

# Investigative Transmittal Sheet

RETURN TO CIA  
Background Use Only  
Do Not Reproduce

SUBJECT: **HICKS, Calvin W.**  
TITLE AND GRADE: **GS-13**  
TYPE:

DATE: *7 April 67*  
NUMBER: **43133**  
CATEGORY: **Employee**  
REC'D OS

The subject case is herewith submitted for limited investigation, as follows:

*If at any time investigation should develop information which would constitute grounds for approval or disapproval, the case should be closed and the reports forwarded to us.*

1. Name Checks As Follows:

RETURN WHEN COMPLETED.

AGENCY	PRIOR RETURNS
<input checked="" type="checkbox"/> FBI	
ONI	
ACSI	
STATE (BY)	
STATE (PD)	
<input checked="" type="checkbox"/> CSC	

AGENCY	PRIOR RETURNS
HCUA	
OSI (HDQ)	
OSI 4TH DIST.	
I & N	
CSIF	

**RECORDED  
CONTROL DESK**

THE FOLLOWING AGENCY MAY HAVE REPORTS ON FILE:

2. The Following Additional Government Records Are To Be Checked On The Subject Person:

MILITARY SERVICE			
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3. The Following Additional Government Records Are To Be Checked On The Person or Persons Indicated:

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4. Field Investigation, As Follows:

AREA	EMPLOYMENT	EDUCATION	BIRTH	DEV INF	N'BOR HOOD	POL	CRED	SPEC COV
Washington, D.C. and vicinity					A	X	X	B

Special Coverage As Follows:

### Reinvestigation Program

A. Neighborhood - (10207 Forest Avenue, Fairfax, Va.)

B. Interview subject's supervisor: (Dave Smock) 03  
5337  
3B 2627 HQ

*ncw*

The following persons who have applied to or work in this agency may know or be related to subject:

NAME	NUMBER	LOCATION	RELATIONSHIP
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ATTACH: 3 PHS

*2/DO*