

JFK ASSASSINATION SYSTEM
IDENTIFICATION FORM

AGENCY INFORMATION

AGENCY : CSF/INSCOM
RECORD NUMBER : 194-10006-10178
RECORDS SERIES : DOD-AFFILIATED PERSONNEL INCIDENT INVESTIGATIONS
AGENCY FILE NUMBER : PAGES 635-636

DOCUMENT INFORMATION

ORIGINATOR : USA
FROM : DIETRICH, DAN H JR
TO : CG, USA INTEL CMD
TITLE : [RESTRICTED]
DATE : 10/05/66
PAGES : 2
SUBJECTS : SCHEER, ROBERT

REQUESTED ACTION

CLEARANCE AND/OR ACCESS

LATEST INVESTIGATION/CLEARANCE

TYPE OF INVESTIGATION

RESULTS OF PERSONNEL SECURITY ACTION

REQUEST FOR AND RESULT OF PERSONNEL SECURITY ACTION

DOCUMENT TYPE : PAPER, TEXTUAL DOCUMENT
CLASSIFICATION : UNCLASSIFIED
RESTRICTIONS : 3
CURRENT STATUS : RELEASED WITH DELETIONS
DATE OF LAST REVIEW : 03/07/95
OPENING CRITERIA :
COMMENTS :

Released under the John F. Kennedy
Assassination Records Collection Act of
1992 (44 USC 2107 Note). Case#:NW
64954 Date: 09-22-2022

REQUEST FOR AND RESULTS OF PERSONNEL SECURITY ACTION
(AR 381-130)

TO: (Control Office) CG, USA Intelligence Cmd ATTN: ACoFS, CONOPS PO Box 398 Fort Holabird, Md 21219	THRU: CG, USAREC ATTN: Security Officer Fort Monroe, Va 23351	FROM: (Requesting Agency) CO, AFEES 1515 Clay Street Oakland, California
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(Enter name and address of the ACTION AGENCY to which results are to be sent, if known by requester)

CHIEF, USAPSG
ATTN: Adjudication Branch
Fort Holabird, Md 21219

CONTROL OFFICE USE ONLY	
REQUIREMENT	REQUEST NO.
DOSSIER NO.	OPENING DATE
REMARKS	

SECTION I - REQUESTER TO CONTROL OFFICE

1. SUBJECT <i>(Last name in capitals, first and middle names)</i> SCHEER, Robert (NMN)	2. ALIAS(ES), WIDE NAME None	3. SERVICE SOCIAL SECURITY NO. JFK Act 5 (g) (2) (D)
4. DATE OF BIRTH <i>(Day, Month, Year)</i> 4 April 1936	5. PLACE OF BIRTH <i>(City, State and country)</i> Bronx, New York, New York, USA	6. GRADE AND POSITION N/A

7. REQUESTED ACTION INVESTIGATION VALIDATION RECORDS CHECK

8. TYPE OF INVESTIGATION: <input type="checkbox"/> NAC <input type="checkbox"/> NACI <input type="checkbox"/> BI <input type="checkbox"/> OTHER <i>(Explain in Item 15)</i>	9. a. FOR CLEARANCE AND/OR ACCESS TO: <input type="checkbox"/> TOP SECRET <input type="checkbox"/> SECRET <input type="checkbox"/> CONFIDENTIAL b. <input type="checkbox"/> FOR LIMITED ACCESS AUTHORIZATION c. <input type="checkbox"/> INTERIM CLEARANCE DESIRED d. <input checked="" type="checkbox"/> OTHER <i>(Explain in Item 15)</i>
10. TO DETERMINE SUITABILITY FOR: Induction	11. JUSTIFICATION PAR 18, AR 604-10

12. REVIEW OF FILES REQUIRED BY PARAGRAPH AR 604-5, COMPLETED ON REVEALED:
 NO UNFAVORABLE INFORMATION UNFAVORABLE INFORMATION DETERMINED NOT TO BE A BAR TO ACTION
 INFORMATION SUMMARIZED IN ITEM 15

13. LATEST INVESTIGATION/CLEARANCE *(Type, when, by whom)*
N/A

14. NO BREAK IN FEDERAL SERVICE EXCEEDING SIX MONTHS SINCE
N/A

15. REMARKS *(If unfavorable information entered, transmit in sealed envelope thru intelligence channels.)*
Request investigation of registrant in view of remarks made by registrant in remarks section of DD Form 98 and DD Form 398.

Headquarters
 US Army Recruiting Command
 Hampton, Virginia 23369

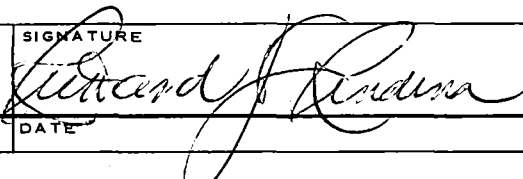
INCLS 2	TYPED NAME AND TITLE MYRON K. HAYASHIDA 1, LT, AGC	SIGNATURE
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SECTION II - CONTROL OFFICE TO REQUESTER

16. NEW FINGERPRINT CARD REQUIRED
 ITEMS ON SPH (PSQ) REQUIRE CORRECTION AND/OR COMPLETION.
 INTERIM REPORT FORWARDED. REQUEST REPORT OF ACTION TAKEN AND RETURN OF INCLOSURES UPON COMPLETION.

INCLS	TYPED NAME AND TITLE 035	SIGNATURE
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SECTION III - REQUESTOR TO CONTROL OFFICE			DATE		
17. REPORT OF ACTION <input type="checkbox"/> INFORMATION NOTED <input type="checkbox"/> SUBJECT REASSIGNED TO NON-SENSITIVE DUTIES, INVESTIGATION MAY BE CANCELED. <input type="checkbox"/> INFORMATION CONSIDERED NO BAR TO CLEARANCE. REQUEST COMPLETION OF INVESTIGATION.					
18. SUBJECT WAS TRANSFERRED					
TO		HEADQUARTERS		PER	DATED
19. REMARKS (If returning corrected forms, state here)					
INCLS			TYPED NAME AND TITLE		SIGNATURE
SECTION IV - CONTROL OFFICE TO ACTION AGENCY			DATE		
20. RESULTS OF PERSONNEL SECURITY ACTION <input type="checkbox"/> NO RECORD <input type="checkbox"/> FAVORABLE <input type="checkbox"/> MINOR UNFAVORABLE INFORMATION RECORDED IN ITEM 21 <input type="checkbox"/> PRIOR INVESTIGATION INSUFFICIENT FOR ACTION CONTEMPLATED IF NEEDED, INITIATE REQUEST FOR INVESTIGATION. <input checked="" type="checkbox"/> FORWARDED FOR SECURITY DETERMINATION BY CLEARING AUTHORITY					
TYPE OF INVESTIGATION		COMPLETED BY		DATE	DOSSIER NUMBER
<input type="checkbox"/> NAC <input type="checkbox"/> NACI <input type="checkbox"/> BI <input checked="" type="checkbox"/> OTHER		USAINTC		16 Feb 67	H1 01 69 40
21. REMARKS					
a. THIS FORM, TOGETHER WITH ANY INCLOSURES, REPORT OF ACTION TAKEN AND USACRF COPY OF DA FORM 873 (if appropriate) WILL BE RETURNED TO THE CONTROL OFFICE WITHIN _____ DAYS AFTER RECEIPT. b. IN THE EVENT SUBJECT HAS BEEN TRANSFERRED FROM YOUR COMMAND, THIS FORM AND INCLOSURES WILL BE RETURNED IMMEDIATELY WITH ITEM 23 COMPLETED. c. ATTENTION IS INVITED TO: PARAGRAPHS _____ AR 604-5; PARAGRAPH _____ AR 604-11; PARAGRAPH _____ AR 640-98; AND PARAGRAPH _____ AR 381-130, AS APPLICABLE.					
INCLS		TYPED NAME AND TITLE		SIGNATURE	
DOSSIER H101 69 40		DAN H. DIETRICH, JR. Lt Col, AIS, Chief, Ops III			
SECTION V - ACTION AGENCY TO CONTROL OFFICE			DATE		
22. REPORT OF ACTION					
<input type="checkbox"/> FAVORABLE DETERMINATION, USACRF COPY DA FORM 873 ATTACHED <input type="checkbox"/> UNFAVORABLE DETERMINATION, RECOMMENDED ACTION IN ITEM 24 <input type="checkbox"/> REQUEST ADDITIONAL INVESTIGATION AS INDICATED IN ITEM 24					
23. SUBJECT WAS TRANSFERRED					
TO		HEADQUARTERS		PER	DATED
24. REMARKS					
INCLS TYPED NAME AND TITLE SIGNATURE 3 AND BEZOP... (VK 381-130)					

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