGENCY SALARY: 251 PER MONTH

YOUR DUTIES Asst chief of principal Allied press censorship bureau

REASONS FOR LEAVING CENSORSHIP SECTION ELIMINATED in Japan.

FROM 1 NOV 46 TO 31 MAR 47

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS CCD. GHQ. FEC APO 309 POSTMASTER, SAN FRANCISCO, USA  
St. & No. City State Country

(MILITARY)

KIND OF BUSINESS CIVIL CENSORSHIP NAME OF SUPERVISOR ROBT. SPAULDING

TITLE OF JOB CHIEF, CENSORSHIP SUB-STA SALARY: 221 PER MONTH

YOUR DUTIES Operated field censorship surveillance detachment

REASONS FOR LEAVING TRANSFERRED TO HQ IN TOKYO

FROM 15 MAR 46 TO 15 AUG 46

EMPLOYING FIRM OR AGENCY DEPT / ARMY

ADDRESS ARMY LANGUAGE SCHOOL (FT. SNEILING, FINN, USA)  
St. & No. City State Country

(MILITARY)

KIND OF BUSINESS CIVIL AFFAIRS NAME OF SUPERVISOR YUTAKA MUNAKATA

TITLE OF JOB RESEARCH EDITOR SALARY: Army PER Sgt.

YOUR DUTIES REVISED ARMY MANUALS, PREPARED CIVIL AFFAIRS COURSES

REASONS FOR LEAVING COMMISSIONED; TRANSFERRED TO JAPAN

FROM NOV 1941 TO JUL 1947

EMPLOYING FIRM OR AGENCY T. EATON CO, LTD.

ADDRESS ST. CATHERINE ST, MONTREAL, QUE, CANADA  
St. & No. City State Country

KIND OF BUSINESS DEPT. STORE NAME OF SUPERVISOR E.T. CHAYDON

TITLE OF JOB PHOTOGRAPHIC SALESMAN SALARY: 30 PER WEEK

YOUR DUTIES SOLD CAMERAS AND PHOTO SUPPLIES

REASONS FOR LEAVING WAS PART-TIME JOB ACCEPTED WHILE IN COLLEGE



SEC. 15. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

NOT APPLICABLE

SEC. 16. GIVE FIVE CHARACTER REFERENCES — IN THE U.S. — WHO KNOW YOU INTIMATELY — (GIVE RESIDENCE AND BUSINESS ADDRESSES WHERE POSSIBLE.)

	Street and Number	City	State
1. CAPT. GORDON WALLACE	BUS. ADD. 415-PRESIDIO	MONTEREY	CAL.
	RES. ADD. 2160 COOLEY	PALO ALTO	CAL.
2. MR. GEORGE MODRE	BUS. ADD. 11 CALIFORNIA	BERKELEY	CAL.
	RES. ADD. 571 NORTH	OAKLAND	CAL.
3. MR. JOHN CHEATHAM	BUS. ADD. 111 E. PATRICK	FREDERICK	MD.
	RES. ADD. 101 E. CHURCH	FREDERICK	MD.
4. MR. T. G. DRISCOLL	BUS. ADD. 131 K ST. N.W.	WASH.	DC.
	RES. ADD. 705 S. ROYAL	ALEXANDRIA	VA.
5. MR. R. H. KUNZMAN	BUS. ADD. 111 BUREAU	DES MOINES	IOWA
	RES. ADD.	UNK	

SEC. 17. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES — NOT REFERENCES, SUPERVISORS OR EMPLOYERS — (Give residence and business addresses where possible.)

	Street and Number	City	State
1. MR. GEORGE FINNEY	BUS. ADD. DEPT IAF	WASHINGTON	DC.
	RES. ADD. 2310 VALLEY DR.	ALEXANDRIA	VA.
2. DR. MORRIS CRANE	BUS. ADD. BALTIMORE AV	PHILADELPHIA	PA.
	RES. ADD.		
3. MR. BRADFORD COLLAGE	BUS. ADD. DEPT/STATE	WASHINGTON	DC.
	RES. ADD.		
4. MISS FLORENCE MCDONALD	BUS. ADD.	NONE	
	RES. ADD. 11 HARTFORD	WILMINGTON, CONN.	
5. MR. ANTHONY SAE	BUS. ADD.	UNK	
	RES. ADD. 203 E. 211A	BALTIMORE	MD.

SEC. 18. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U.S. — (Give residence and business addresses where possible.)

	Street and Number	City	State
1. MR. FRANK DUCHARME	BUS. ADD. TRAVELERS' INN	HARTFORD	CONN.
	RES. ADD. 76 LILLEY	W. HARTFORD	CONN.
2. MR. JAMES KNOX	BUS. ADD. G. L. FOX CO.	HARTFORD	CONN.
	RES. ADD. UNK		
3. MRS. LOUIS FRANKLIN	BUS. AND RES. ADD. ALBERT STEIGER	HARTFORD	CONN.
		UNK	

SEC. 19. FINANCIAL BACKGROUND

- A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES IF NOT, STATE SOURCES OF OTHER INCOME \_\_\_\_\_
- B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS BALTIMORE NATIONAL BANK, HIGHLANDTOWN BRANCH, BALTIMORE, MD.
- C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? NO  
GIVE PARTICULARS, INCLUDING COURT: \_\_\_\_\_
- D. GIVE THREE CREDIT REFERENCES — IN THE U.S.
- |         |                 |         |                                 |
|---------|-----------------|---------|---------------------------------|
| 1. NAME | LEE'S INC       | ADDRESS | 3424 EASTERN AV. BALTIMORE, MD. |
| 2. NAME | MONTGOMERY WARD | ADDRESS | 2417 AV. OAKLAND 16, CAL.       |
| 3. NAME |                 | ADDRESS |                                 |

SEC. 20. RESIDENCES FOR THE PAST 15 YEARS

FROM	TO	St. No.	City	State	Country
FROM 1933	TO 1937	3310	PRESSTMAN SE	BALTIMORE-MD	USA
FROM 1937	TO 1939	4561	HARVARD AV.	MONTREAL-QUE	CANADA
FROM 1939	TO 1942	1461	MOUNTAIN ST.	MONTREAL-QUE	CANADA
FROM 1942	TO 1942	26	LILLEY RD.	W. HARTFORD	CONN. USA
FROM 1942	TO 1942		MILITARY SERVICE		
FROM 1942	TO PRESENT	2908	ST. PAUL ST.	BALTIMORE, MD.	USA
FROM	TO	St. No.	City	State	Country
FROM	TO	St. No.	City	State	Country

SEC. 21. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM	TO	City or Section	Country	Purpose
FROM JUN 1937	TO SEP 1937	PARIS	FRANCE	VISIT
FROM JUL 1939	TO JUL 1942	NAGARA	PENINSULA CANADA	VISIT
FROM SEP 1937	TO JUL 1942	MONTREAL	CANADA	RESIDENCE

10

FROM OCT 1944 TO JAN 1945 NORTHERN EUROPE WAR SERVICEFROM SEP 1946 TO OCT 1948FROM \_\_\_\_\_ TO \_\_\_\_\_  
City or Section Country PurposeB. LAST U.S. PASSPORT—NUMBER, DATE, AND PLACE OF ISSUE: UNKNOWNHOW MANY OTHER U.S. PASSPORTS HAVE YOU HAD? NONE GIVE APPROXIMATE

DATES: \_\_\_\_\_

PASSPORTS OF OTHER NATIONS: \_\_\_\_\_

## SEC. 22. CLUBS, SOCIETIES AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

✓ 1. AMERICAN VETERANS COMMITTEE (MEMBER AT LARGE)  
Name and Chapter St. & No. City State CountryDATES OF MEMBERSHIP: NOV 1945 - JAN 19482. RESERVE OFFICERS ASS'N WASHINGTON DC USA  
Name and Chapter St. & No. City State CountryDATES OF MEMBERSHIP: OCT 1948 - PRESENT3. \_\_\_\_\_  
Name and Chapter St. & No. City State Country

DATES OF MEMBERSHIP: \_\_\_\_\_

4. \_\_\_\_\_  
Name and Chapter St. & No. City State Country

DATES OF MEMBERSHIP: \_\_\_\_\_

5. \_\_\_\_\_  
Name and Chapter St. & No. City State Country

DATES OF MEMBERSHIP: \_\_\_\_\_

6. \_\_\_\_\_  
Name and Chapter St. & No. City State Country

DATES OF MEMBERSHIP: \_\_\_\_\_

7. \_\_\_\_\_  
Name and Chapter St. & No. City State Country

DATES OF MEMBERSHIP: \_\_\_\_\_

SEC. 23. GENERAL QUALIFICATIONS

- A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT" "FAIR" OR "FLUENT")

LANGUAGE

SPEAK FLUENT READ FAIR WRITE FAIR

LANGUAGE

SPEAK FLUENT READ FLUENT WRITE FLUENT

LANGUAGE

SPEAK \_\_\_\_\_ READ \_\_\_\_\_ WRITE \_\_\_\_\_

- B. LIST ALL SPORTS AND HOBBIES WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

SWIMMING, SKIING, HORSEMANSHIP, FOOTBALL - GOOD.

BASEBALL, ICE HOCKEY, LACROSSE, VOLLEYBALL, BADMINTON - FAIR.

PHOTOGRAPHIC PROCESSES - STRONG AMATEUR INTEREST.

- C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

HAVE AN ABILITY TO WRITE, EITHER REPORTORIAL OR EDITORIAL, WHICH MIGHT BE SUITABLE FOR RESEARCH OR SPECIAL REPORTS WRITING.

- D. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1939:

NONE OTHER THAN DEPT OF ARMY FOR COMMISSION AS OFFICER.

- E. 1. TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

MILITARY INTELLIGENCE DIV, WAR DEPT., + FBI  
CONDUCTED LOYALTY CHECK SOMETIME BETWEEN  
FEB 1947 AND JUN 1947.

## SEC. 24. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OR, OR HAVE YOU SUPPORTED ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

NO

IF "YES", EXPLAIN:

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? YES IF SO, TO WHAT  
EXTENT? OCCASIONAL WINES AND LIQUOR

0. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE: NO

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES?  
IF ANSWER IS "YES," GIVE DETAILS BELOW:

NO

**SEC. 25. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:**

NAME \_\_\_\_\_ RELATIONSHIP FATHER

ST. BALTIMORE MD USA

SEC. 20. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HERE-  
IN WILL BE INVESTIGATED.

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. IF NOT, ANSWER "NO."

NO

SEC. 27. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT ALEXANDRIA, VIRGINIA

DATE 25 NOV 1948

City and State

Marjorie C. Sinclair  
Witness

Jacques L. Richardson  
Signature of Applicant

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

14. - I HAVE NEVER HELD A FULL-TIME CIVILIAN JOB, SINCE I ENTERED THE ARMY DIRECTLY FROM COLLEGE.

19. - I HAVE NEVER BOUGHT ANYTHING ON CREDIT. THEREFORE, I HAVE LISTED THREE CONCERNS WITH WHICH I HAVE TRANSACTED NORMAL BUSINESS.

12. - I ACQUIRED SUFFICIENT CREDITS FROM THE SCHOOL AT THE U OF MICHIGAN TO RECEIVE A B.A. DEGREE, IN ABSENTIA, WHILE STILL ON ACTIVE SERVICE.

FROM SEP 1942 TO DEC 1942 I COMPLETED ONE SEMESTER AT TRINITY COLLEGE, HARTFORD, CONN.

Jacques L. Richardson

Note: information contained herein  
is supplemental.

### PERSONAL HISTORY STATEMENT

- Instructions: 1. Answer all questions completely. If question does not apply write "not applicable." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.
2. Type, print or write carefully; Illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? \_\_\_\_\_  
Yes or No

#### SEC. 1. PERSONAL BACKGROUND

A. FULL NAME <sup>Mrs.</sup> ~~Mr.~~ JACQUES GABRIEL RICHARDSON Telephone: VE-4810  
(Use No Initials) ~~Mrs.~~ First Middle Last Office: Ext. 13  
Home: \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country

PERMANENT ADDRESS \_\_\_\_\_  
St. & No. City State Country

B. NICKNAME \_\_\_\_\_ WHAT OTHER NAMES HAVE YOU USED? \_\_\_\_\_

\_\_\_\_\_ UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE  
NAMES? \_\_\_\_\_

HOW LONG? \_\_\_\_\_ IF A LEGAL CHANGE, GIVE PARTICULARS \_\_\_\_\_

Where? \_\_\_\_\_ By What Authority \_\_\_\_\_

C. DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_  
City State Country

D. PRESENT CITIZENSHIP \_\_\_\_\_ BY BIRTH? \_\_\_\_\_ BY MARRIAGE? \_\_\_\_\_  
Country

BY NATURALIZATION CERTIFICATE # \_\_\_\_\_ ISSUED \_\_\_\_\_ BY \_\_\_\_\_  
Date Court

AT \_\_\_\_\_  
City State Country

HAVE YOU HAD A PREVIOUS NATIONALITY? \_\_\_\_\_  
Yes or No Country

HELD BETWEEN WHAT DATES? \_\_\_\_\_ TO \_\_\_\_\_ ANY OTHER NATIONALITY? \_\_\_\_\_  
Country

GIVE PARTICULARS \_\_\_\_\_

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? \_\_\_\_\_ GIVE PARTICULARS: \_\_\_\_\_

E. IF BORN OUTSIDE U.S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? \_\_\_\_\_

PORT OF ENTRY? \_\_\_\_\_ ON PASSPORT OF WHAT COUNTRY? \_\_\_\_\_

LAST U.S. VISA \_\_\_\_\_  
Number Type Place of Issue Date of Issue

SEC. 2. PHYSICAL DESCRIPTION

AGE \_\_\_\_\_ SEX \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

EYES \_\_\_\_\_ HAIR \_\_\_\_\_ COMPLEXION \_\_\_\_\_ SCARS \_\_\_\_\_

BUILD \_\_\_\_\_ OTHER DISTINGUISHING FEATURES \_\_\_\_\_

X SEC. 3. MARITAL STATUS

A. SINGLE \_\_\_\_\_ MARRIED ☒ DIVORCED \_\_\_\_\_ WIDOWED \_\_\_\_\_

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS \_\_\_\_\_

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE — INCLUDE ANNUL-  
 MENTS — USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND  
 GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES)

NAME OF SPOUSE \_\_\_\_\_

PLACE AND DATE OF MARRIAGE ALEXANDRIA, VA; 25 JUN 1949

HIS (OR HER) ADDRESS BEFORE MARRIAGE 705 S. ROYAL ST., ALEXANDRIA, VA.  
St. & No. City State Country

LIVING OR DECEASED LIVING DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_

PRESENT, OR LAST, ADDRESS 1619 DOOLITTLE RD., ESSEX, MD.  
St. & No. City State Country

DATE OF BIRTH 19 JUN 28 PLACE OF BIRTH MINNEAPOLIS, MINN.  
City State Country

IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY \_\_\_\_\_

CITIZENSHIP U.S. WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State Country

OCCUPATION HOUSEWIFE LAST EMPLOYER \_\_\_\_\_

EMPLOYER'S OR BUSINESS ADDRESS \_\_\_\_\_  
St. & No. City State Country

MILITARY SERVICE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_  
Date Date

COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T. SERVICE, U.S. OR FOREIGN \_\_\_\_\_



OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

EMPLOYER'S OR OWN BUSINESS ADDRESS \_\_\_\_\_  
St. & No. City State Country

MILITARY SERVICE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH OF SERVICE \_\_\_\_\_

COUNTRY \_\_\_\_\_ DETAILS OF OTHER GOV'T SERVICE, U.S. OR FOREIGN. \_\_\_\_\_

## SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters)

1. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle LastPRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship2. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle LastPRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship3. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle LastPRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship4. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle LastPRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship5. FULL NAME \_\_\_\_\_ AGE \_\_\_\_\_  
First Middle LastPRESENT ADDRESS \_\_\_\_\_  
St. & No. City State Country Citizenship

## X SEC. 8. FATHER-IN-LAW

FULL NAME \_\_\_\_\_  
First Middle LastLIVING OR DECEASED LIVING DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_PRESENT, OR LAST, ADDRESS \_\_\_\_\_  
St. & No. City State Country ST. ALEXANDRIA, VA.DATE OF BIRTH 14 OCT 92 PLACE OF BIRTH ST. PAUL, MINN.

IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY \_\_\_\_\_

CITIZENSHIP US WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_  
City State CountryOCCUPATION PUBLIC LAST EMPLOYER COUNCIL OF STATE GOVTS,  
ADMINISTRATOR 1737 "K" ST, NW,  
WASH DC.

## X SEC. 9. MOTHER-IN-LAW

FULL NAME

First

LIVING OR DECEASED LIVING DATE OF DECEASE — CAUSE —PRESENT, OR LAST, ADDRESS 705 S. ROYAL ST, ALEXANDRIA, VA  
St. & No. City State CountryDATE OF BIRTH 13 APR 00 PLACE OF BIRTH MINNEAPOLIS, MINN.IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY —CITIZENSHIP — WHEN ACQUIRED? — WHERE? —  
City State CountryOCCUPATION HOUSEWIFE LAST EMPLOYER —

## X SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

1. NAME NONE, other than mine RELATIONSHIP — AGE —CITIZENSHIP — ADDRESS —  
St. & No. City State Country2. NAME — RELATIONSHIP — AGE —CITIZENSHIP — ADDRESS —  
St. & No. City State Country3. NAME — RELATIONSHIP — AGE —CITIZENSHIP — ADDRESS —  
St. & No. City State Country

## X SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U.S. OR OF A FOREIGN GOVERNMENT.

1. NAME NONE, other than mine RELATIONSHIP — AGE —CITIZENSHIP — ADDRESS —  
St. & No. City StateTYPE AND LOCATION OF SERVICE (IF KNOWN) —2. NAME — RELATIONSHIP — AGE —CITIZENSHIP — ADDRESS —  
St. & No. City StateTYPE AND LOCATION OF SERVICE (IF KNOWN) —3. NAME — RELATIONSHIP — AGE —CITIZENSHIP — ADDRESS —  
St. & No. City StateTYPE AND LOCATION OF SERVICE (IF KNOWN) —

## SEC. 24. MISCELLANEOUS

- A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OR, OR HAVE YOU SUPPORTED ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES", EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

- B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? \_\_\_\_\_ IF SO, TO WHAT EXTENT? \_\_\_\_\_

- C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:
- \_\_\_\_\_
- \_\_\_\_\_

## \*SEC. 25. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME

RELATIONSHIP

WIFE

ADDRESS

1619 DOOLITTLE ROAD, ESSEX, MD.

St. &amp; No.

City

State

Country

## SEC. 26. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

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. IF NOT, ANSWER "NO."

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

X SEC. 27. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Baltimore, Maryland DATE Oct 18 49  
City and State  
William F. Chastain James G. Richardson  
Witness Signature of Applicant

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

14. Since August 24, 1947, I have been employed as Administrative Assistant to the Director of Planning, Housing Authority of Baltimore City, at the salary range of \$3,100 - \$3,900.

MILITARY RECORD AND REPORT OF SEPARATION  
CERTIFICATE OF SERVICE

RICHARDSON, JACQUES G.		0 937 200	37 LT	INF	ORC
GENERAL HEADQUARTERS, FAR EAST COMMAND, MILITARY INTELLIGENCE		27 OCT 46	SEPARATION CENTER, FORT LANTON, WASHINGTON		
2008 NORTH ST. PAUL STREET, BALTIMORE 18, MARYLAND		20 JAN 24	BALTIMORE, MARYLAND		
SEX 9	BROWN BROWN	5'10"	145	0	
STUDENT, COLLEGE X-02					

HARTFORD, CONNECTICUT		1645 RICKENBACKER ROAD, ESSEX 21, MARYLAND	
27 JAN 46	(PRESS) CENSORSHIP OFFICER 9335		
NONE			
WW II VICTORY MEDAL: [REDACTED]			
NONE			
MILITARY INTELLIGENCE SERVICE LANGUAGE SCHOOL, FT SHELLENG, MINN.		12 SEP 46	JAPAN
23 SEP 46			
9 OCT 46		USA	
23 OCT 46			

31 OCT 46		30 NOV 46		6.50		X	
-----------	--	-----------	--	------	--	---	--

SECTION, GENERAL STAFF LABEL DOTTEN ISSUED	
JACQUES G. RICHARDSON	ALVIN W. BASHETT CAPT USAF



*Army of the United States*  
CERTIFICATE OF SERVICE

*This is to certify that*  
JACQUES G. RICHARDSON O 937 200 1ST LT  
GENERAL HEADQUARTERS, FAR EAST COMMAND,  
MILITARY INTELLIGENCE SECTION, GENERAL STAFF  
*honorably served in active Federal Service*  
*in the Army of the United States from*  
27 JAN 46 to 27 OCT 46

*Given at SEPARATION CENTER, FORT LANTON, WASHINGTON*  
*on the 27 day of OCTOBER 1946*

*Thomas B. Hammond*  
THOMAS B. HAMMOND  
MAJOR AGO

ENLISTED RECORD AND REPORT OF SEPARATION  
HONORABLE DISCHARGE

1. NAME (Last, First, Middle)		2. GRADE OR RATE		3. DATE OF ENTRY INTO SERVICE	
4. DATE OF SEPARATION		5. PLACE OF SEPARATION		6. NAME OF COMMANDING OFFICER	
7. DUTY ASSIGNMENT (List all assignments in chronological order)					
8. REASON FOR SEPARATION (Check one)					
9. CHARACTER OF SERVICE (Check one)					
10. SPECIAL COMMENTS					
11. SIGNATURE OF COMMANDING OFFICER					
12. SIGNATURE OF ENLISTED MAN					



Honorable Discharge

*This is to certify that*

*Army of the United States*

*is hereby Honorably Discharged from the military service of the United States of America.*

*This certificate is awarded as a testimonial of Honest and Faithful Service to this country.*

Given at \_\_\_\_\_

Date \_\_\_\_\_

*K. H. Rimmer*

COPY

STANDARD FORM 57-NOV. 1947  
U. S. CIVIL SERVICE COMMISSION

## APPLICATION FOR FEDERAL EMPLOYMENT

COPY

**INSTRUCTIONS:** In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type, write or print in INK. In applying for a specific United States Civil Service position, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

<p><b>APPLICATION NO.</b></p>	<p>1. NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR <b>CIG</b></p> <p>2. OPTION(S) (if mentioned in examination announcement)</p> <p>3. PLACE OF EMPLOYMENT APPLIED FOR (City and State)</p> <p>4. DATE OF THIS APPLICATION</p> <p>5. NAME (First name) (Middle) (Maiden, if any) (Last) <b>JACQUES CARTEL RICHARDSON</b></p> <p>6. (A) STREET AND NUMBER OR R. D. NUMBER <b>Hickenbacker Road, Waga Est.</b> (B) CITY OR POST OFFICE (including postal zone) AND STATE <b>Essex 21, Maryland</b></p> <p>7. LEGAL OR VOTING RESIDENCE (State) (A) OFFICE PHONE (B) HOME PHONE <b>Maryland</b></p> <p>8. DATE OF BIRTH (month, day, year) <b>JANUARY 20, 1924</b></p> <p>9. PLACE OF BIRTH (city and State; if born outside U. S., name city and country) <b>Baltimore, Maryland</b></p> <p>10. <input type="checkbox"/> MARRIED <input checked="" type="checkbox"/> SINGLE</p> <p>11. <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE 12. (A) HEIGHT WITHOUT SHOES: <b>5 FEET 10 INCHES</b> (B) WEIGHT: <b>145 POUNDS</b></p> <p>13. (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (B) IF NO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE <b>Second Lt., 16 July 1946</b></p>	<p style="text-align: center;"><b>DO NOT WRITE IN THIS BLOCK</b> For Use of Civil Service Commission Only</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><input type="checkbox"/> APPROVED</td> <td style="width: 33%;"><input type="checkbox"/> MATERIAL SUBMITTED</td> <td style="width: 33%;"><input type="checkbox"/> ENTERED REGISTER</td> </tr> <tr> <td><input type="checkbox"/> NOT APPROVED</td> <td><input type="checkbox"/> RETURNED</td> <td></td> </tr> </table> <p>NOTATIONS: _____</p> <p>APPROVED: _____</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>OPTION</th> <th>GRADE</th> <th>EARNED RATING</th> <th>PREFERENCE</th> <th>ALLOW RATING</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 5 POINTS (CENT.)</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 10 POINTS</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> WIFE OR WIDOW</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> DISAL.</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> BEING INVESTIGATED</td> <td></td> </tr> </tbody> </table> <p>INITIALS AND DATE</p>	<input type="checkbox"/> APPROVED	<input type="checkbox"/> MATERIAL SUBMITTED	<input type="checkbox"/> ENTERED REGISTER	<input type="checkbox"/> NOT APPROVED	<input type="checkbox"/> RETURNED		OPTION	GRADE	EARNED RATING	PREFERENCE	ALLOW RATING				<input type="checkbox"/> 5 POINTS (CENT.)					<input type="checkbox"/> 10 POINTS					<input type="checkbox"/> WIFE OR WIDOW					<input type="checkbox"/> DISAL.					<input type="checkbox"/> BEING INVESTIGATED	
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			<input type="checkbox"/> WIFE OR WIDOW																																			
			<input type="checkbox"/> DISAL.																																			
			<input type="checkbox"/> BEING INVESTIGATED																																			

14. (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ **2,750** PER YEAR  
You will not be considered for any position with a lower entrance salary.

15. CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR:  
☐ 1 TO 3 MONTHS ☐ 3 TO 6 MONTHS ☒ 6 TO 12 MONTHS  
NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.

16. IF YOU ARE WILLING TO TRAVEL, SPECIFY:  
☐ OCCASIONALLY ☒ FREQUENTLY ☐ CONSTANTLY

17. EXPERIENCE: It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing agency to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.

(a) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

1. PRESENT POSITION			
DATES OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR PRESENT POSITION	CLASSIFICATION GRADE (if in Federal Service)	SALARY OR EARNINGS: STARTING \$ PER PRESENT \$ PER
FROM TO PRESENT TIME			
PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR		
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name Department, bureau or establishment, and division)	KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silk, insurance agency, manufacture of locks, etc.)		
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	REASON FOR DESIRING TO CHANGE EMPLOYMENT		
DESCRIPTION OF YOUR WORK			
EAR DEPARTMENT			

(CONTINUED ON NEXT PAGE)

12-55946-2

[illegible]



⑤ DATES OF EMPLOYMENT (month, year) FROM _____ TO _____		LAST TITLE OF YOUR POSITION _____		CLASS OF SERVICE (if Federal service) ( ) Civil ( ) Military ( ) Naval		SALARY OR EARNINGS: STARTING \$ _____ PER _____ FINAL \$ _____ PER _____	
PLACE OF EMPLOYMENT (city and State)				NAME AND TITLE OF IMMEDIATE SUPERVISOR			
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)				KIND OF BUSINESS OR ORGANIZATION (e. g., wholesale silt, insurance agency, manufacture of locks, etc.)			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU				REASON FOR LEAVING			
DESCRIPTION OF YOUR WORK							
If more space is required, use a continuation sheet (Standard Form No. 54) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.							
17. MILITARY TRAINING. In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service schools you attended is especially important. (State pages may be used to give full descriptions.)							
DATES FROM _____ TO _____		LOCATION		DESCRIPTION OF TRAINING			
Jan. 45 - Dec. 45		Ann Arbor, Michigan AIRC, U. of Michigan		language, customs, sociology, how-and-why of history and economic aggression. Written _____ (Continued)			
18. EDUCATION. (Circle highest grade completed): 1 2 3 4 5 6 7 8 9 10 11 ( )							
MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION OF: <input type="checkbox"/> ELEMENTARY SCHOOL <input type="checkbox"/> JUNIOR HIGH SCHOOL <input checked="" type="checkbox"/> SENIOR HIGH SCHOOL				(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED High School of Montreal			
(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY Sir Geo. Williams College Trinity College, Conn. U. Michigan, Ann Arbor				(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED English, French, physics, history.			
MAJOR AND SPECIALTY Fren Fren Jap		DATES ATTENDED FROM TO Sep 40 May 42 Sep 42 Dec 42 Jan 45 Dec 45		YEARS COMPLETED DAY NIGHT 2 4 2		DEGREES CONFERRED TITLE DATE B. Feb 47	
(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS English 15 12 24		LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS 15 12 24		(E) OTHER TRAINING, SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED FORCES INSTITUTE (show name and location of school) OR "IN SERVICE TRAINING" IN PUBLIC OR PRIVATE EMPLOYMENT USAFI		SUBJECTS STUDIED Journalist	
DATES ATTENDED FROM TO Apr 47 Pres		YEARS COMPLETED DAY NIGHT 2		DEGREES CONFERRED TITLE DATE B. Feb 47		(F) ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO GIVE KIND OF LICENSE AND STATE: FIRST LICENSE OR CERTIFICATE (YEAR): LATEST LICENSE OR CERTIFICATE (YEAR):	
19. INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES READING SPEAKING UNDERSTANDING ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		20. IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRY, INDICATE ( ) NAMES OF COUNTRIES ( ) DATES AND LENGTH OF TIME SPENT THERE, AND ( ) REASON OR PURPOSE (e. g., military service, business, education) Canada 3 mos, 1927; 3 mos, 1944 1927-1942 1 yr		21. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTITHIN, COMPTON, ETC., KEY-PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES All cine equipt; teletypes; short-wave-receivers & transmitters.		22. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS: ( ) YOUR MORE IMPORTANT EDUCATIONS (do not submit copies unless requested) ( ) YOUR PATENTS OR INVENTIONS ( ) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE ( ) MEMBERSHIP IN PROFESSIONAL OR SCIENTIFIC SOCIETIES, ETC. ( ) HONORS AND FELLOWSHIPS RECEIVED Public relations as interpreter in ETO and Censor and review-editor of _____ press, radio and motion-picture fields.	
APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING _____ SHORTHAND _____							

24. REFERENCES List three persons living in the United States Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and status for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE).			
FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION	
1. Col. Kai E. Rasmussen	(Washington 25 DC) Diplomatic Sec. Far East, AS	Mil. Attache	
2. Mr. Yutaka Munakata	Academic Sec. MISIS, Calif.	Instructor	
3. Lt. L.B. McNeil	1928 McKinley Ave, Honolulu, T.H.	CIC	
INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN			
25. MAY INQUIRY BE MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?	YES NO	26. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?	YES NO
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X	27. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 12 MONTHS?	X
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY U.S.A. OR ANY COMMUNIST ORGANIZATION?	X	28. DOES THE UNITED STATES GOVERNMENT EMPLOY IN A CIVILIAN CAPACITY ANY RELATIVE OF YOURS (BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 12 MONTHS?	X
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?	X	<b>SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE</b> A. If you are claiming preference as a PEACETIME VETERAN who has been awarded a campaign badge or service ribbon, or as a DISABLED VETERAN, or as the WIFE OF A DISABLED VETERAN, or as the WIDOW OF A WAR OR CAMPAIGN VETERAN, attach Veteran Preference Claim, Form 14, together with proof specified therein. B. If you are a WAR-TIME VETERAN not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if approved, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in kind of war.	
29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTURE, A FORM OF GOVERNMENT, OR AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPEALING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO OBTAIN OR OTHER PURPOSES THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?	X	30. (a) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR? (b) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION? (c) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES? (d) DATE OF ENTRY ON ACTIVE SERVICE: <u>15 Feb 1943</u> DATE OF SEPARATION OR SEPARATIONS: <u>Present</u> BRANCH OF SERVICE (Army, Navy, Marine Corps, Coast Guard, etc.): <u>Army</u> SERIAL NO. (if none, give grade or rating at time of separation): <u>31316266; 0-57200</u>	
30. SINCE YOUR 16TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROSECUTION, OR CONVICED, FINED, OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO PAY BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORTHTURE OF \$25 OR LESS WAS IMPOSED)?	X	31. (a) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE (INCLUDING RESERVE), DID YOU PARTICIPATE IN A CAMPAIGN OR BATTLE ACTION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON? (b) ARE YOU A DISABLED VETERAN? If so, and you have not listed your disability in answer to Item 33, explain in Item 39 below. (c) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED? (d) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE CONNECTED DISABILITY WHICH QUALIFIES HIM FOR CIVIL SERVICE APPOINTMENT?	
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?	X	<b>THIS SPACE FOR USE OF APPOINTING OFFICER ONLY</b> The information contained in the answers to Question 27 above has been verified by comparison with the discharge certificate on _____, 19____.	
32. HAVE YOU EVER BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?	X	Agency: _____ Title: _____ 33. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)	
33. If your answer is "Yes," give dates of and reasons for such debarment in Item 39.	X	Item 33: <u>Hernia, inguinal - repairable.</u>	
If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.			
Before signing this application check back over it to make sure that you have answered ALL questions correctly. I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80).			
SIGNATURE OF APPLICANT _____ (Sign your name in INK (once, please Miss or Mrs. and if necessary, give your own given name as "Mrs. Mary L. Doe")			

JACQUES GABRIEL RICHARDSON

17. MILITARY TRAINING (continued)

Rating received at end of this training: Tec 4

Duty assignment or rating after this training: Assignment to MISIS.

Dates of duty assignment: Jan 1946 to Aug. 1946

Second Special Service School attended: MISIS, Fort Snelling, Minn.

Location: Fort Snelling, 11, Minnesota

Dates Attended: Jan 1946 To: Aug. 1946

Rating received at end of this training: Second Lieutenant

What were you taught in Second Special Service School? Order of battle, military terms of the Japanese armed forces.  
Civil affairs, military administration of occupied areas, propaganda writing.

Duty assignment after this training: Student; translator; instructor.

What did you do during this duty assignment? Translated newspaper articles, ordinances, SCAP directives, etc. [redacted] Made instructor's guides for civil affairs courses.

S E C R E T

Date: 13 October 1963

MEMORANDUM FOR: Chief, Personnel Security Division/Office of Security

SUBJECT: Richardson, Regue(P): Your Number 37833

1. In compliance with paragraph four (4) of your latest memorandum, subject as above, clearance to cover the following proposed change in Subject's status and/or use is hereby requested:

Ops Officer	Position Title	Ops Officer
GS-15	Grade	GS-15
DDP/SR Foreign Field Western European Area Paris, France	Orgn Designation	DDP/WE Paris Station External Ops Station
Paris, France	Headquarters	Paris, France

2. Changes other than specified above:

3. The proposed effective date of this change is: 13 October 1963.

*Joseph B. Ragan*  
JOSEPH B. RAGAN  
Chief, Contract Personnel Division

Date 18 OCT 1963

Security Approval has been granted for  
the use requested by this request

*W. J. Smith*  
Chief, Personnel Security Division

S E C R E T

*Due*

SECRET  
(When filled in)

DATE: 31 July 1962

MEMORANDUM FOR: Chief, Contract Personnel Division

ATTENTION : Staff Agents Branch

FROM : Chief, Personnel Security Division

SUBJECT : *Richardson* ~~XXXXXXXXXX~~ #37833

1. Reference is made to your memorandum dated 24 July 1962 in which a covert security clearance was requested to permit Subject's use as a Staff Agent, GS-14, by DDP/SR in the capacity of Operations Officer at Paris, France.

2. This is to advise that a covert security clearance is granted for the use of the Subject, as described in your request as set forth in paragraph 1, above.

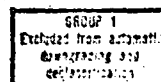
3. If your office should desire at a later date to change the status or use of this individual, a request to cover any proposed change should be submitted to this office.

4. This clearance becomes invalid in the event that Subject's services are not utilized within six months of the date of this memorandum.

FOR THE DIRECTOR OF SECURITY:

*W. A. Osborne*  
W. A. Osborne *W*

SECRET  
(When filled in)



PERSONAL HISTORY STATEMENT - (Appendix I)

Listed below are names of organizations identified by the Attorney General, under his responsibility pursuant to Executive Order 9835, dated 21 March 1947, to list the names of each foreign or domestic organization, association, movement, group or combination of persons which he, after appropriate investigation and determination, designates as Totalitarian, Fascist, Communist, or subversive, or as having adopted a policy of advocating or approving the commission of acts of force or violence to deny others their rights under the Constitution of the United States, or as seeking to alter the form of government of the United States by unconstitutional means.

Each applicant must review the following list of organizations for certification purposes, and signature on the last page.

Abraham Lincoln School, Chicago, Illinois  
 American Association for Reconstruction in Yugoslavia, Inc.  
 American Committee for Protection of Foreign Born  
 American Committee for Yugoslav Relief, Inc.  
 The American Council for a Democratic Greece, formerly known as the Greek American Council; Greek American Committee for National Unity  
 American Croatian Congress  
 American League Against War and Fascism  
 American League for Peace and Democracy, successor to American League Against War and Fascism and predecessor of American Peace Mobilization  
 American Patriots, Inc.  
 American Peace Mobilization  
 American Polish Labor Council  
 American Russian Institute of San Francisco  
 American Slav Congress  
 American Youth Congress  
 American Youth for Democracy  
 Armenian Progressive League of America  
 Association of German Nationals (Reichsdeutsche Vereinigung)  
 Ausland-Organisation der NSDAP, Overseas Branch of Nazi Party  
 Black Dragon Society  
 California Labor School, Inc., 215 Market Street, San Francisco, California  
 Central Council of American Women of Croatian Descent, also known as Central Council of American Croatian Women, National Council of Croatian Women  
 Central Japanese Association (Beikoku Chu Nipponjin Kai)  
 Central Japanese Association of Southern California  
 The Central Organization of the German-American National Alliance (Deutsche-Amerikanische Einheitsfront)  
 The Citizens Protective League  
 Civil Rights Congress and its affiliated organizations and branches.

The Columbians  
Communist Party, U.S.A., formerly Communist Political  
Association, and its affiliates and committees,  
including:

Citizens Committee of the Upper West Side  
(New York City)  
Committee to Aid the Fighting South  
Dennis Defense Committee  
Labor Research Association, Inc.  
Southern Negro Youth Congress  
United May Day Committee  
United Negro and Allied Veterans of America  
Congress of American Revolutionary Writers  
Congress of American Women  
Connecticut State Youth Conference  
Council on African Affairs  
Council for Pan-American Democracy  
Dai Nippon Butoku Kai (Military Virtue Society of  
Japan or Military Art Society of Japan)  
Dante Alighieri Society  
Federation of Italian War Veterans in the U.S.A., Inc.  
(Associazione Nazionale Combattenti Italiani,  
Federazione degli Stati Uniti d' America)  
Friends of the New Germany (Freunde des Neuen Deutschlands)  
Friends of the Soviet Union and its successor  
American Council on Soviet Relations, both predecessors  
of the National Council of American Soviet Friendship  
George Washington Carver School, New York City  
German-American Bund (Amerikadeutscher Volksbund)  
The German-American Republican League  
German-American Vocational League (Deutsche-Amerikanische  
Berufsgemeinschaft)  
Heimusha Kai, also known as Hokubei Heicki Gimusha Kai,  
Zaibei Nihonjin, Heiyaku Gimusha Kai, and Zaibei  
Heimusha Kai (Japanese Residing in America Military  
Conscripts Association)  
Hinode Kai (Imperial Japanese Reservists)  
Hinomaru Kai (Rising Sun Flag Society - a group of  
Japanese War Veterans)  
Hokubei Zaigo Shoko Dan (North American Reserve Officers  
Association)  
Hollywood Writers Mobilization for Defense  
Hungarian-American Council for Democracy  
International Labor Defense  
International Workers Order, including People's Radio  
Foundation, Inc.  
Japanese Association of America  
Japanese Overseas Central Society (Kaigai Dobo Chuo Kai)

Japanese Overseas Convention, Tokyo, Japan, 1940  
 Japanese Protective Association (Recruiting Organization)  
 Jefferson School of Social Science, New York City  
 Jewish Peoples Committee  
 Jikyoku Iin Kai (Current Affairs Association)  
 Joint Anti-Fascist Refugee Committee  
 Kibei Seinen Kai (Association of U. S. Citizens of  
 Japanese Ancestry who have returned to America after  
 studying in Japan)  
 Ku Klux Klan  
 Kyffhaeuser, also known as Kyffhaeuser League  
 (Kyffhaeuser Bund), Kyffhaeuser Fellowship  
 (Kyffhaeuser Kameradschaft)  
 Kyffhaeuser War Relief (Kyffhaeuser Kriegshilfswerk)  
 League of American Writers  
 Lictor Society (Italian Black Shirts)  
 Macedonian-American People's League  
 Mario Morgantini Circle  
 Michigan Civil Rights Federation  
 Nanka Tokoku Ganyudan (Imperial Military Friends  
 Group or Southern California War Veterans)  
 National Committee for the Defense of Political Prisoners  
 National Committee to Win the Peace  
 National Council of American-Soviet Friendship  
 National Council of Americans of Croatian Descent  
 National Federation for Constitutional Liberties  
 National Negro Congress  
 Nature Friends of America (since 1935)  
 Negro Labor Victory Committee  
 New Committee for Publications  
 Nichibei Kogyo Kaisha (The Great Fujii Theatre)  
 Northwest Japanese Association  
 Ohio School of Social Sciences  
 The Peace Movement of Ethiopia  
 Peoples Educational Association (Incorporated under  
 name Los Angeles Educational Association, Inc.), also  
 known as Peoples Educational Center, Peoples University,  
 People's School  
 People's Institute of Applied Religion  
 Philadelphia School of Social Science and Art  
 Photo League (New York City)  
 Proletarian Party of America  
 Protestant War Veterans of the U.S., Inc.  
 Revolutionary Workers League  
 Sakura Kai (Patriotic Society, or Cherry Association -  
 composed of veterans of Russo-Japanese War)  
 Samuel Adams School, Boston, Massachusetts  
 School of Jewish Studies, New York City  
 Seattle Labor School, Seattle, Washington  
 Serbian Vidovdan Council  
 Shinto Temples



- 4 -

Silver Shirt Legion of America  
 Slovenian-American National Council  
 Socialist Workers Party, including American Committee  
 for European Workers' Relief  
 Sokol Hall (Fatherland Society)  
 Suiko Sea (Reserve Officers Association Los Angeles)  
 Tom Paine School of Social Science, Philadelphia,  
 Pennsylvania  
 Tom Paine School of Westchester, New York  
 United Committee of South Slavic Americans  
 United Harlem Tenants and Consumers Organization  
 Veterans of the Abraham Lincoln Brigade  
 Walt Whitman School of Social Science, Newark, New Jersey  
 Washington Book Shop Association  
 Washington Committee for Democratic Action  
 Wisconsin Conference on Social Legislation  
 Workers Alliance  
 Workers Party, including Socialist Youth League  
 Young Communist League

I certify that I have read the names of the above-listed organizations, and that I am not, nor have I been, a member of; that I have not contributed to, received literature from, or attended meetings of any organization listed, except as indicated and explained below:

(Organization)	(Dates of Membership)

Remarks:

SIGNED AT Washington, D.C.  
 (City and State)  
Kenneth E. Doyle  
 (Witness)  
E. J. J.  
 (Address)

DATE 11 January 1949  
Jaques L. Richardson  
 (Signature)

**SECRET**

## SECURITY APPROVAL

~~CONFIDENTIAL~~

To : ~~XXXXXXXXXXXX~~ Deputy Personnel Officer Date: 10 June 1949  
 From : Chief of Inspection and Security Number: 37833  
 Subject: RICHARDSON, Jacques Gabriel

## 1. Note "X" below:

☒ Security approval is granted subject for access to classified information contingent upon the receipt of derogatory information at some future date.

☐ Provisional clearance for full duty with CIA is granted under the provisions of paragraph 4, Administrative Instruction 10-2, which provides for a temporary appointment pending the completion of full security investigation.

☒ Unless the applicant enters upon duty within 60 days from above date this approval becomes invalid.

## 2. Your memorandum dated 14 March 1949 stated Subject is an applicant for OPC.

*HC 17 July 50*

*[Signature]*  
 EMIL P. GELB

Chief, Personnel Security Division

*Branch notified  
 14 June  
 C.D.*

~~CONFIDENTIAL~~**SECRET**