

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

FILE TITLE/NUMBER/VOLUME: HIDALGO, P. J.
OP FILE

INCLUSIVE DATES: _____

CUSTODIAL UNIT/LOCATION: _____

ROOM: _____

DELETIONS, IF ANY: PERSONAL MATERIAL & SENSITIVE OPS

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
9/1/76	9/9/76	DAN HARDWAY	Dan Hardway

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Personal - Post agency
activity

SECRET

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 027630				2 NAME (Last-First-Middle) HIDALGO, BARBARA N, JR.	
3 NATURE OF PERSONNEL ACTION RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 28 70		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS <input checked="" type="checkbox"/> S.F.O. <input type="checkbox"/> O.F.O.		7 FINANCIAL ANALYSIS NO. CHARGEABLE 0235 0620		8 LEGAL AUTHORITY (Completed by 11 Dec. of Personnel) PL 91-353 SEC. 2.3	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 PANAMA SECTION			10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.		
11 POSITION TITLE OPS OFFICER			12 POSITION NUMBER 1318	13 CAREER SERVICE DESIGNATION D.	
14 CLASSIFICATION SCHEDULE (GS, ZB, etc.) GS		15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 12 5	17 SALARY OR RATE \$15,173	
18 REMARKS <i>Excurs</i> SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970. <i>NOT Recommended in Agency Reserve Program due to Health of Applicant see 131 Dulank W.H/P/S</i> 1 - FINANCE					
18A SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> HENRY L. BEETHOLD, CWH/PERS		DATE SIGNED 26 FEB 70	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 27 FEB 70
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 45 10	20 EMPLOY CODE	21 DATE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTEGRITY CODE
24 POSTS	25 DATE OF BIRTH MO DA YR 05 27 19		26 DATE OF GRADE MO DA YR		27 DATE OF LEI MO DA YR
28 WTE EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA - CSC - CRA - FICA - RORL	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA EOD DATA →	
33 SECURITY REG NO	34 SER	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 TAB RES PROY TEMP
39 LEGAL HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	40 HEALTH INS CODE	41 SOCIAL SECURITY NO	42 FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO	43 FEDERAL TAX DATA CODE	44 STATE TAX DATA NO TAX EXEMPTIONS FORM EXECUTED CODE 1 - YES 2 - NO
45 STATE TAX DATA CODE	46 NO TAX STATE CODE (EXEMPT)	47 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (150-2000 3 YEARS) 3 - BREAK IN SERVICE (MORE THAN 3 YEARS)	48 LEAVE CAT CODE	49 C.F. APPROVAL <i>[Signature]</i>	DATE APPROVED 3/1/70

FORM 1152 USE PREVIOUS EDITION 3-67

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE (Date) FOR THE FOLLOWING REASON MAR 2 10 20 AM '70

MY LAST WORKING DAY WILL BE DATE SIGNED SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code) 403 Silver Rock Rd. Rockville, Maryland 20851

INSTRUCTIONS

Items 1 thru 7, and Items 9 thru 18a - The initiating office should fill in each of the referenced items. 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 Part Time Temporary Temporary-Part Time Summer Detail-Out Detail-In WAE Consultant Military

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

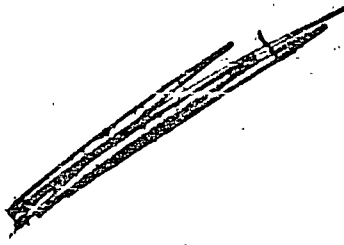
- FIRST LINE Major Component (Director, Deputy Director, etc.) Office, Major Staff, etc. Foreign Field or U.S. Field (if pertinent) Division or Staff (subordinate to first line) Branch Section Unit

Items 11 and 15 - "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.

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 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET



MEDICAL

2 JUL 1969

MEMORANDUM FOR: Mr. Balmes N. Hidalgo, Jr.

SUBJECT : Exceptional Service Emblem

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.

2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert C. Wattles
Director of Personnel

Distribution:

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BSD/HMAB

SECRET

24 June 1969

MEMORANDUM FOR: Baltes N. Hidalgo

VIA : WR/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.

2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.

3. A copy of this memorandum will be placed in your official personnel folder.


EDWARD A. MARELIUS
DDP Records Management Officer

cc: Personnel File of Addressee

SECRET

GROUP I
Excluded from automatic
downgrading and
declassification

SENSITIVE OPERATIONAL

1968

SECRET

G 38

REQUEST FOR PERSONNEL ACTION					DATE PREPARED				
1. SERIAL NUMBER: 027630					NAME (Last-First-Middle): HIDALGO, EMANUEL N., JR.				
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM			4. EFFECTIVE DATE REQUESTED MONTH: 08 DAY: 14 YEAR: 66		5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> C TO V			7. COST CENTER NO. CHARGEABLE 7235-0620		8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203				
9. ORGANIZATIONAL DESIGNATIONS DDP/WH			10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.						
11. POSITION TITLE			12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION-SCHEDULE (GS, FS, FA)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP 12		17. SALARY OR RATE s			
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.									
18A. SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				
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. INTEGRATE CODE	24. MOOTED CODE	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. RTE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-ISC 2-FICA 3-NONE CODE 2		31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.			33. SECURITY REG NO.	34. SER
35. VET PREFERENCE CODE 0-NONE 1-1 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-NONE 1-YES		40. SOCIAL SECURITY NO. f		
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 NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE		
45. POSITION CONTROL CERTIFICATION 0276-041				46. O P APPROVAL See memo signed by D/Pers dated 26 JUL 1966			DATE APPROVED		

SECRET

REQUEST FOR PERSONNEL ACTION						DATE PREPARED: 10 DECEMBER 1965	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HIDALGO, BAZYES N.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE/REQUESTED MONTH DAY YEAR DEC 19 65		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS <input checked="" type="checkbox"/> X		V TO V <input type="checkbox"/>		V TO O <input type="checkbox"/>		8. LEGAL AUTHORITY (As required by Office of Personnel)	
		O TO V <input type="checkbox"/>		O TO O <input type="checkbox"/>		7. CENTER NO. CHARGE 6235 - 0620	
9. ORGANIZATIONAL DESIGNATIONS DOP/WH BRANCH 2 PANAMA SECTION				10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.			
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER (GS-12) 1318		13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (G.S. 1.B. et al.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 -2		17. SALARY OR RATE \$ -10,987
18. REMARKS FROM: WH/C/MIAMI OPS BR/FT SECTION/5235 - 1162/1145/WASHINGTON, D. C.							
1 - FINANCE						Recorded by CSPD <i>[Signature]</i>	
18A. SIGNATURE OF REQUESTING OFFICER ROBERT D. CASHMAN C/WH/PERSONNEL				DATE SIGNED <i>[Signature]</i>		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	
37		11		57370 WH		2513	
28. WTE EXP. RES.		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA	
NO. DA. YR.		1-CSC 2-FICA 3-None		CODE		DATE CODE	
						EOD DATA	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER DESIGNATION	
CODE		MO DA. YR.		MO DA. YR.		CODE	
1-None 2-10 yr						39. FEDERAL HEALTH INSURANCE	
						CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE ENT CODE		43. FEDERAL TAX DATA	
CODE				CODE		CODE	
1-NO PREVIOUS SERVICE 2-NO PREVIOUS SERVICE 3-SEPAR IN SERVICE (LESS THAN 3 YEARS) 4-SEPAR IN SERVICE (MORE THAN 3 YEARS)						44. STATE TAX DATA	
						CODE	
						45. POSITION CONTROL CERTIFICATION	
						46. APPROVAL	
						DATE APPROVED <i>[Signature]</i> 12/15/65	

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

CONFIDENTIAL
(When Filled In)

NOTICE OF LONGEVITY COMPUTATION DATE		<input checked="" type="checkbox"/> VOUCHERED
		<input type="checkbox"/> UNVOUCHERED
NAME (Last, First, Middle)		SERIAL NUMBER
HIDALGO B N Jr		027630
OFFICE (and division)		
DDP/WH		
<input type="checkbox"/> ORIGINAL	LONGEVITY COMPUTATION DATE	
<input checked="" type="checkbox"/> CORRECTION	02-15-52	
THIS DATE	SIGNATURE (Office of Personnel)	
12-13-65	<i>[Signature]</i>	

FORM 171a
11-59

CONFIDENTIAL

(4)

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 23 October 1964												
SERIAL NUMBER 100730					NAME (Last-First-Middle) [Redacted]												
3 NATURE OF PERSONNEL ACTION [Redacted]					4 EFFECTIVE DATE REQUESTED MONTH: 11 DAY: 1 YEAR: 1964			5 CATEGORY OF EMPLOYMENT [Redacted]									
6 FUNDS		V TO V C TO V		V TO O C TO O		7 COST CENTER NO. CHARGE ABLE 275-1162		8 LEGAL AUTHORITY (Completed by Official Personnel)									
9 ORGANIZATIONAL DESIGNATIONS DBF Special Affairs Staff Counter-Intelligence Staff Operations Section					10 LOCATION OF OFFICIAL STATION [Redacted]												
11 POSITION TITLE SPY DETECTOR					12 POSITION NUMBER 007		13 CAREER SERVICE DESIGNATION D										
14 CLASSIFICATION SCHEDULE (GS, FS, etc.) ES			15 OCCUPATIONAL SERIES 015-01		16 GRADE AND STEP 12 (1)		17 SALARY OR RATE \$10,200										
18 REMARKS From WFP/313/03/28 Rev. 436 Security Personnel [Redacted] 10/28/64 [Redacted] 11/2/64 1 of Security Recorded by CSPD [Signature] reflect the 11/2/64 modification																	
19A SIGNATURE OF APPROVING OFFICIAL [Signature]				DATE SIGNED 10/29/64		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER A. B. [Signature]				DATE SIGNED 10-30-64							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19 ACTION CODE 3710		20 EMPLOY CODE 10		21 OFFICE CODING NUMERIC: 19150 ALPHABETIC: S.A.S.		22 STATION CODE 75013		23 INTEGREE CODE		24 MODIFIERS CODE 1		25 DATE OF BIRTH MO: 05 DA: 27 YR: 1919		26 DATE OF GRADE MO: DA: YR:		27 DATE OF LEI MO: DA: YR:	
28 NIE EXPIRES MO: DA: YR:		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-CSE 2-FILA 3-NONE		31 SEPARATION DATA CODE		32 CORRECTION CANCELLATION DATA TYPE: MO: DA: YR:		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 CAR/RES/PROV TEMP		39 FEET HEALTH INSURANCE CODE: B-BETTER HEALTH INS CODE: -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 EXEMPTED CODE: N.Y. TAX EXEMPTIONS: FORM EXECUTED				44 STATE TAX DATA CODE: NO TAX STATE CODE: FEEMP							
45 POSITION CONTROL CERTIFICATION [Signature]					46 O.P. APPROVAL A. B. [Signature]					DATE APPROVED 10-30-64							

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

9 APR 64

1 SERIAL NUMBER 02733	2 NAME (Last-First-Middle) DILLO, B. N. Jr.
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3 NATURE OF PERSONNEL ACTION EXCLUDED APPOINTMENT (see 200)	4 EFFECTIVE DATE REQUESTED MONTH: 04, DAY: 16, YEAR: 64	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS X V10V C10V	7 COST CENTER AND CHARGE 4237-1000-100	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff OS/CS Development Complement	10 LOCATION OF OFFICIAL STATION Washington, D.C.
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11 POSITION TITLE OPS OFFICER	12 POSITION NUMBER XXXX 1397	13 CAREER SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (GS, FS, etc.) GS	15 OCCUPATIONAL SERIES 0136.07	16 GRADE AND STEP 12 (1)	17 SALARY OR RATE 6000
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18 REMARKS
* 0 yrs.
~~For medical reasons. Not to exceed one year.~~
For duration of period that the individual is on sick leave; not to exceed one year
Kushney
pccs

1 by Farrell;
1 by Security

Recorded by
CSPD
RPM

18A SIGNATURE OF REQUESTING OFFICER D. G. Lawson	DATE SIGNED 9 April 64	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER George H. Bennett	DATE SIGNED 13 Apr 64
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 13	20 EMPLOY CODE W	21 OFFICE CODING NUMERIC: 4447 ALPHABETIC: SAS	22 STATION CODE 78013	23 INTEREST CODE	24 HOUSING CODE 1	25 DATE OF BIRTH MO: 02, DA: 27, YR: 19	26 DATE OF GRADE MO: 12, DA: 22, YR: 63	27 DATE OF LEI MO: 12, DA: 24, YR: 63
28 RFE GRAPHS MO: DA: YR:	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-ESI 3-FIB 5-NONE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE: MO: DA: YR:	EOD DATA		33 SECURITY REG. NO. 00000	34 SER. NO.
35 VET PREFERENCE CODE: 0-NONE 1-5 YR 2-10 YR	36 SERV COMP DATE MO: DA: YR: 12/1/46	37 LONG COMP DATE MO: DA: YR: 1/1/58	38 CAREER CATEGORY CODE: P	39 FEED. HEALTH INSURANCE CODE: 1	40 SPECIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE: 1 0-NONE 1-BD BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE EAT CODE: 1	43 FEDERAL TAX DATA FORM EXECUTED: CODE: 0 1-YES 2-NO	44 NO. TAX EXEMPTIONS CODE: 0	45 NO. EXECUTED CODE: 0 1-YES 2-NO	46 STATE TAX DATA		

45 POSITION CONTROL CERTIFICATION W. Lawson 11/21/64	46 OP APPROVAL George H. Bennett 13 Apr 64	DATE APPROVED 13 Apr 64
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SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION						DATE PREPARED				
1. SERIAL NUMBER 027630						9 April 1964				
2. NAME (Last, First, Middle) [Redacted]										
3. NATURE OF PERSONNEL ACTION Rise from NCA			4. EFFECTIVE DATE REQUESTED MONTH: 04, DAY: 01, YEAR: 64		5. CATEGORY OF EMPLOYMENT REGULAR					
6. FUNDS V TO V G TO V		V TO G I G TO G		7. COST CENTER NO. CHARGE 4132-2001-1700	8. LEGAL AUTHORITY (Completed by Office of Personnel)					
9. ORGANIZATIONAL DESIGNATIONS DDP/Credial Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section				10. LOCATION OF OFFICIAL STATION JMWAVE						
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0033	13. CAREER SERVICE DESIGNATION 2						
14. CLASSIFICATION SCHEDULE / GA, EB, etc. 3S		15. OCCUPATIONAL SERIES 0135.01	16. GRADE AND STEP 12 (1)	17. SALARY OR RATE \$ 6000						
18. REMARKS <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">Received by LORD [Signature]</div> 1 of Security 1 of Payroll										
19. SIGNATURE OF REQUESTING OFFICIAL [Signature] ORVILLE W. DUNN, W. SA/Per.		DATE SIGNED April 6, 1964	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]		DATE SIGNED 17 April 64					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: [Blank] ALPHABETIC: [Blank]		22. STATION CODE	23. INTEGREE CODE	24. HQRTS CODE 2	25. DATE OF BIRTH MO: 05, DA: 17, YR: 19	26. DATE OF LEAVE MO: [Blank], DA: [Blank], YR: [Blank]	27. DATE OF LET MO: [Blank], DA: [Blank], YR: [Blank]	
28. NTE EXPIRES MO: [Blank], DA: [Blank], YR: [Blank]	29. SPECIAL REFERENCE 1-CSE 2-FICA 3-NONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE: [Blank] MO: [Blank], DA: [Blank], YR: [Blank]		33. SECURITY REQ NO	34. SEA	EOD DATA →		
35. VET PREFERENCE CODE: 0-NONE, 1-5 PT, 2-10 PT	36. SERV COMP DATE MO: [Blank], DA: [Blank], YR: [Blank]	37. LONG COMP DATE MO: [Blank], DA: [Blank], YR: [Blank]	38. CAREER CATEGORY CAR RES, PROF TEMP	39. FEGLI HEALTH INSURANCE CODE: [Blank] B-BE RLE, 1-SEL, HEALTH INS CODE	40. SOCIAL SECURITY NO					
41. PREVIOUS GOVERNMENT SERVICE DATA CODE: 0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (50 THRU 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 [Signature]						DATE APPROVED [Signature]				

SECRET



NAME OF EMPLOYEE (Last-First-Initial) HIDALGO, BALMES N.	NAME AND RELATIONSHIP OF DEPENDENT 6689 self	CLAIM NUMBER 60-264
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There is on file in the Benefits and Counseling Branch, Benefits and Services 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 30 May 1960. Broken left foot.

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 REPRESENTATIVE <i>B. De Felice</i>
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 18 April 1963	
1. SERIAL NUMBER 0-760		2. NAME (Last, First, Middle) [REDACTED]				3. NATURE OF PERSONNEL ACTION EXCITED APPOINTMENT	
4. EFFECTIVE DATE REQUESTED 04 28 63		5. CATEGORY OF EMPLOYMENT REGULAR					
6. FUNDS V TO V CF TO V		7. COST CENTER NO. CHARGE 3132-2001-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section				10. LOCATION OF OFFICIAL STATION JMWAVE			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0732		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0136-01		16. GRADE AND STEP 11 (4)		17. SALARY OR RATE \$ 8840	
18. REMARKS P - 359 1 by Security Recorded by CSPD [Signature]							
19. SIGNATURE OF REQUESTING OFFICER Louis W. Armstrong, 1/SAS/Prof.		DATE SIGNED 18 Apr 63		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER D. M. Collins		DATE SIGNED 11 Apr 63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE 13 10	22. OFFICE USE NO. 61770 SAS	23. STAT. CODE 9449	24. MILEAGE CODE 2	25. DATE OF BIRTH 05-27-19	26. DATE OF DEATH 02-17-58	27. DATE OF LEI 09-2-62	28. SOCIAL SECURITY NO. 27630 111
29. DATE EXPIRES	30. SPECIAL REFERENCE	31. ACQUISITION DATA 1	32. CORRECTION/DIFFERENCE AT ON DATA	EOD DATA		33. SER. NO.	34. SER.
35. RES. PREFERENCE	36. SERV. COMP. DATE 07/10/63	37. COND. COMP. DATE 02/27/63	38. CAREER CATEGORY PRO/TEMP	39. SEC. 1 - MIL. TRANS. RANGE 1	40. SOCIAL SECURITY NO. X		
41. PREVIOUS GOVERNMENT SERVICE DATA 1		42. FEDERAL TAX DATA CODE	43. STATE TAX DATA		44. SOCIAL SECURITY NO.		
45. POSITION CONTROL CERTIFICATION W. Kearney 04/22/63		46. APPROVAL Joseph B. Page				DATE APPROVED 14 Apr 63	

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 18 April 1963	
1. SERIAL NUMBER 027630 ✓		2. NAME (Last-First-Middle) HIT ALON, James N., Jr.			
3. NATURE OF PERSONNEL ACTION RESIGNATION			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 27 63		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS ▶ X V TO V CF TO V		7. COST CENTER NO. CHARGE-ABLE 3232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff FI/CI Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0682		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 11 (4)	17. SALARY OR RATE \$ 8840 ✓	
18. REMARKS <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">Recorded by CSPD <i>[Signature]</i></div>					
19a. SIGNATURE OF REQUESTING OFFICER <i>Louis W. Armstrong</i> LOUIS W. ARMSTRONG, TSAS/13		DATE SIGNED 18 Apr 63	19b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 16 Apr 63
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 45 10	20. EMPLOYMENT CODE 10	21. OFFICE CODE NO. ALPHABETIC	22. STEP IN CODE	23. UNIT CODE	24. PAY RATE CODE 1 059-19 119
25. VET. PREFERENCE	26. SER. COMP. DATE	27. JNL. COMP. DATE	28. CAREER CATEGORY	29. REG. / HEALTH ALLOWANCE	30. COST CENTER NO.
31. PREVIOUS GOVERNMENT SERVICE DATA	32. STATE SER. DATA	33. FEDERAL SER. DATA	34. STATE SER. DATA	35. FEDERAL SER. DATA	36. STATE SER. DATA
43. POSITION CONTROL CERTIFICATION <i>[Signature]</i>			44. D.P. APPROVAL <i>[Signature]</i>		DATE APPROVED 14 Apr 63

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION					
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)			
027630		HIDALGO B N JR			
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT
RESIGNATION			ON 27 63		REGULAR
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY
X		CP TO V	CP TO CP	3232 1000 1000	
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE			12. POSITION NUMBER	13. SERVICE DESIGNATION	
OPS OFFICER			0682	D	
14. CLASSIFICATION SCHEDULE (GS, LO, etc)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE	
GS		0136.01	11 4	8840	
18. REMARKS					
SIGNATURE OR OTHER AUTHENTICATION					

SECRET

FORM 1152-10

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 11 December 1963	
1. SERIAL NUMBER 027630		2. NAME (Last, First, Middle) ██████████					
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 1 63		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V CF TO V		7. COST CENTER NO. CHARGEABLE 4132-2001-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DEP Special Affairs Staff U. S. Field Forward Operations Station - JM WAVE CI Section				10. LOCATION OF OFFICIAL STATION JM WAVE			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0731		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES (87) 0136.01		16. GRADE AND STEP 12 (1)		17. SALARY OR RATE 9.9475	
18. REMARKS							
18A. SIGNATURE REQUESTING OFFICIAL CIRVILLE G. HAWSON, S/SAS/Fers.				DATE SIGNED 12/11/63		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
						DATE SIGNED 12/11/63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. SPECIAL CODE	23. GRADE	24. STEP	25. DATE OF ACTION	26. DATE OF REVIEW
22	10	4970	SAS	0000		12/12/63	12/12/63
27. NOTE EMP RES	28. SPECIAL REFERENCE	29. RESUME DATA	30. EMPLOY DATA	31. EMPLOY DATA	32. EMPLOY DATA	33. EMPLOY DATA	34. EMPLOY DATA
35. RET. PREFERENCE	36. SER. COND. DATA	37. COND. DATA	38. CAREER DATA	39. SER. DATA	40. SER. DATA	41. SER. DATA	42. SER. DATA
43. PREVIOUS GOVERNMENT SERVICE DATA	44. MILITARY DATA	45. DATA	46. DATA	47. DATA	48. DATA	49. DATA	50. DATA
49. POSITION CONTROL CERTIFICATION				50. O.P. APPROVAL		DATE APPROVED	
				12/11/63		12/11/63	

RECEIVED
CSVD
12/11/63

FORM 1152 QUALITY CONTROL SYSTEM AND FORM 1152A

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED				
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) DANIEL, <i>Alta</i> , Jr.				DATE PREPARED October 1962				
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 1 62		5. CATEGORY OF EMPLOYMENT REGULAR					
6. FUNDS Y TO V V TO CF CF TO V CF TO CF		7. COST CENTER, NO. CHARGE ABLE		8. LEGAL AUTHORITY (Completed By Office of Personnel)						
9. ORGANIZATIONAL DESIGNATIONS DDP Task Force W PC-CI Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.							
11. POSITION TITLE SBS OFFICER		12. POSITION NUMBER 002		13. CAREER SERVICE DESIGNATION J						
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 000		16. GRADE AND STEP 11 04						
17. SALARY OR RATE \$7920		18. REMARKS From: DDP/AF/Platoon, St., 7th A., P.O., 67th Trng CO, CI BRANCH: <i>Scy Baum</i> Philip C. ... AF/Per. Off. Recorded By CSPD <i>[Signature]</i>								
18A. SIGNATURE OF REQUESTING OFFICER <i>[Signature]</i>		DATE SIGNED 6/7/62		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>						
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 61300 TFW		22. STATION CODE	23. INT. JAB CODE	24. NO. 1 CODE	25. DATE OF BIRTH MO DA YA 1 5 127119	26. DATE OF GRADE MO DA YA	27. DATE OF LET MO DA YA	
28. NTE EXPIRES MO DA YA		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1 - CSC 3 - FICA 5 - NONE		31. SEPARATION DATA CODE TYPE		32. CORRECTION/CANCELLATION DATA MO DA YA		
33. SECURITY REG. NO.		34. SER		35. VET. PREFERENCE CODE 1 - NONE 2 - 5 PT 3 - 10 PT		36. SERV. COMP. DATE MO DA YA		37. LONG. COMP. DATE MO DA YA		
38. CAREER CATEGORY CODE		39. REGU / HEALTH INSURANCE CODE 0 - BRIBER 1 - YES		40. SOCIAL SECURITY NO.						
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 - NO PREVIOUS SERVICE 2 - NO BREAK IN SERVICE 3 - BREAK IN SERVICE (LESS THAN 3 YRS) 4 - BREAK IN SERVICE (MORE THAN 3 YRS)			42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM FILED CODE 1 - YES 2 - NO		44. STATE TAX DATA FORM FILED CODE 1 - YES 2 - NO			
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i>				46. O.P. APPROVAL <i>[Signature]</i>		DATE APPROVED				

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED									
1. SERIAL NUMBER 027630		2. NAME (Last, First, Middle) HIDALGO, RICHARD M. JR.				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 1 12 62		5. CATEGORY OF EMPLOYMENT REGULAR							
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		6. FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		7. COST CENTER NO. CHANGEABLE 2235 1000 1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)									
9. ORGANIZATIONAL DESIGNATION DDP WH SECTION A PLANS & OPERATIONS STAFF				10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.											
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER SA-641		13. CAREER SERVICE DESIGNATION D									
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 3		17. SALARY OR RATE \$8,080									
18. REMARKS FROM: DDP/WH/1-/FI-CI/#683															
18A. SIGNATURE OF REQUESTING OFFICIAL <i>P. C. Bowers</i> P. C. BOWERS C/WH/Personnel				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>R. Heady</i>		DATE SIGNED							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE SYMBOL NUMERIC ALPHABETIC 1000		22. STATION CODE		23. UNIT CODE		24. DATE OF NEW		25. DATE OF OLD		26. DATE OF LEI	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA		32. SECURITY REQ. NO.		33. SER. REQ. NO.		34. SER. REQ. NO.		35. SER. REQ. NO.	
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. MIL. RES. DATA		39. FEEL. / HEALTH INSURANCE		40. SOCIAL SECURITY NO.		41. SOCIAL SECURITY NO.		42. SOCIAL SECURITY NO.	
43. PREVIOUS GOVERNMENT SERVICE DATA				44. STATE TAX DATA		45. STATE TAX DATA		46. STATE TAX DATA		47. STATE TAX DATA		48. STATE TAX DATA		49. STATE TAX DATA	
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i>				46. O.P. APPROVAL <i>[Signature]</i>				DATE APPROVED							

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 8 August 1961	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HIDALGO, B. N., Jr.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT (And Transfer to Vouchered Funds)				4. EFFECTIVE DATE REQUESTED MONTH: 8 , DAY: 20 , YEAR: 61		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS X V TO V X CP TO V		7. V TO CP X CP TO CP		7. COST CENTER NO. CHARGE-ABLE 2635-5000-8021		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH 1442 Branch 4 PI-CI Sec.				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER (E)				12. POSITION NUMBER 0681		12a. PER CONTROL NO.	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS (12)		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 (3)		17. SALARY OR RATE \$ 8,080	
18. REMARKS From: DDP/WH, Br. 4, #0626							
18a. SIGNATURE OF REQUESTER <i>Herbert V. Jurek</i> HERBERT V. JUREK, Ch./WH/4/Pers.				18b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>R. P. Brady</i>			
SIGN BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. AGENCY CODE		20. EMPLOYMENT CODE		21. OFFICE CODE		22. DATE OF SIGNATURE	
16 10		60452		WH		7/20/61	
23. SECURITY REG. NO.		24. SECURITY REG. NO.		25. SECURITY REG. NO.		26. SECURITY REG. NO.	
27. SECURITY REG. NO.		28. SECURITY REG. NO.		29. SECURITY REG. NO.		30. SECURITY REG. NO.	
31. SECURITY REG. NO.		32. SECURITY REG. NO.		33. SECURITY REG. NO.		34. SECURITY REG. NO.	
35. SECURITY REG. NO.		36. SECURITY REG. NO.		37. SECURITY REG. NO.		38. SECURITY REG. NO.	
39. SECURITY REG. NO.		40. SECURITY REG. NO.		41. SECURITY REG. NO.		42. SECURITY REG. NO.	
43. SECURITY REG. NO.		44. SECURITY REG. NO.		45. SECURITY REG. NO.		46. SECURITY REG. NO.	
45. POSITION CONTROL CERTIFICATION <i>W. Kearney</i> 08/11/61				46. O.P. APPROVAL <i>R. P. Brady</i>			

FORM 1152 OBSOLETE PREVIOUS EDITIONS AND FORM 1152a

SECRET

(4)

SECRET

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle) HIDALGO, BALTES N., JR.	3. Date Of Birth Mo. Da. Yr. 05 27 19	4. Vol. Pref. None 5 Pr-1 10 Pr-2	5. Sex M	6. CS-FOU Mo. Da. Yr.
7. SCD Mo. Da. Yr.	8. CSC Rem. Yes-1 Code No-2	9. CSC Or Other Legal Authority	10. Appt. Affidav. Mo. Da. Yr.	11. FEGLI: 19 Yes-1 Code No-2	12. LCD Mo. Da. Yr.
13. <i>1</i>		14. <i>1</i>		15. <i>1</i>	

2

PREVIOUS ASSIGNMENT

14. Organizational Designations DIS/OTR OPERATIONS SCHOOL COVERT TRAINING	Code	15. Location Of Official Station WASH., D. C.	Station Code
16. Dept. - Field Dept. - USfld - Frqn	17. Position Title INSTRUCTOR OPERATIONS	18. Position No. 1014	19. Serv. 20. Occup. Series GS 1711.50
21. Grade & Step 11 2	22. Salary Or Rate \$ 7270	23. SD D	24. Date Of Grade Mo. Da. Yr. 03 17 58
25. PSI Due Mo. Da. Yr. 03 17 61		26. Appropriation Number 0175-2533	

ACTION

27. Nature Of Action REASSIGNMENT	Code <i>17</i>	28. Eff. Date Mo. Da. Yr. 06 26 60	29. Type Of Employee REGULAR	Code	30. Separation Data
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3A

PRESENT ASSIGNMENT

31. Organizational Designations DDP WH BRANCH 4	Code <i>467</i>	32. Location Of Official Station WASH., D. C.	Station Code
33. Dept. - Field Dept. - USfld - Frqn	34. Position Title OPS OFFICER	35. Position No. BA-626	36. Serv. 37. Occup. Series GS 0136.01
38. Grade & Step 11 2	39. Salary Or Rate \$ 7270	40. SD D	41. Date Of Grade Mo. Da. Yr.
42. PSI Due Mo. Da. Yr.		43. Appropriation Number 0135 1000 1000	

SOURCE OF REQUEST

A. Requested By (Name And Title) P. C. ROWERS WH/PERSONNEL OFFICER	C. Request Approved By (Signature And Title) <i>Elmer R. Wingrove</i> ELMER R. WINGROVE PERSONNEL OFFICER
B. For Additional Information Call (Name & Telephone Ex.) JOHN WASHINCO X8242	

CLEARANCES

A. Career Board Signature: <i>W. R. ...</i> Date: 6-21-60	D. Placement
B. Pos. Control Signature: <i>W. R. ...</i> Date: 6-23-60	E.
C. Classification	F. Approved By <i>W. R. ...</i> Date: 6-23-60

Remarks

2 copies to Security. 1 Loss Notice. *may 6/24/60* *6/21/60*

SECRET

SECRET
(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION						V. to V		XX		V. to UV			
Mo	Da	Yr							UV. to V		UV. to UV					
5	20	59														
1. Serial No.			2. Name (Last-First-Middle)						3. Date of Birth		4. Vet. Pref.		5. Sex		6. CS - EOD	
			HIDALGO, Balmea N., Jr.						Mo Da Yr		None-0 5 Pr-1 10 Pr-2		Code		Mo Da Yr	
7. SCD			8. CSC Retmt.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.		11. FEGLI		12. LCD		13. MIL. SERV. CREDIT, LCA			
Mo	Da	Yr	Yes-1 No-2		Code		Mo	Da	Yr	Yes-1 No-2	Mo	Da	Yr	Yes-1 No-2	Code	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP/WH Branch III Central America Section						Washington, D. C.					
16. Dept.-Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. - Usfld. Frgn. -	D	Area Ops Officer				0486		GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
11 1		\$ 7,030		D		Mo Da Yr 03 17 58		Mo Da Yr 09 10 59		8-3500-20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Reassignment + Transfer to Confidential Funds				Mo Da Yr 06 14 59		Regular		C1			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDS/OTR Operations School Covert Training				1172		Washington, D. C.				75C023	
33. Dept.-Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. - Usfld. Frgn. -	D	Instructor Operations				1014		GS		1711.50	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
11 1		\$ 7,030		D		Mo Da Yr		Mo Da Yr		9-7500-30-018	

SOURCE OF REQUEST

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
Mr. Glen Moorhouse, C/OS		<i>Matthew Baird</i> MATTHEW BAIRD Director of Training	
B. For Additional Information Call (Name & Telephone Ext.)			
Mr. Elmer R. Wingrove, x-3078			

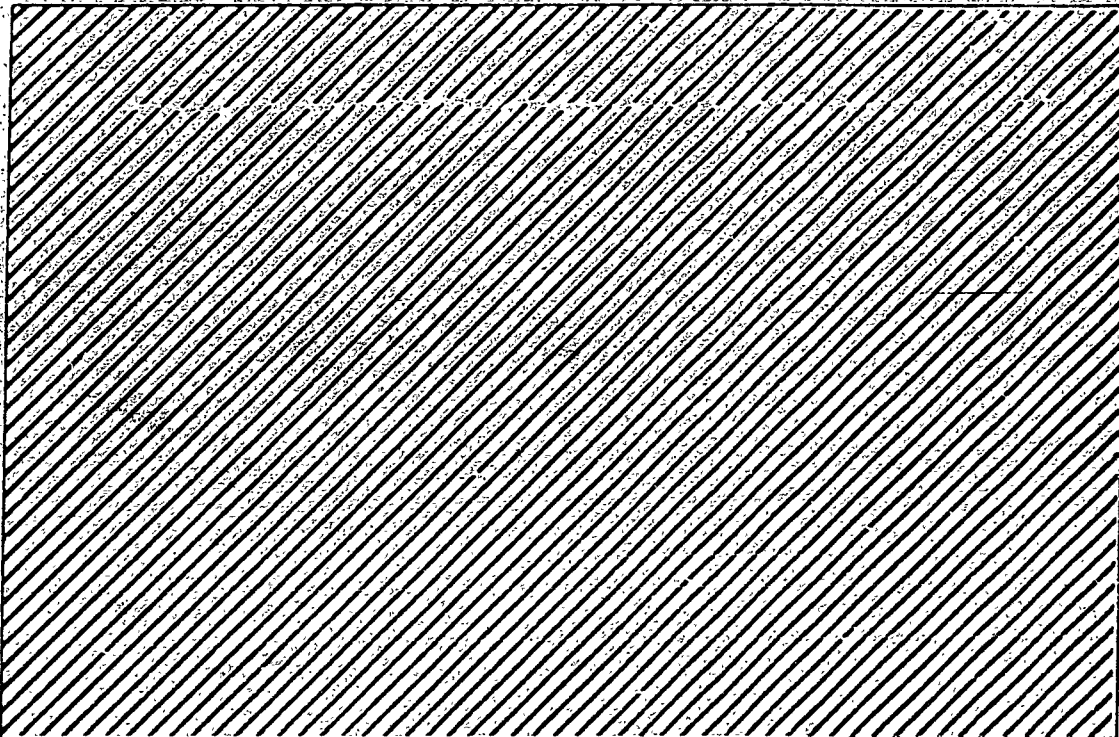
CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	11/15/58	D. Placement		
B. Pos. Control	<i>[Signature]</i>	11/15/58	E.		
C. Classification			F. Approved By	<i>C. Powell</i>	11 JUN 1959

Remarks
One copy forwarded to UNVOUCHERED Payroll. Two copies forwarded to Security.
3 copies: [Signature] [Signature]
[Signature]

Recorded by
CSPD

SECRET
(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE) HERALCO, Falmes	DATE OF BIRTH unk	CASE OR CLAIM NUMBER 58-112
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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 1 Oct 57.

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 21 Sept 58	SIGNATURE OF BCO REPRESENTATIVE <i>W. D. Telle</i>
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

Classify According To Legend

E 2266

7/22/58

REQUEST FOR PERSONNEL ACTION

1. Serial No. 12767	2. Name (Last-First-Middle) MR. BALMES N. HIDALGO, JR.	3. Date Of Birth Mo Da Yr 5 27 19	4. Vac. Pref. None-0 Code 1	5. Sex M	6. GS - EOD Mo Da Yr 2 17 58
7. SCD Mo Da Yr 7 16 46	8. CSC Reim. Yes-1 No-2 1	9. GSC Or Other Legal Authority 50 USC 4031	10. Apmt Affidav. Mo Da Yr 3 13 58	11. FEGLI Yes-1 No-2 1	12. LCD Mo Da Yr 2 17 58
		13. Cost Lcp Yes-1 No-2 2			

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
16. Dept. Field Dept. Usfld. Fragn.	Code	17. Position Title	18. Position No.
19. Serv.	20. Occup. Series		
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade Mo Da Yr
	\$		25. PSI Due Mo Da Yr
26. Appropriation Number			

ACTION

27. Nature Of Action Accepted Appointment	Code 13	28. Eff. Date Mo Da Yr 3 17 58	29. Type Of Employee Regular	Code 01	30. Separation Date
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PRESENT ASSIGNMENT

31. Organizational Designations DDP/WH Branch III Central America Section	Code 4613	32. Location Of Official Station Washington, D.C.	Station Code
33. Dept. Field Dept. Usfld. Fragn.	Code	34. Position Title Area Ops Officer	35. Position No. # BA-486-11
36. Serv.	37. Occup. Series GS 0136.01		
38. Grade & Step 11-A	39. Salary Or Rate \$ 6390	40. SD D	41. Date Of Grade Mo Da Yr 3 17 58
		42. PSI Due Mo Da Yr 9 12 59	43. Appropriation Number 8-3500-20

SOURCE OF REQUEST

A. Requested By (Name And Title) P.C. BOWERS / Personnel Officer	C. Request Approved By (Signature And Title)
B. For Additional Information Call (Name & Telephone Ext) JOHN WASHINKO X 8242	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board		3/17/58	D. Placement		3/14/58
B. Post. Control		3/17/58	E.		
C. Classification			F. Approved By	Robert W. Steag	10 MAR 1958

Remarks
Subject is presently engaged as a Contract Employee with the WH Division.
* For slotting purposes Only.
Approved for [Signature] [Signature] [Signature]

SECRET

STANDARD FORM 52
 FORM 52 IS THE PROPERTY OF THE
 U.S. GOVERNMENT (GPO: 1955 O-358-000)
 PREVIOUS EDITIONS ARE OBSOLETE
 GSA GEN. REG. NO. 27
 5010-108-01

SECRET

UNVOUCHERED

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, initials, and surname) Mr. Balmes N. HIDALGO, Jr.	2. DATE OF BIRTH 27 May 1919	3. REQUEST NO.	4. DATE OF REQUEST 8 July 55
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Excepted Appointment		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

FROM—	9. POSITION TITLE AND NUMBER	TO—
	10. SERVICE, GRADE, AND SALARY	I. O. (FI) BAF-277
	11. ORGANIZATIONAL DESIGNATIONS	GS-0130.51-11, \$6390.00 p.a. x
	11. HEADQUARTERS	DDP/WH Panama City, Panama
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

14. REMARKS (Use reverse if necessary)

Subject is presently a contract employee with Project HYPOTHESIS.

15. REQUESTED BY (Name and title) <i>[Signature]</i> C/WH	16. REQUEST APPROVED BY Signature: _____ Title: _____
17. FOR ADDITIONAL INFORMATION (Name and Telephone extension) P. C. Bowers, X3692	

13. VETERAN'S PREFERENCE	14. POSITION CLASSIFICATION ACTION
NONE WWH OTHER S PT 15 POINT DISAB. OTHER	NEW VICE I.A. REAL •

15. SEX M	16. RACE W	17. APPROPRIATION FROM: _____ TO: 6-3525-56-051	18. SUBJECT TO C 5 RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: _____
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21. STANDARD FORM 50 REMARKS

[Handwritten notes and signatures]


22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<i>[Signature]</i>	5 Aug 55	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	220	7-20	
E.			

F. APPROVED BY
Robert A. Stone, Dec 7/28 *[Signature]*

SECRET
(When Filled In)

1. PERS. SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART I) GDI: 16 Jul 1976			
2. NAME (Last-First-Middle) HITMA GO, B. H., Jr.		3. SEX M	4. DATE OF BIRTH 27 May 1919	5. LONGEVITY COMP. DATE 19 Feb 1958	
6. MARITAL STATUS Remarried	7. DEPENDENTS (Excl. Spouse) 2	8. YEARS OF BIRTH 1914-1892		9. US NATURALIZATION DATE(S) NA Puerto Rico NA	
10. CAREER STATUS Member	MEMBERSHIP Mar 1961	OTHER STATUS	11. ASST NO. RPT. Jul 1967	QUAL. FOR Dept Only	12. EVAL. FOR TDY O/S
13. CURRENT RESERVE STATUS None	14. PORT SERVICE X	GRADE	ACTIVE DUTY WITH CIA None	RELEASE TO MIL. SER. None	TO BE DEFERRED None
16. ASSESSMENT DATE None		17. PROFESSIONAL TEST DATE Feb 1958		18. LANGUAGE APTITUDE TEST DATE None	
15. EMPLOYMENT HISTORY 1940-43 Military Service, US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Loggitt Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951-52 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
19. NON-CIA EDUCATION High School Graduate 1945-46 New York University - Foreign Trade, Business Law					
17. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Portuguese - R Interm; W, P, S, U None (Oct 1959); T None - May 1958 Spanish - R High; W Interm; P, S, U Native (Nov 1959); Translate, Interpret - May 1958			
18. AGENCY SPONSORED TRAINING 1958 Comm Party Org & Ops 1958 CI Famil 1958 Info Rptng, Rpts & Rqmts 1958 Operations 1958 Intol Orient 1959 Picks & Locks 1959 Audio Surveill Mgmt 1966 Undetermined Entry (Int)					
19. CIA EMPLOYMENT HISTORY SINCE 13 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	EN	ORGANIZATION & GRADE TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Area Ops Off 0136.01	11	D	DDP/WI/Project EMPLOYEES	Panama
	Jan - Feb 1959, TDY Mexico and Guatemala			DDP/WI-III/Control America	Hq
Jun 1959	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covers Trng	Hq
Jun 1960	Ops Off 0136.01	11	D	DDP/WI-4	"
Aug 1961	" " 0136.01	11	D	DDP/WI-4/CI Sec	"
Jan 1962	" " 0136.01	11	D	DDP/WI/Plans & Ops Sec/Sec A	"
Apr 1963	" " 0136.01	11	D	DDP/SAS/US Fld/Forward, Ops Sta	JMWAVE
Dec 1963	" " 0136.01	12	D	" " " " " " " "	"
Apr 1964	" " 0136.01	12	D	DDP/SAS/CS/CS Dev Comd	Hq
Nov 1964	" " 0136.01	12	D	DDP/SAS/CI Staff/Ops	"
May 1965	" " 0136.01	12	D	DDP/WI/C/S and Ops Br	"
Dec 1965	" " 0136.01	12	D	DDP/WI-2/Panama	"
20. DATE REVIEWED 28 Jun 1976	21. PROFILE REVIEWED BY hoo/als	22. ATEND IS TO REVIEWED & VERIFIED BY EMPLOYEE 19 Nov 1960			

SECRET
(When Filled In)

PERS. SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) MENDACE, R. N., JR.		DATE OF BIRTH 27 May 1919	
23. SUMMARY OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS			
 <p>A black and white portrait of a man with glasses, wearing a suit and tie. Below the portrait is a nameplate that reads "Mendace, R. N., Jr.".</p>			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION Appreciation 1968 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.			
27. DATE REVIEWED 23 Jun 1969		28. PROFILE REVIEWED BY ems/ots	

SECRET
(When Filled In)

FITNESS REPORT							EMPLOYEE SERIAL NUMBER	
							027630	
SECTION A GENERAL								
1. NAME (Last) (FNU) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD		
Hidalgo Balmes N.			05/27/19	M	GS-12	D		
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION			
Ops Officer				DDP/M/2	HQS			
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 checked="" 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)				
31 January 1969				1 January 1968 - 31 December 1968				
SECTION B PERFORMANCE EVALUATION								
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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 Panama Desk Case Officer for Panama City Station FI operations. Prepares cables and dispatches to Panama City and other Stations and internal Headquarters correspondence.							RATING LETTER P	
SPECIFIC DUTY NO. 2 Conducts required coordination with other offices within the agency.							RATING LETTER P	
SPECIFIC DUTY NO. 3 Supervises and/or maintains files and regulates indexing relating to his cases.							RATING LETTER P	
SPECIFIC DUTY NO. 4							RATING LETTER	
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 P	

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. Factor 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.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the Panama Desk this officer provides the valuable service of operational history and continuity; he served six years in the Station and has been on the desk for three.

Continued

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 9 Jan 1969	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS GIVEN UNDER MY SUPERVISION 4	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 9 January 1969	OFFICIAL TITLE OF SUPERVISOR C/WH/2/P	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Thomas D. Little
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.		
DATE 9 JAN 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/2	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Edwin M. Terrell

SECRET

SECRET

SECTION C Continued

Hidalgo, Balmes N.

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

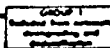
In sum, Mr. Hidalgo serves a satisfactory function on the Panama Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) HIDALGO, Baltes N., Jr.			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12
5. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/2		
			8. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CAREER	RESERVE	TEMPORARY	INITIAL	ANNUAL	REASSIGNMENT SUPERVISOR
CAREER-PROVISIONAL (See Instructions - Section C)			REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 13700 hrs by SPAC 12-66		
SECTION B PERFORMANCE EVALUATION:					
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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 Responsible for all FI/CI Projects for the Desk					RATING LETTER S
SPECIFIC DUTY NO. 2 Initiates, prepares and coordinates all operational communications to the field on FI/CI matters					RATING LETTER P
SPECIFIC DUTY NO. 3 Prepares project renewals, studies and papers on FI/CI matters					RATING LETTER P
SPECIFIC DUTY NO. 4 Translates Spanish language material for the Branch					RATING LETTER O
SPECIFIC DUTY NO. 5 Coordinates FI/CI matters for the Desk with other Hqs components					RATING LETTER S
SPECIFIC DUTY NO. 6 Occasionally handles visiting indigenous assets					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>31 MAR 1967</p> <p>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.</p>					RATING LETTER S



SECRET

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.

Comment by Mr. Tsikerdanos, previous supervisor: 15181 '67

Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.

Comments by Present Supervisor:

I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.

Ken Knaus

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: 10 March 67 SIGNATURE OF EMPLOYEE: [Signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 11 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE: 9 MAR 1967 OFFICIAL TITLE OF SUPERVISOR: Formerly C/NH/2/P Present C/NH/2/P TYPED OR PRINTED NAME AND SIGNATURE: [Signature] Ken Knaus

3. BY REVIEWING OFFICIAL

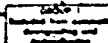
COMMENTS OF REVIEWING OFFICIAL: Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties. Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.

DATE: 9 MAR 67 OFFICIAL TITLE OF REVIEWING OFFICIAL: C/NH/2 TYPED OR PRINTED NAME AND SIGNATURE: [Signature] Edwin M. Terrell

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						027630	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) MAYNECO, Palmes A., Jr.			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12	5. SD D	
6. OFFICIAL POSITION TITLE Desk Officer			7. OFF/DIV/BR OF ASSIGNMENT DDI/T/C		8. CURRENT STATION Headquarters		
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"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input type="checkbox"/> SPECIAL (Specify):		<input checked="" type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From to) 16 Dec 55 - 30 October 1/55			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.						RATING LETTER P	
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and						RATING LETTER S	
SPECIFIC DUTY NO. 3 Briefing representatives of personnel. foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.						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	
4 JAN 1956							



SECRET

(When Filled In)

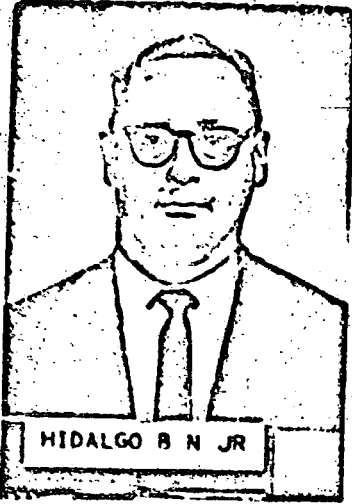
SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B by providing basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u></p>			
<p>Mr. Hidalgo is an able intelligence officer, ^{Office of} devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p>			
<p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p>			
<p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</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		
9 December 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with an exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	Walter T. Cini <i>[Signature]</i>	

SECRET

SECRET
(When Filled In)

1. PERM. SERIAL NO. 27630		BIOGRAPHIC PROFILE (PART I) SCID: 26 Jul 1946			
2. NAME (Last-First-Middle) WILLIAM S. ...		3. SEX M	4. DATE OF BIRTH May 1919	5. LONGEVITY COMP. DATE 17 Mar 1958	
6. MARITAL STATUS Married	7. DEPENDENT(S) (Specify: - None)	8. NO. CHILDREN 3	9. YEARS OF BIRTH 1927-1945-1950		10. NATURALIZATION DATE(S) NA Puerto Rico NA
11. CURRENT STAFF STATUS None	12. MEMBERSHIP None	13. OTHER STATUS Pending		14. LAST MO. EMP. QUAL. FOR Sep 1962	15. EVAL. FOR TDY O/S
16. ASSESSMENT DATE None	17. PROFESSIONAL TEST DATE Feb 1958		18. LANGUAGE APTITUDE TEST DATE None		
19. EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)					
1940-43 Military Service, US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Dept, Jersey City, NJ - Inspector 1945-47 Francis H. Lippitt Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
20. NON-CIA EDUCATION					
1945-46 New York University - Foreign Trade, Business Law					
21. FOREIGN LANGUAGE ABILITIES (Longitud. Proficiency, Date Tested)					
Portuguese - R Intern; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Intern; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
22. AGENCY SPONSORED TRAINING					
1958 Intel Orient 1958 Comm Party Org & Ops 1958 CI Famil 1958 Info Rptng, Rpts & Rqmts 1958 Operations 1959 Picks & Locks 1959 Audio Surveill Mgmt					
23. CIA EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SD	ORGANIZATION & DEPT. TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WH/Project HYPOTHESIS Panama Area Ops Off. 0136.01	11	D	DDP/WH-III/Central America	Hq
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala				
Jun 1960	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covert Trng	Hq
Aug 1961	Ops Off 0136.01	11	D	DDP/WH-4	"
Jan 1962	" " 0136.01	11	D	DDP/WH-4/FI-CI Sec	"
Apr 1963	" " 0136.01	11	D	DDP/WH/Plans & Ops Stf/Sec A	"
	" " 0136.01	11	D	DDP/SAS/US Fid/forward Ops Sta	JMWAVE
24. DATE REVIEWED 24 Oct 1963		25. PROFILE REVIEWED BY OP/POD/O.../hes/rwh		26. ITEMS 1-10 REVIEWED & VERIFIED BY EMPLOYEE 9 Feb 1960	

SECRET
(When Filled In)

PERS. SERIAL NO. 27630	BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HIDALGO, Baltes Nieves, Jr.		DATE OF BIRTH May 1919
		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION		
27. DATE REVIEWED	28. PROFILE REVIEWED BY OP/POO/SAB	

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 027630	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) HIDALGO, BALMES			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-11	5. SS D	
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/DR OF ASSIGNMENT DDP WH P&O SEC A		8. CURRENT STATION		
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 checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE			
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):				
11. DATE REPORT DUE IN O.F. 30 October 1962				12. REPORTING PERIOD (From - to) 17 Jan 62 - 30 Sep 62			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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	
Responsible for initiation and development of WH Division durable assets program.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Collate and maintain files on espionage laws of LA countries.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Served as interpreter and translator for Division LA contacts.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Coordinated with Branch 1 of WHD on FI and CI matters.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Gives lectures as guest instructor to students attending School of International Communism.						S	
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	
						P	

GROUP 1
Excluded from automatic
downgrading and
declassification

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.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: 18 Sept 62 SIGNATURE OF EMPLOYEE: *Delmar C. Hidalgo*

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: . IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE: 18 September 1962 OFFICIAL TITLE OF SUPERVISOR: C/WH/PO/A TYPED OR PRINTED NAME AND SIGNATURE: *Clark W. Simmons* CLARK W. SIMMONS

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE: 13 September 1962 OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/OPS TYPED OR PRINTED NAME AND SIGNATURE: *Vernett L. Gresham* VERNETT L. GRESHAM

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
				027630		
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX		
HIDALGO Balboa N., Jr.		27 May 1919		Male		
4. SERVICE DESIGNATION		5. OFFICIAL POSITION TITLE		6. GRADE		
D		Operations Officer		GS-11		
7. OFF. DIV./BR OF ASSIGNMENT				8. CAREER STAFF STATUS		
DDP/WH, R. 4, D.C.				MEMBER		
9. TYPE OF REPORT				10. DATE REPORT DUE IN O.P.		
PENDING		DEFERRED		INITIAL		
DECLINED		DENIED		REASSIGNMENT/SUPERVISOR		
				REASSIGNMENT/EMPLOYEE		
11. REPORTING PERIOD		12. SPECIAL (Specify)				
31 October 1961		6 Oct 60 To 30 Sep 61				
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		RATING NO.		SPECIFIC DUTY NO. 4		
Hqs. C.O. for 3 major CI/PI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.		5		Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.		
SPECIFIC DUTY NO. 2		RATING NO.		SPECIFIC DUTY NO. 5		
Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.		4				
SPECIFIC DUTY NO. 3		RATING NO.		SPECIFIC DUTY NO. 6		
Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.		6				
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
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

State 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. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.

He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.

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 SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11

Subject hospitalized.

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 OFFICIAL TITLE OF SUPERVISOR TYPED OR PRINTED NAME AND SIGNATURE

20 March 62

D/Chief, WH/4/CI

Robert W. Andrews

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 OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE

21 March 1962

C/WH/4/CI

Clark W. Simmons

SECRET

SECRET

NOTIFICATION OF CANCELLATION OF OFFICIAL COVER BACKSTOP

DA:	14 September 1966
SUBJECT:	Hidalgo, Balmes N., Jr.
FILE NO.:	9927
ID CARD NO.:	1140 (Returned)
EMPLOYEE NO.:	

TO: (Check)

CHIEF, PERSONNEL OPERATIONS DIVISION

CHIEF, OPERATING COMPONENT (For Action)

CHIEF, CONTRACT PERSONNEL DIVISION WH

ATTN: Mr. Hannah

REF: Form 1322 dated 9 September 1966

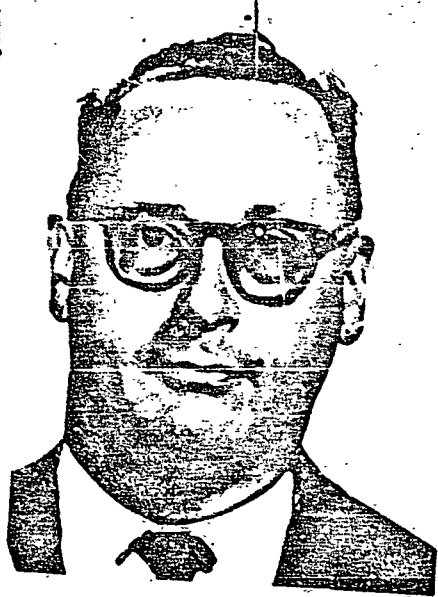
OFFICIAL COVER DISCONTINUED

Unblock Records: (OP Memo 20-800-11)

Effective EOD

Submit Form 642 To Change Limitation Category. (HB 20-800-2 to be redesignated HHB 20-7)

Return All Official Documentation To CCS.



1-PSD:OS

SECRET

SECRET

63-3457
= 7.57

NOTIFICATION OF ESTABLISHMENT OF MILITARY COVER BACKSTOP		DATE 9 April 1964
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
	<input type="checkbox"/> CHIEF, OPERATING COMPONENT, SAS	HIDALGO, Balmes N., Jr.
ATTN:	Mr. Dawson	FILE NO. K-7412
REF:	Request for Cover, 9 April 1964	ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED		NA

BLOCK RECORDS:
(OPMEMO 20-800-11)

- a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____.
- CONTINUING, EFFECTIVE R0D.

SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3.
(RB 20-800-2)

ASCERTAIN THAT ARMY W-2 BEING ISSUED.
(RB 20-661-1)

SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER.
(R 240-250)

SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY.
(R 240-250)

REMARKS:

THIS MEMO MUST REMAIN

TOP OF FILE

James H. Franklin
CD/sll CHIEF, MILITARY COVER, CCG

COPY TO CPD/OP

DISTRIBUTION: 1-OSD/OS, 1-PSD/OS, 1-ADPD/COMPT

GROUP 1
Excluded from automatic
downgrading and
declassification

BT

SECRET

NOTIFICATION OF ESTABLISHMENT OF MILITARY COVER BACKSTOP		DATE 23 April 1963
TO: <input checked="" type="checkbox"/> (CPD/PP)	CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR HIDALGO, Balmea N., Jr.
	CHIEF, OPERATING COMPONENT SAS	
ATTN: Mr. Durham		FILE NO. K-7412
REF: Verbal request for cover		ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED		

BLOCK RECORDS:
(OPMEMO 20-800-11)

- a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____
- b. CONTINUING, EFFECTIVE _____ EOD _____

SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3.
(HB 20-800-2)

ASCERTAIN THAT ARMY W-2 BEING ISSUED.
(HB 20-661-1)

SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER.
(R 240-250)

SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY.
(R 240-250)

REMARKS:

THIS MESSAGE MUST REMAIN
ON TOP OF FILE

COPY TO CPD/PP

James H. Franklin
CD/PP CHIEF, MILITARY COVER, CCG

DISTRIBUTION: 1-OSD/OS, 1-PSD/CS, 1-ACPD/COMPT

119-20-4088
119-20-4088

SECRET

NOTIFICATION OF CANCELLATION OF MILITARY COVER BACKSTOP		DATE 9 March 1962
TO: <input checked="" type="checkbox"/> (Chief)	CHIEF, RECORDS AND SERVICES DIVISION	SUBJECT HIDALGO, BALMES N. JR.
	CHIEF, OPERATING COMPONENT - WH Div	
ATTN: WH/SS 1405 Barton Hall		
REF: Your request of 1322 dated: undated		FILE NO. K-7412
MILITARY COVER DISCONTINUED		ID CARD NO. 832

UNBLOCK RECORDS:
(OP memo 20-800-11)

EFFECTIVE 27 October 1960

SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY.
(HD 20-800-2)

RETURN ALL MILITARY DOCUMENTATION.

REMARKS:

**THIS MEMO MUST REMAIN
ON TOP OF FILE**

COPY TO CPD/OP

39165

Robert E. Young

EDF CHIEF, MILITARY COVER, CCG

DISTRIBUTION: 1-SS/DS, 1-PSD/OS, 1-WRD/UMPT

SECRET

7 March 1958

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

THROUGH : Personnel Security Division
Office of Security

SUBJECT : Balme N. HIDALGO, Jr., Contract Employee

1. Cover arrangements have been completed for the above named subject.

2. Effective immediately, it is requested that your records be properly (blocked) (~~XXXXXXXX~~) to (deny) (~~XXXXXXXXXX~~) subject's current Agency employment by an external inquirer. Subject is to be converted to Staff Employee status within the next few days.

3. This memorandum confirms an oral request of 7 March 1958.

Edward J. Baston
JOSEPH M. ADAMS
Chief, Official Cover & Liaison, CCB

cc: PSD/CS

EN

THIS SECRET MUST REMAIN

1
03

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-421 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI EFFECTIVE DATE: 8 OCT. 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME: HIDALGO, B. N., JR. SERIAL: 00730 ORGN: 51 POS: 350 GRADE: Y STEP: 12 5 NEW SALARY: \$16,034

1. LAST NAME: HIDALGO, B. N. JR.		FIRST NAME: B. N. JR.		INITIAL(S):		2. APPOINTMENT DATA Entered on duty: F, T, P, T			3. TOTAL SERVICE FOR LEAVE (as of date of separation)			
4. DATE AND NATURE OF SEPARATION RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70						Subject to Sec 203(d) 1931 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/> Ceased to be subject to Sec 203(d) on _____ Annual Leave Bal _____			Years: _____ Months: _____ Days: _____ <input type="checkbox"/> More than 15 years			
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)						SUMMARY OF HOME LEAVE (DAYS)						REMARKS
5. Balance from prior leave year ended 1/10 1970		ANNUAL	SICK	14. Date arrival abroad for ML purposes		SCD 7/16/46						
6. Current leave year accrual through 2/21 1970		46	8	15. Current balance as of _____ 19 _____								
7. Total		24	12	16. 12 month accrual rate _____								
8. Reduction in credits, if any (current year)		70	20	17. Dates leave used, prior 24 months _____								
9. Total leave taken		4	20	18. Monthly accrual date _____								
10. Balance		66	-0-	19. Calendar days credit for next accrual date _____		20. Date basic service period completed _____						
11. Total hours paid in lump sum 66 hrs						MILITARY LEAVE						
12. Salary rate(s) \$15,173.00						21. Dates during current calendar yr _____ to _____						
13. Lump sum leave dates from 0830 3/02/70 to 3/11/70 1030 (Hours)						22. Dates during preceding calendar yr _____ to _____						
20. Certified correct by [Signature] for Chief Payroll						ABSENCE WITHOUT PAY						
(Date) 5/13/70						23. During leave year in which separated _____						
(Telephone) 143-2585						24. During step increase waiting period which began on 12/15/68						
						25. During 12-month ML accrual period (dates) _____						
						LWOP or AWOL or Furlough (Suspension) (Hours)						

3-71-70

70-1271
70-1556

31 MAR 1970

Mr. Balmes N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

Richard Helms
Richard Helms
Director

Distribution:

- 0 - Addressee
- 1 - DDCI
- 1 - ER
- 1 - C/EAB/OS
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File * Concur:
- 1 - ROB Reader

Originator: _____
Director of Personnel

C/EAB/OS

OP/RAD/ROB/PJSeidel:jat/3257 (5 March 1970)

8 SEP 1970

Mr. Raloes N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay
Personnel Officer

Enclosures:

Questionnaire
Return Envelope

Distributions:

Original - Addressee
1 - OPF
1 - RAD Subject's File

OP/RAD/EFAB/MLShobe:dag (31 Aug 70)

SECRET
(When Filled In)

BSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

REF

1 SERIAL NUMBER 027630		2 NAME (LAST FIRST MIDDLE) MIDALOO, S R JR	
3 NATURE OF PERSONNEL ACTION RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		4 EFFECTIVE DATE MO DA YR 03 15 70	
5 CATEGORY OF EMPLOYMENT REGULAR		6 FUNDS V TO V CF TO V V TO CF CF TO CF	
7 Financial Analysis No Chargeable		8 CSC OR OTHER LEGAL AUTHORITY P.L. 88-643 SECT. 231	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 PANAMA SECTION		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE CPS OFFICER		12 POSITION NUMBER 1312	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15 OCCUPATIONAL SERIES 0132.01	16 GRADE AND STEP 12 5	17 SALARY OR RATE 15173

18 REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 45	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC	22 STATION CODE	23 INTEGRATE CODE	24 MGRY CODE	25 DATE OF BIRTH MO DA YR	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 CIA 3 FICA 4 NONE	31 SEPARATION DATA CODE -70000	32 Correction / Cancellation Data TYPE MO DA YR		33 SECURITY REG NO		34 SER
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 CAR DESV PROV TEMP		39 FEGLI HEALTH INSURANCE CODE 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 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)			42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO		44 STATE TAX DATA FORM EXECUTED CODE INC TAX STATE CODE 1 YES 2 NO		

SIGNATURE OR OTHER AUTHENTICATION

POSTED
03-05-70/jsc

U.S. GOVERNMENT PRINTING OFFICE: 1965 O-358-100

BSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

OFF			
1. SERIAL NUMBER 027630	2. NAME (LAST FIRST-MIDDLE) HIDALGO D N JR		
3. NATURE OF PERSONNEL ACTION RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		4. EFFECTIVE DATE MO DA YR 02 28 70	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS <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	7. Financial Analysis No. Chargeable 0235 0620 0000	8. CSC CS TYPE LEGAL AUTHORITY P.L. 88-643 SECT. 231
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 1310	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, PR)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 5	15173
18. REMARKS			
SIGNATURE OR OTHER AUTHENTICATION			

OFFICE OF THE STRATEGIC RESOURCES COMMAND, U.S. AIR FORCE

WAGE ADJUSTMENT IN ACCORDANCE WITH SECTION 5305 OF P.L. 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI EFFECTIVE DATE OF OCTOBER 1968.

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	DCI	FUNDS	GR	STEP	NEW SALARY
HIDALGO B N JR	027630	51 350	V	GS 12 4		\$15,173

68-35-

1 SERIAL NO.	2 NAME	3 ORGANIZATION	4 FUNDS	5 LWOP HOURS					
027630	HIDALGO B N JR	51 350	V						
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 12 4		\$13,392	12/18/68	GS 12 4		\$13,798	12/19/68		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>Eustace</i>							DATE 10 October 68		
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS <i>A</i>									
FORM 560 E Use previous editions PAY CHANGE NOTIFICATION (4-31)									

COMPLETION

DATE

BY

INITIALS

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 215 OF PL 90-206 AND EXECUTIVE ORDER 11613 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
MIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$13,392

"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 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
MIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$12,607

c/w #12

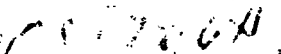
G 30

1. Service No.		2. Name		3. Cost Center Number		4. LWOP Hours				
027630		HICALSO B N JR		41-390 V						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Eff. Date	Grade	Step	Salary	Eff. Date	PS	LS	AD
GS 12	3	11,685	12/19/65	GS 12	4	12,000	12/14/66			77.00
8. Remarks and Auditor's Initials										
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY <i>[Signature]</i>										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>[Signature]</i> DATE: <i>Dec 12 1966</i>										
PAY CHANGE NOTIFICATION										

77.00
20244207
77.00

P

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)															
027630		FEEALGO B N CR															
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT											
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM				14 66		REGULAR											
6. FUNDS		7. COST CENTER NO. (CHARGEABLE)		8. CSC OR OTHER LEGAL AUTHORITY													
X		3370022		F 2043 DECT. 203													
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION												
DOP/WH					WASH., D. C.												
11. POSITION/TITLE			12. POSITION NUMBER			13. SERVICE DESIGNATION											
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY GRADE										
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF 5 U.S.C. 20501. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. AGENCY CODE		20. EMPLOY CODE		21. OFFICE CODE		22. STATION CODE		23. INTEREST CODE		24. GRADE		25. DATE OF BIRTH		26. DATE OF HIRE		27. DATE OF LEI	
28. NET EARNINGS		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CONTRIBUTION INFORMATION DATA				33. SECURITY INFO AC		34. IFF			
35. NET PREFERENCES		36. SERV. COMP. DATE		37. COMP. COMP. DATE		38. CAREER CONTRACT		39. PHYSICAL HEALTH STATUS				40. SOCIAL SECURITY NO.					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.		43. SIGNATURE AND DATE		44. STATE AND DATE				45. STATE AND DATE					
SIGNATURE OF OFFICER'S AUTHORITY ACTION																	
																	

FORM 1120
1-66

Use Previous Edition

SECRET

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	GRS-STEP	OLD SALARY	NEW SALARY
MIDALGO R N JR	027630	51	350	V GS 12 3	\$11,355	\$11,685

6-33

327630		MIDALGO R N JR		51 350		V		GS 12 3	
OLD SALARY RATE				NEW SALARY RATE				TYPE ACTION	
Rate	Step	Effective Date	Class	Step	Rate	Effective Date	PL	TY	ADJ.
10,927		12/20/64	GS 12	3	11,355	12/1/65			
<p>NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERK'S INITIALS: _____ AUDITED BY: _____</p> <p>I CERTIFY THAT THE ROMA OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCERTABLE LEVEL OF COMPETENCE</p> <p>SIGNATURE: <u>E. Smith</u></p> <p>PAY CHANGE NOTIFICATION</p>									

JH: 17 DEC 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)										
027630	HIDALGO B N JR										
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				12 19 65		REGULAR					
6. FUNDS	7. TO V	8. TO W	9. TO Y	10. TO Z	11. COST CENTER NO (CHARGEABLE)		12. CSC OR OTHER LEGAL AUTHORITY				
X					6235 0620 0000		50 USC 403 J				
13. ORGANIZATIONAL DESIGNATIONS					14. LOCATION OF OFFICIAL STATION						
DOP/WH BRANCH 2 PANAMA SECTION					WASH., D.C.						
15. POSITION TITLE				16. POSITION NUMBER		17. SERVICE DESIGNATION					
OPS OFFICER				1318		D					
18. CLASSIFICATION SCHEDULE (SEE 1.8, 1.9)			19. OCCUPATIONAL SERIES		20. GRADE AND STEP		21. SALARY OR RATE				
GS			0136.01		12 3		11355				
22. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
23. ACTION CODE	24. EMPLOY CODE	25. OFFICE CODES		26. STATION CODE	27. INTEGREE CODE	28. REGISTRY CODE	29. DATE OF BIRTH		30. DATE OF GRADE	31. DATE OF LEI	
37	10	51350 WH		75013	1	1	05 27 19				
32. MTE EXPIRES		33. SPECIAL REFERENCE		34. DETACHMENT DATA		35. SEPARATION DATA CODE		36. CORRECTION/CANCELLATION DATA		37. SECURITY REG NO	38. SER NO
								EOD DATA			
39. VET PREFERENCE		40. SERV COMP DATE		41. LONG COMP DATE		42. CAREER CATEGORY		43. SEGLI/HEALTH INSURANCE		44. SOCIAL SECURITY NO	
45. PREVIOUS GOVERNMENT SERVICE DATA				46. LEAVE CAT		47. FEDERAL TAX DATA		48. STATE TAX DATA			
49. SIGNATURE OR OTHER AUTHENTICATION											

FORM 1150

Use Previous Edition

SECRET

Include the GROUPS Being Affected in the Report

(When Filled In)

"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 10 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WIDALGO R N JR	027630	51	500	V GS 12 2	\$10,605	\$10,987

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION							
1. SERIAL NUMBER 027610		2. NAME (LAST FIRST MIDDLE) MIDALGO B N JR					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE 09 31 65		5. CATEGORY OF EMPLOYMENT	
6. FUNDS X		V TO V	V TO G	7. COST CENTER NO CHARGEABLE 5235 1162 0000		8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DIVISION WH C MIAMI OPS BR FI SEC				10. LOCATION OF OFFICIAL STATION WASH, D. C.			
11. POSITION TITLE RPS OFFICER				12. POSITION NUMBER 1145		13. CAREER SERVICE DESIGNATION U	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12		17. SALARY OR RATE	
18. REMARKS							
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 6-9-65 <i>HH</i> </div>							
SIGNATURE OR OTHER AUTHENTICATION							

30F

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
027630		MICALGO B N JR		49 997		43F				
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
8. Remarks and Authorization										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD. / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>WV</i> AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>[Signature]</i>						DATE <i>[Date]</i>				
PAY CHANGE NOTIFICATION										

DEC 22 11 06 AM '64

REC PAYROLL BUEN

MHC: 2 NOV 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)														
027630		HIDALGO B N JR														
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT						NO. DA. YR. 11 02 64			REGULAR							
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE			8. CSC OR OTHER LEGAL AUTHORITY							
X						5235 1162 0000			50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION										
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION						WASH., D. C.										
11. POSITION TITLE						12. POSITION NUMBER			13. SERVICE DESIGNATION							
OPS OFFICER						0887			D							
14. CLASSIFICATION SCHEDULE (GS, LD, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE								
GS				0136.01		12 1		10250								
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 LES				
37	10	NUMERIC	ALPHABETIC	75013		1	NO	DA	YR	NO	DA	YR	NO	DA	YR	
		49150	SAS				05	27	19							
28. NTE EXPIRES			29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REQ NO	34. SER			
NO DA YR			1 - CSC 3 - FICA 8 - NONE		CODE		TYPE		NO DA YR			EOD DATA				
35. VET. PREFERENCE		36. SERV COMP DATE			37. LONG COMP DATE			38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE			40. SOCIAL SEC. TV NO			
CODE		0 - NONE 1 - 5 YR 2 - 10 YR	NO	DA	YR	NO	DA	YR	LAN	TEMP	CODE	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		FORM EXECUTED: CODE		CODE		NO TAX STATE CODE (EEMP)		
						1 - YES 2 - NO				1 - YES 2 - NO						
SIGNATURE OR OTHER AUTHENTICATION																
FROM: DEV COMP 2																
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;">11/02/64</p> </div>																

FORM 1150
11 62

Use Previous Edition

SECRET

14-00000
FORM 1150
11 62
SECRET

(When Filled In)

RZR: 22 APR 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
027530		HIDALGO, S N US									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
CAREER PROVISIONAL EXCEPTED APPT				MO DA YR 04 25 64		REGULAR					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X						4232 1000 1000		50 USE 403			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SAS CS/CS DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						2227					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
CS			0130.01		12.1		2280				
18. REMARKS OTHER											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE											
20. EMPLOY CODE											
21. OFFICE CODING											
22. STATION CODE											
23. INTEGER CODE											
24. MONTHS CODE											
25. DATE OF BIRTH											
26. DATE OF GRADE											
27. DATE OF LEI											
28. NTE EXPIRES											
29. SPECIAL REFERENCE											
30. RETIREMENT DATA											
31. SEPARATION DATA CODE											
32. CORRECTION/CANCELLATION DATA											
33. SECURITY REG NO											
34. SEX											
35. VET PREFERENCE											
36. SERV COMP DATE											
37. LONG COMP DATE											
38. CAREER CATEGORY											
39. FEGLI / HEALTH INSURANCE											
40. SOCIAL SECURITY NO											
41. PREVIOUS GOVERNMENT SERVICE DATA											
42. LEAVE CAT											
43. FEDERAL TAX DATA											
44. STATE TAX DATA											
45. NO. PREVIOUS SERVICE											
46. NO. BREAK IN SERVICE											
47. BREAK IN SERVICE (LESS THAN 3 YRS)											
48. BREAK IN SERVICE (MORE THAN 3 YRS)											
49. NO. EXEMPTED CODES											
50. NO. TAX EXEMPTIONS											
51. FORM EXEMPTED											
52. NO. TAX STATE CODE											
53. STATE CODE											
54. STATE CODE											
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98. STATE CODE											
99. STATE CODE											
100. STATE CODE											

POSTED
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FORM 11 62 1150

Old Previous Edition

22 APR 64 1964

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

REF: 28 APR 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER: 027830
2. NAME (LAST-FIRST-MIDDLE): *Arnold, B A Jr*

3. NATURE OF PERSONNEL ACTION: RESIGNATION
4. EFFECTIVE DATE: 04 25 64
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: V TO V, V TO CF, CF TO V, X, CF TO CF
7. COST CENTER NO. CHARGEABLE: 4132 2001 1000
8. CSC OR OTHER LEGAL AUTHORITY:

9. ORGANIZATIONAL DESIGNATIONS: COP/SAS, US FIELD, FORWARD OPERATIONS STATION-JMWAVE, CI SECTION
10. LOCATION OF OFFICIAL STATION: JMWAVE

11. POSITION TITLE: OPS OFFICER
12. POSITION NUMBER: 0731
13. SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (GS, LS, etc.): GS
15. OCCUPATIONAL SERIES: 0136:01
16. GRADE AND STEP: 12 1
17. SALARY OR RATE: 9.90

18. REMARKS: [Stamp: FILED ON 29 APR 64]

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

Grid containing fields 19-44: ACT-36 CODE, EMPLOY CODE, OFFICE CODING, STATION CODE, INTEGREE CODE, MGRS CODE, DATE OF BIRTH, DATE OF GRADE, DATE OF LEI, etc.

SIGNATURE OR OTHER AUTHENTICATION: [Stamp: 429-64 61]

28 APR 64

925

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
██████████ <i>Hedaly, B. H. Jr.</i>	027630	49	730	CF GS 12 1	\$ 9,475	\$ 9,980

POSTED ON
OF-40
8 JUN 1964

SECRET
(When Filled In)

300 20 DEC 63

NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER 027530		2. NAME (LAST, FIRST MIDDLE) Hidalgo, Sergio															
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE 12 22 63		5. CATEGORY OF EMPLOYMENT REGULAR											
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 4132 2001 1000		8. ESC OR OTHER LEGAL AUTHORITY 50 USC 403 J									
CF TO V		X		CF TO CF													
9. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION					10. LOCATION OF OFFICIAL STATION JMWAVE												
11. POSITION TITLE OPS. OFFICER					12. POSITION NUMBER 0731		13. SERVICE DESIGNATION D										
14. CLASSIFICATION SCHEDULE (GS, LB, PH) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 1		17. SALARY OR RATE 9475										
18. REMARKS																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE 22		20. EMPLOY CODE 10		21. OFFICE CODING NUMERICAL ALPHABETIC 40730 SAS		22. STATION CODE 00000		23. INTEGREE CODE		24. HDQTR CODE 2		25. DATE OF BIRTH 05 27 19		26. DATE OF GRADE 12 22 63		27. DATE OF LEI 12 22 63	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. CSC 2. FICA 3. NONE		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA EOD DATA				33. SECURITY REQ NO.		34. SEX			
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE				40. SOCIAL SECURITY NO.					
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA									
1. NO PREVIOUS SERVICE		1. YES		2. NO		FORM EXECUTED CODE		NO TAX EXEMPTIONS		PLAN RELEVATED		CODE		NO TAX STATE CODE			
2. BREAK IN SERVICE (LESS THAN 1 YEAR)		3. BREAK IN SERVICE (MORE THAN 1 YEAR)		1. YES		2. NO		1. YES		2. NO		CODE		STATE CODE			
SIGNATURE OR OTHER AUTHENTICATION																	
12/27/63 [Signature]																	

FORM 11-62 1150

Use Previous Edition

SECRET 20 DEC 1963

FORM 11-62 1150 (When Filled In)

(When Filled In)

SECRET
(When Filled In)

LLG: 25 APRIL 63

OAB												NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 037630						2. NAME (LAST FIRST MIDDLE) Harvey W. J.																	
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT CAREER PROVISIONAL						4. EFFECTIVE DATE MO DA YR 04 29 63						5. CATEGORY OF EMPLOYMENT REGULAR											
6. FUNDS			7. V TO V			8. V TO CP			9. COST CENTER NO. CHARGEABLE 3152 2001 1000			10. CSC OR JIN-R LEGAL AUTHORITY 50 USC 403 J											
9. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION												10. LOCATION OF OFFICIAL STATION JMWAVE											
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0732						13. SERVICE DESIGNATION 0											
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS				15. OCCUPATIONAL SERIES 0136.01				16. GRADE AND STEP 11 4				17. SALARY OR RATE 8840											
18. REMARKS <div style="text-align: right; border: 1px solid black; padding: 5px; display: inline-block;">POSTED ON 25 APR 63 6 MAY 1963</div>																							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																							
19. ACTION CODE 13		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 61730 SAS				22. STATION CODE 99999		23. INTEGREE CODE		24. HOURS CODE 2		25. DATE OF BIRTH MO DA YR 05 27 19			26. DATE OF GRADE MO DA YR 03 17 58			27. DATE OF LEI MO DA YR 09 16 62			
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. LBC 2. FICA 3. NONE CODE 1				31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE MO DA YR EOD DATA				33. SECURITY REQ NO 27630		34. SEX MI							
35. VET. PREFERENCE CODE 0		36. SERV. COMP. DATE MO DA YR 07 16 46				37. LONG. COMP. DATE MO DA YR 03 17 58				38. CAREER CATEGORY CODE P		39. FEGLI / HEALTH INSURANCE CODE 1 0 - WAIVER 1 - YES		40. SOCIAL SECURITY NO									
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 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 8		43. FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO 0				44. STATE TAX DATA NO. TAX EXEMPTIONS FORM EXECUTED CODE 1 - YES 2 - NO 0													
SIGNATURE OR OTHER AUTHENTICATION																							
												<div style="border: 1px solid black; padding: 10px; display: inline-block;">POSTED 25/04/63 WJK</div>											

FORM 1150
11-62

Use Previous Edition

SECRET 25 APR 1963

14-511
14-511
14-511
(When Filled In)

SECRET
(When Filled In)

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)								
027630		HIDALGO E N JR								
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
RESIGNATION					04 27 63		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. ESC OR OTHER LEGAL AUTHORITY						
X		3232 1000 1000								
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION					
DD/SPECIAL AFFAIRS STAFF FI/CI BRANCH					WASH., D.C.					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER				0592		D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS			0136.01		11 4		8940			
18. REMARKS										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STAT/CA CODE	23. INTEGREE CODE	24. INDEPT CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI
45	10	NUMERIC ALPHABETIC					MO DA YR		MO DA YR	MO DA YR
		29. NTE EXPIRES	30. SPECIAL REFERENCE	31. RETIREMENT DATA	32. SEPARATION DATA CODE	33. CORRECTION/CANCELLATION DATA	34. SECURITY REG NO	35. SEX		
					1ED0031	EOD DATA				
36. VET PREFERENCE	37. SERV COMP DATE	38. LONG COMP DATE	39. CAREER CATEGORY	40. FEGLI / HEALTH INSURANCE	41. SOCIAL SECURITY NO					
42. PREVIOUS GOVERNMENT SERVICE DATA			43. LEAVE CAT CODE	44. FEDERAL TAX DATA		45. STATE TAX DATA				
SIGNATURE OR OTHER AUTHENTICATION										
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">Hidalgo E N Jr</p> </div>										

ARM: 20 NOV 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)										
027630	HICALGO B N JR										
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT					11 20 62		REGULAR				
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X		3232 1000 1000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DDP TASK FORCE "W" FI-CI BRANCH					WASH., D. C.						
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
CPS OFFICER				0682		D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS			0136.01		11 4		8840				
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. MONTH CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LES	
37	10	61300	TFW	75013	1	05	27	19			
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SER.	
						EOD DATA					
35. VET. PREFERENCE	36. SERV COMP DATE		37. LCMS COMP DATE		38. CAREER CATEGORY		39. FEGLI HEALTH INSURANCE		40. SOCIAL SECURITY NO		
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;"><i>[Signature]</i></p> </div>											

FORM 462 1150

Use Previous Edition

SECRET

1150
Except the address
shown on the
back of this form

(When Filled In)

16-811

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
 EFFECTIVE 16 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GRST SALARY	NEW GRST SALARY
HIDALGO B N JR	027630	64075	V	\$ 8340	\$ 8840

235-1000

1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours				
027630		HIDALGO B N JR		64 075 V /						
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PU	LSI	ADJ
S 11	3	\$ 8,080	03/19/61	S 11	4	\$ 8,340	09/16/62			
8 Remarks and Authorization										
<input checked="" type="checkbox"/> NO EXCESS LWOP / / EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>mg</i> AUDITED BY <i>[Signature]</i>										
PAY CHANGE NOTIFICATION										

SECRET
(When Filled In)

AES: 17 JAN 62

NOTIFICATION OF PERSONNEL ACTION																	
OCF																	
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)															
027630		HIDALGO B N JR															
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT								
REASSIGNMENT						01 17 62			REGULAR								
6. FUNDS		7. COST CENTER NO		8. CHARGEABLE		9. CSC OR OTHER LEGAL AUTHORITY											
X		V TO V		V TO CF		2235 1000 1000		50 USC 403 J									
10. ORGANIZATIONAL DESIGNATIONS						11. LOCATION OF OFFICIAL STATION											
DDP WH PLANS & OPERATIONS STAFF SECTION A						WASH., D.C.											
12. POSITION TITLE				13. POSITION NUMBER				14. CAREER SERVICE DESIGNATION									
OPS OFFICER				0641				D									
15. CLASSIFICATION SCHEDULE (GS, LB, etc)			16. OCCUPATIONAL SERIES			17. GRADE AND STEP			18. SALARY OR RATE								
GS			0136.01			11 3			8080								
19. REMARKS																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRAL CODE		24. HOURS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37		10		64075 WH		75013		1		05 27 19							
28. BTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SER					
										EOD DATA							
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT, LCD		39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA				44. STATE TAX DATA							
SIGNATURE OR OTHER AUTHENTICATION																	
												1/18/62 gm					

SECRET
(When Filled In)

ARE: 18 AUG 1961

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)													
027630		HIDALGO B N JR													
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT								
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS					08 20 61		REGULAR								
6. FUNDS		7. COST CENTER NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY											
X		2635 5000 8021		50 USC 403 J											
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION										
DDP WH BRANCH 4 FI CI SECTION					WASH., D. C.										
11. POSITION TITLE			12. POSITION NUMBER		13. CAPPER SERVICE DESIGNATION										
OPS OFFICER			0681		D										
14. CLASSIFICATION (GENERAL, SPECIAL, etc.)			15. GRADE AND STEP		16. SALARY OR RATE										
GS			0136.01 11 3		8060										
18. REMARKS															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. MONTH		25. DATE OF BIRTH		26. DATE OF SERVICE		27. DATE OF LEI	
16 10		64450 WH		75013		1		05 27 19							
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SEN			
								EOD DATA							
35. NET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT/LED		39. PEGEL/HEALTH INSURANCE		40. SOCIAL SECURITY NO					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA							
SIGNATURE OR OTHER AUTHENTICATION															

SECRET
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
577690		HIDALGO R N JR		DDP/WH 3A UV						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS	11.2	7,820	09/20/59	11	3	8,040	04/19/61			
8. Remarks and Authentication										
<p>NO EXCESS LWOP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>IN LWOP STATUS AT END OF WAITING PERIOD</p> <p align="center">Enchile WK</p>										
PAY CHANGE NOTIFICATION										

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/21/64

1. NPA NUMBER 2. NAME (LAST, FIRST, MIDDLE)

027630 MICALGO R N JR

3. NATURE OF PERSONNEL ACTION

4. EFFECTIVE DATE

5. CATEGORY OF EMPLOYMENT

CONV. TO CAREER EMPLOYEE STATUS

03 17 64

6. FUNDS
A. V TO V
B. V TO U
C. U TO U

7. COST CENTER NO. (CHARGEABLE)

8. CN. OR OTHER LEGAL AUTHORITY

4232 1990 1000

9. ORGANIZATIONAL DESIGNATION
DDP/SAS

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

12. POSITION NUMBER

13. CAREER LEVEL DESIGNATION
U

14. CLASSIFICATION SCHEDULE (45 CFR 161)

15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION:

[Handwritten Signature]

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-566 AND DCI MEMO DATED
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960 **NOTIFICATION OF PERSONNEL ACTION**

1. Serial No. 527630	2. Name (Last-First-Middle) HIOALOO B N JR	3. Date Of Birth Mo: 05, Da: 27, Yr: 19	4. War: Pres 5. Civ: M, 1	6. CS-FOO Mo: 03, Da: 17, Yr: 58
7. SCID Mo: 07, Da: 16, Yr: 46	8. CSC Permit No-1: 1, Code: 1	9. CSC Or Other Legal Authority 50 USCA 403 d	10. Appt. Affidvt Mo: , Da: , Yr:	11. FEGLI Mo: 03, Da: 17, Yr: 58
		12. LPO	13. Grade No-1: , Code: 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations DOS OTR OPERATIONS SCHOOL COVERT TRAINING	Code 1172	15. Location Of Official Station WASH., D. C.	Station Code 75013
16. Dist. Field Dept: 1, Code: 3 Wld: 3, Code: 3 Fgn: 5, Code: 3	17. Position Title INSTRUCTOR OPERS	18. Position No. 1014	19. Serv. 20. Occup. Series 02 1711.50
21. Grade & Step 11 2	22. Salary Or Rate \$ 7270	23. SD D	24. Date Of Grade Mo: 03, Da: 17, Yr: 58
		25. PSI Due Mo: 09, Da: 20, Yr: 59	25. Appropriation Number 9 7500 30 018

ACTION

27. Nature Of Action REASSIGNMENT	Code 57	28. Eff. Date Mo: 04, Da: 24, Yr: 60	29. Type Of Employee REGULAR	Code 01	30. Separation Data
--------------------------------------	------------	---	---------------------------------	------------	---------------------

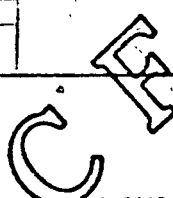
PRESENT ASSIGNMENT

31. Organizational Designations DDP WH BRANCH 4	Code 4617	32. Location Of Official Station WASH., D. C.	Station Code 75013
33. Dist. Field Dept: 1, Code: 1 Wld: 3, Code: 1 Fgn: 5, Code: 1	34. Position Title OPS OFFICER	35. Position No. 0626	36. Serv. 37. Occup. Series 05 0136.01
38. Grade & Step 11 2	39. Salary Or Rate \$ 7270	40. SD D	41. Date Of Grade Mo: 03, Da: 17, Yr: 58
		42. PSI Due Mo: 03, Da: 19, Yr: 60	43. Appropriation Number 0135 1000 1000

44. Remarks

06-27-60 J.K

SECRET
OPTION FILLED IN

1. EMP. SERIAL NO. 527630		2. NAME HIDALGO B H JK			3. ASSIGNED CLASS DJS/TRNG 21		4. FLOOR UV		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
GS 11	1	\$ 7,000	03	17	58	GS 11	2	\$ 7,270	09	20	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK			11. RECEIVED BY		
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	0	24	58	4 756.					
14. AUTHENTICATION											
 FILE 9/2/59 MC 4/6/59 VIK											

PERIODIC STEP INCREASE - AUTHENTICATION

FORM NO. 560a
1 MAR. 58

SECRET

PERSONNEL FOLDER 101

SECRET

JEC:12 JUNE 59

NOTIFICATION OF PERSONNEL ACTION

1. Serial No. 527630		2. Name (Last-First-Middle) HIDALGO B N JR			3. Date Of Birth Mo. 05, Da. 27, Yr. 19			4. Vet. Pref. Non-0 Code 5 Pt-1 10 Pt-2		5. Sex M 1		6. CSC Mo. 03, Da. 17, Yr. 58	
7. SCD Mo. 07, Da. 16, Yr. 46		8. CSC Exam Yes-1 Code No-2 1		9. CSC Or Other Legal Authority 50 USCA 403.8		10. Appr. Allidat Mo. , Da. , Yr.		11. FEGLI Yes-1 Code No-2 1		12. LCD Mo. 03, Da. 17, Yr. 58		13. Yes-1 Code No-2 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP WH BRANCH 1P1 CENTRAL AMERICA SECTION				Code 4613		15. Location Of Official Station WASH., D.C.				Station Code 75013	
16. Dept. Field Code 2		17. Position Title AREA OPS OF				18. Position No. 0486		19. Serv. GS		20. Occup. Series 0136.01	
21. Grade & Step 11 1		22. Salary Or Rate \$ 7030		23. SD 0		24. Date Of Grade Mo. 03, Da. 17, Yr. 58		25. PSI Date Mo. 09, Da. 20, Yr. 58		26. Appropriation Number 8 3500 20	

ACTION

27. Feature Of Action REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS				Code 05		28. Eff. Date Mo. 06, Da. 18, Yr. 59		29. Type Of Employee REGULAR		Code 01		30. Separation Data	
---	--	--	--	------------	--	---	--	---------------------------------	--	------------	--	---------------------	--

PRESENT ASSIGNMENT

31. Organizational Designations DDS OTR OPERATIONS SCHOOL COVERT TRAINING				Code 1172		32. Location Of Official Station WASH., D. C.				Station Code 75013	
33. Dept. Field Code 3		34. Position Title INSTRUCTOR SPERS				35. Position No. 1914		36. Serv. GS		37. Occup. Series 1711.50	
38. Grade & Step 11 1		39. Salary Or Rate \$ 7030		40. SD 0		41. Date Of Grade Mo. 03, Da. 17, Yr. 58		42. PSI Date Mo. 07, Da. 20, Yr. 58		43. Appropriation Number 9 7500 20 018	

44. Remarks

POSTED

CP

S E C R E T

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
HIDALGO R N JR	127630	GS-11-1	\$ 6,390	\$ 7,030

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

VL 16 MAY 58

1. Serial No. 127630		2. Name (Last-First-Middle) BALMES N. HIDALGO, JR. HIDALGO B N JR			3. Date Of Birth Mo. Da. Yr. 05 27 19			4. Vet. Prof. None-0 5 Pt-1 10 Pt-2 1		5. Sex M 1		6. GS - EOS Mo. Da. Yr. 03 17 58			
7. SCD		8. CSC Rmtt.			9. CSC Or Other Legal Authority 50 USCA 203			10. Appt. Affidav.		11. FECLT		12. LCD		13. Other Code	
Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	
07	16	46	No-2	1	03	13	58	No-2	1	03	17	58	No-2	2	

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station		Station Code	
16. Dept. - Field Dept - 2 USId - 4 Fgn - 6		Code	18. Position No.		19. Serv. 20. Occup. Series	
21. Grade & Step		22. Salary Or Rate	23. SS	24. Date Of Grade 25. PSI Due		26. Appropriation Number
		\$		Mo. Da. Yr.	Mo. Da. Yr.	

ACTION

27. Nature Of Action EXCEPTED APPOINTMENT CORRECTION*		Code	28. Eff. Date Mo. Da. Yr.	29. Type Of Employee REGULAR	Code	30. Separation Data
		13	03 17 58		01	

PRESENT ASSIGNMENT

31. Organizational Designations DOP WH BRANCH 111 CENTRAL AMERICA SECTION		Code	32. Location Of Official Station WASH., D.C.		Station Code	
		2613			75013	
33. Dept. - Field Dept - 9 USId - 4 Fgn - 6		Code	35. Position No.		36. Serv. 37. Occup. Series	
2		AREA OPS OF	0486		GS 0136.01	
38. Grade & Step		39. Salary Or Rate	40. SS	41. Date Of Grade 42. PSI Due		43. Appropriation Number
11 1		\$ 6330	6	Mo. Da. Yr.	Mo. Da. Yr.	9 3500 25
				03 17 58	03 22 59	

14. Remarks

*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2. THE NAME, WHICH READ BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.

Handwritten signature and stamp.

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
LVL 17 MAR 58																	
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vol. Prof.		5. Sex		6. CS - EOD				
127630		BALMES N. HIDALGO HIDALGO BALMES N				Mo.	Da.	Yr.	None-0	Code	M	1	Mo.	Da.	Yr.		
05		27		19	5 Pt-1		10 Pt-2	1				03		17	58		
7. SCD		8. CSC Retire.		9. CSC Or Other Legal Authority			10. Appt. Affidav.			11. FEGLI		12. LCD		13. <small>Vol. Serv. Credit</small> Code			
Mo.	Da.	Yr.	Yes-1	Code				Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.		
07	16	36	No-2	1	50 USCA 403			03	13	53	No-2	1	03	17	53	No-2	2

PREVIOUS ASSIGNMENT													
14. Organizational Designations						Code		15. Location Of Official Station				Station Code	
16. Dept - Field		17. Position Title				18. Position No.			19. Serv.		20. Occup. Series		
Dept - 2	Code												
USStd - 4													
Frqn - 5													
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade			25. PSI Due		26. Appropriation Number		
		\$				Mo.	Da.	Yr.	Mo.	Da.	Yr.		

ACTION									
27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Data	
EXCEPTED APPOINTMENT		13	03 17 58		REGULAR		01		

PRESENT ASSIGNMENT													
31. Organizational Designations						Code		32. Location Of Official Station				Station Code	
DDP WH BRANCH 111 CENTRAL AMERICA SECTION						4613		WASH., D.C.				75013	
33. Dept - Field		34. Position Title				35. Position No.			36. Serv.		37. Occup. Series		
Dept - 8	Code	AREA OPS OF				0486			US		0136.01		
USStd - 4													
Frqn - 6	2												
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade			42. PSI Due		43. Appropriation Number		
11 1		\$ 6700		D		Mo.	Da.	Yr.	Mo.	Da.	Yr.	8 3500 20	
						02	117	58	09	120	53		

44. Remarks												
<div style="border: 1px solid black; padding: 10px; display: inline-block;"> <p align="center">POSTED</p> <p align="center">7 MAR 58</p> <p align="center">F. <i>[Signature]</i></p> </div>												

FITNESS RPTS
1966 - 1969

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				027630			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, RAFAEL J., JR.			27 Nov 1919	M	GS-12	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/ P/O		Headquarters	
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"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
CAREER-PROVISIONAL (See Instructions - Section C)				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From to)			
				16 March - 31 October 1965			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.						RATING LETTER P	
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and						RATING LETTER S	
SPECIFIC DUTY NO. 3 Briefing representatives of personnel. foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.						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	
4 JAN 1965							

SECRET

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. Provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Mr. Hidalgo is an able intelligence officer, ^{developed} to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent ¹⁰ years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p>			
<p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p>			
<p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</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		
9 December 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT WAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with no exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	Walter T. Cini <i>[Signature]</i>	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				027630			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, Balmes N.			27 May 1919	M	12	D	
9. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/SAS		Washington		
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"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
31 January 1965				9 April 1964--15 March 1965			
SECTION B				PERFORMANCE EVALUATION			
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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 Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.						RATING LETTER P	
SPECIFIC DUTY NO. 3 Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).						RATING LETTER S	
SPECIFIC DUTY NO. 4 Served as case officer for a counterintelligence operation (the agent was located in New York City) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).						RATING LETTER P	
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	
29 MAR 1965							

SECRET

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.

Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B, (specific duties) he performed a wide variety of duties.

Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, niempranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.

Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE 23 March 65

SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

11 Months

DATE 23 March 1965

OFFICIAL TITLE OF SUPERVISOR WH/SA/CI/COPS

TYPED OR PRINTED NAME AND SIGNATURE Richard Tansing

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.

DATE 23 Mar 65

OFFICIAL TITLE OF REVIEWING OFFICIAL C WH/SA CI (WH/C/SP)

TYPED OR PRINTED NAME AND SIGNATURE Harold F. Swenson

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				027630			
SECTION A				GENERAL			
1. NAME <i>Richard K. J. Jr.</i> (Last) (First) (Middle)			2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11	5. SD D	
6. OFFICIAL POSITION TITLE OPS OFFICER			7. OFF. DIV/BR OF ASSIGNMENT IDP/S.A.S.		8. CURRENT STATION JMWAVE		
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"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
<input type="checkbox"/> SPECIAL (Specify)				<input checked="" type="checkbox"/> SPECIAL (Specify): Promotion			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 6 May 1963 to 5 September 1963			
SECTION B				PERFORMANCE EVALUATION			
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</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	
To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [redacted] DEB [redacted]						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESC debriefing program.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
To prepare and present to his immediate supervisor completed interrogation reports.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED ON 27 SEP 1963 <i>[Signature]</i> </div>							
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	
27 SEP 1963						S	

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for promotion. 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.

The person being rated is a conscientious devoted ^{SEP 26 2 00 PM '63} ~~employee~~ who has demonstrated an extraordinary ability to get along with his co-workers and other ODYOKE representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KUDESK effort of the Station.

The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KUJUMP interrogators ~~and~~ and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of effort.

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
4 months At time preparation this report employee was on TDY Hqs and leave. Will be shown him upon return.

DATE OFFICIAL TITLE OF SUPERVISOR TYPED OR PRINTED NAME AND SIGNATURE
4 September 1963 Chief, CI Branch, JWAVE /s/ Neil T. PICKWORTH (signed in pseudo on Fld. Trans.)

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

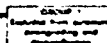
Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE
18 September 1963 Chief of Station, JWAVE /s/ Andrew K. REUTEMAN (signed in pseudo on Fld. Trans.)

SECRET

SECRET
(When Filled In)

SEP 1962 FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, BALMES			27 May 1919	M	GS-11	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP WH P&O SEC A.				
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
CAREER		RESERVE	TEMPORARY		INITIAL	REASSIGNMENT SUPERVISOR	
					<input checked="" type="checkbox"/>	REASSIGNMENT EMPLOYEE	
CAREER-PROVISIONAL (See Instructions - Section C)				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to-)			
30 October 1962				17 Jan 62 - 30 Sep 62			
SECTION B PERFORMANCE EVALUATION							
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.							
A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.							
P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.							
S - <u>Strong</u> Performance is characterized by exceptional proficiency.							
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.							
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	
Responsible for initiation and development of WH Division durable assets program.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Collate and maintain files on espionage laws of LA countries.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Served as interpreter and translator for Division LA contacts.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Coordinated with Branch 1 of WHD on FI and CI matters.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Gives lectures as guest instructor to students attending School of International Communism.						S	
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	
						P	



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>Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perceptior were distinct assets in these undertakings.</p> <p>It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.</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	
18 Sept 62	<i>Alberto L. Hidalgo</i>	
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
18 September 1962	C/WH/PO/A	<i>Clark H. Simmons</i> CLARK H. SIMMONS
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I have had insufficient personal contact with Subject to make any meaningful comments.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
13 September 1962	C/WH/OPS	<i>Vernon L. Gresham</i> VERNON L. GRESHAM

SECRET

S E C R E T
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE

Name (Last-First-Middle)

Hidalgo, Balmeo

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

- | | |
|---|---|
| ✓ | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation). |
| ✓ | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). <i>N.A.</i> |
| | 3. Standard Form 55 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954). |
| ✓ | 4. Standard Form 2802 (Application for Refund of Retirement Deductions).
<i>Medical Disability</i> |
| ✓ | 5. Form 2595 (Authorization for Disposition of Paychecks).
<i>NO CHANGE</i> |
| | 6. Applicable to returnee (resignee from overseas assignment).
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.
<input type="checkbox"/> Appointment arranged with Office of Medical Services.
<input type="checkbox"/> Appointment for Office of Medical Services examination declined. |
| | 7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment. |
| | 8. Form 71 (Application for Leave). |
| | 9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty). |
| | 10. Instructions for returning to duty from Extended Leave or Active Military Service. |

Signature of Employee

Robert Hidalgo

Date Signed

Feb 27, 1970

Address (Street, City, State, Zip Code)

403 SILVER ROCK RD ROCKVILLE Md 20851

Correspondence

Overt

Covert

*OR 40 VERMONT HIGHLANDS
X6646*

S E C R E T

SECRET

**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) (first) (middle) DATE OF BIRTH (month, day, year) SOCIAL SECURITY NUMBER
 MEDALGO Jr Balnes Hieves May 27 1919 123 05 9966
 Employee Serial Number 27630
 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 (A)

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 (B)

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 (C)

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)

DATE

13 February 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
FEB 20 3 30 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-F
JANUARY 1968
(for use only until April 14, 1968)
176-101

APPOINTMENT AFFIDAVITS

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

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C.

(Department or agency)

(Address or division)

(Place of employment)

I, BALMES HIDALGO JR., 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 knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

17 Mar 58

(Date of entrance on duty)

Balme Hidalgo Jr.
(Signature of appointee)

Subscribed and sworn before me this 13th day of March, A. D. 1958.

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

[SEAL]

Billy A. Bussard 6 Mar 18 & 19
(Signature of officer)
Appointment Clerk
(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. Answer all questions. Admitted unfavorable information, about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1. PRESENT ADDRESS (street and number, city and State)
 No 4615 B. WASHINGTON BLVD NW - WASH DC

2. (A) DATE OF BIRTH: 27 May 1917 (B) PLACE OF BIRTH (city and State or city and foreign country): Havana Cuba

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY: Louise Woodliff (B) RELATIONSHIP: wife (C) STREET AND NUMBER, CITY AND STATE: (D) TELEPHONE NO.:

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? YES NO
 If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 12.

NAME	POST OFFICE ADDRESS (Give street number, if any)	RELATIONSHIP		MAR. STAT. (Check one)
		(1) POSITIVE (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED		

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO
5. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES GROUP LIFE INSURANCE ACT?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes," give details in Item 12.</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	11. (B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELLED OR REVOKED?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN 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? <i>If your answer is "Yes," give details in Item 12.</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	11. (C) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT: A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITIES FOR ANY VIOLATION OF ANY FEDERAL, STATE, LAW, COUNTY OR MUNICIPAL LAW, REGULATION, OR ORDINANCE TO ANY INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OR LESSON LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED. <i>If your answer is "Yes," give in Item 12 for each case. (1) approximate date, (2) charge, (3) place, (4) action taken.</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS? <i>If your answer is "Yes," give dates of and reasons for such debarment in Item 12.</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS? <i>If your answer to A, B, or C is "Yes," give details in Item 12 as fully as you can remember, including the name and address of employer, approximate date, and reasons in each case.</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply.)

ITEM NO.	ANSWER	ITEM NO.	ANSWER

INSTRUCTIONS TO APPOINTING OFFICER.—You must determine 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, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

SECRET
(When Filled In)

16

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information, however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13, Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 027630	NAME (Last-First-Middle) Hidalgo, Balmes N. Jr.	DATE OF BIRTH 05/27/19
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SECTION II EDUCATION

HIGH SCHOOL			
LAST HIGH SCHOOL ATTENDED La Salle Academy	ADDRESS (City State Country) NYC NY	YEARS ATTENDED (From To) 1938-1940	GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/GR. HRS. (Specify)
	MAJOR	MINOR				
1. NY University	Comm Law	MP-NYP	1943-45	NO		
UNIV of MD	Fire engineering		1968	No Credit Course		
2. Mont Jr College	Real Estate Procedures		1968	No Credit Course		

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
Suburban Hospital	Emergency Room procedures	EMERGENCY	1968	3(?)

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1. Non-Com leadership school		194?		?

SECTION III MARITAL STATUS

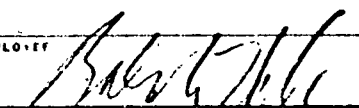
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY: MARRIED			
2. NAME OF SPOUSE (Last)		(First) (Middle) (maiden) (Maiden)	
HIDALGO		Veronica Waylonia Waylonia	
3. DATE OF BIRTH 23 May 14	4. PLACE OF BIRTH (City State Country) DuBois, Pa, USA		
5. OCCUPATION Train Asst	6. PRESENT EMPLOYER CIA		
7. CITIZENSHIP US	8. FORMER CITIZENSHIP(S) COUNTRY(IES) N/A	9. DATE U.S. CITIZENSHIP ACQUIRED Birth	

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1945 NY NY	US	Arlington, Va
2	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1950 NYC NY	US	Alexandria Va
	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Mother	1892 SECRET SPAIN	US	Rockville MD

SECRET

(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF ENTRY	KNOWLEDGE ACQUIRED BY... CHECK LIST			
				RECEIVED	TRAVEL	STUDY	ASSIGNMENT
Havana Cuba	Language, customs, people	1919-25		X			X
Rep of Panama	"	1952-58	Dec 20	X	X		X
El Salvador, Mexico	"	various		X	X		X
Guatemala, Puerto Rico	"	various		X	X		X
SECTION VI TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (PPM)		2. SHORTHAND (RPM)		3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM			
				<input type="checkbox"/> CRECC <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY:			
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED							
Extremely capable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				N/A			
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
N/A				N/A			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG				<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
NONE							
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
N/A		N/A		N/A			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
N/A				N/A			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION		DATE COMPLETED		
Non-Com leadership school			8800		7777		
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
						FROM TO	
American Red Cross		Silver Spring Md				1964 present	
Rockville Fire Dept and OTHERS		(presently Rockville, Md)				1958 present	
International Rescue & 1st Aid Assoc		worldwide				1956(?) present	
Montgomery Board of Realtors (ASSOCIATE member)		(Permanent pending)				1958 present	
SECTION X REMARKS							
I am a bit hazy on the dates.							
DATE		SIGNATURE OF EMPLOYEE					
19 Dec 68							

SECRET

SECRET

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY: (CHECK IN)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Cuba	Area and people/Lan.	1919-1924	Family	X		X	X
Panama	Area and people/Lan	1952-58	XXXX	X	X	X	X
Dom Rep	Area and People/Lan	1965			X		X
Salvador&Quat	"	1961-2-3			X		X

SECTION VI & Mexi TYPING AND STENOGRAPHIC SKILLS

1. TYPING (N/A) 2. SHORTHAND (N/A) 3. INDICATE SHORTHAND SYSTEM USED--(CHECK IN) APPROPRIATE ITEM

CREGG SPEEDWRITING STENOTYPE OTHER SPECIFY:

SECTION VII SPECIAL QUALIFICATIONS

PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED

Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Copman duties. SOME Real Estate knowledge.

SECTION VIII MILITARY SERVICE

CURRENT DRAFT STATUS

1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? YES NO 2. NEW CLASSIFICATION: See age.

3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS 4. IF DEFERRED, GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS

CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG: ARMY MARINE CORPS COAST GUARD NATIONAL GUARD NAVY AIR FORCE AIR NATIONAL GUARD

1. CURRENT RANK, GRADE OR RATE: N/A 2. DATE OF APPOINTMENT IN CURRENT RANK: N/A 3. EXPIRATION DATE OF CURRENT OBLIGATION: N/A

4. CHECK CURRENT RESERVE CATEGORY: READY RESERVE STANDBY (N/A) STANDBY (inactive) RETIRED DISCHARGED

5. MILITARY MOBILIZATION ASSIGNMENT: N/A 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED: N/A

MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	SPONSORED
Non-Com leadership school	Infantry	1943	N/A

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO
1. Rockville Fire Dept & others	Rockville Md & others	1958	present
2. Red Cross as Emeragney transport and First Aid Instructor as well as Md Corpman		1964	"
3. Associate member Mont Realtors		1968	"
4. Int Assoc Rescue & First Aid		1964	"

SECTION X REMARKS

Re Section IV: Both daughters now married.
 Re Section III: This is second marraige.
 Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.

DATE: 25 Nov 68 SIGNATURE OF EMPLOYEE: [Signature]

SECRET

SECRET
(When Filled In)

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

ALSO FIRST AID INSTRUCTIONS cover of form 7-444b

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 027630	NAME (Last-First-Middle) Hidalgo, Balmes N.	DATE OF BIRTH 05/27/19
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SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED La Salle Academy	ADDRESS (City, State, Country) NY City NY	YEARS ATTENDED (From-To) 1938-40	GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
--	---	--	---

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/ QTR HRS. (Specify)
	MAJOR	MINOR				
1. New York University	Comm Law Import-Export	procedures	1943/45	NO		
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
University of Md. College of Engineering	Fire Service extension	Jan 66	Aug 66	8

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1. Montgomery Junior College Rockville Md Campus	Real Estate procedures	Oct 1968		1
2. Suburban Hospital Bethesda, Md	Emergency Medical Aid/ Maryland State Corpman	Jan-May 1968		5

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY: Married		
2. NAME OF SPOUSE (Last) (First) (Middle) (maiden) HIDALGO Veronica W. (WAYLONIS)		
3. DATE OF BIRTH May 29 1914	4. PLACE OF BIRTH (City, State, Country) DuBois, Pa., USA	
5. OCCUPATION Admin Asst	6. PRESENT EMPLOYER C.I.A.	
7. CITIZENSHIP US	8. FORMER CITIZENSHIP(S) COUNTRY(IES) N/A	9. DATE U.S. CITIZENSHIP ACQUIRED Birth

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Feb 23/50	US	Alexandria Va
<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Jan 6/45	US	Arlington Va

SECRET
When Filled In

LLC
OFFICIAL USE ONLY (until 6-22-64)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

SECTION I BIOGRAPHIC AND POSITION DATA

1 EMP SER NO 027530	2 NAME (Last, First, Middle) MICALGO B N JR	3 SER M	4 DATE OF BIRTH 09/27/19	5 SCHEDULE GRADE/STEP GS-12-04
6 SSN D	7 POSITION TITLE CPS OFFICER	8 OFFICE OF ASSIGNMENT AM	9 LOCATION (City, State) WASH., D.C.	

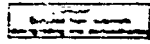
SECTION II AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
WESTERN HEMISPHERE PANAMA	PCS-YV	52/05/12	57/12/30
WESTERN HEMISPHERE	TDY-CC	59/01/29	59/02/08
WESTERN HEMISPHERE	TDY-CC	61/02/01	61/03/01
WESTERN HEMISPHERE	TDY-CC	61/04/19	61/06/19
EUROPEAN AREA	TDY-CC	63/12/01	63/12/18
WESTERN HEMISPHERE	PCS-CC	68/04/01	68/05/01
		68/04/01	68/04/01
WESTERN HEMISPHERE	TDY-CC	68/11/11	68/11/11
		THIRTEEN	13

OVERSEAS DATA
 CODED 25 APR 1968
 DATE: INITIALS: [Signature]

SECTION III EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NONE	NO COLLEGE DEGREE ON RECORD <i>TWO YEARS - COMMERCIAL LAW IMPART EXPORT PROCEEDURE</i>	NYU	1943-45



SECRET

When Filled In

SECTION III EDUCATION (Cont'd)

HIGH SCHOOL		YEARS ATTENDED	GRADUATE
LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, County)	From To	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
La Salle Academy	NYC NY	1938-40	

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO SEM / QTR HRS. Spent
	MAJOR	MINOR				
1 NYU - NYC NY	Comm. Law	Export laws	Sept 43 to ? 45	No		???
2						
3						
4						

5 IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT

6

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS				
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1				
2				
3				

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE				
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1				
2				
3				
4				
5				

AGENCY-SPONSORED EDUCATION				
Specify which, if any, of the education shown in Section III was Agency sponsored				
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1 Full Ops course			During 1958	9
2 Management Course			1966 one week	
3				
4				
5				

SECRET

SECRET

SECTION VII		MILITARY SERVICE	
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT		2. SELECTIVE SERVICE CLASSIFICATION	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		???	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS		4. IF DEFERRED GIVE REASON	
N/A		N/A	
MILITARY SERVICE RECORD (Active Duty Only)			
1. MILITARY ORGANIZATION (Army, Navy, etc.)	2. BRANCH OR CORPS	3. DATES OF SERVICE (extended active duty)	
Army	Infantry	FROM Oct 1940 TO Sept 1943	
4. STATUS (Regular, Reserve, etc.) (specify)	5. RANK, GRADE OR RATE (at separation, if not stated)	6. SERIAL SERVICE OR FILE NUMBER	
Federalized National Guard	Cpl.	20249766	
7. CHECK TYPE OF SEPARATION			
<input checked="" type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> UNIQUE HARDSHIPS <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input type="checkbox"/> OTHER (specify) <input type="checkbox"/> RETIREMENT FOR AGE <input checked="" type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY			
8. BRIEF DESCRIPTION OF MILITARY DUTIES (include the duties and skills which best describe your work or function in the military service)			
Infantryman; Cryptographic sections; driver.			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG			
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
NOTED			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY			
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED			
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (include the duties and skills which best describe your work or function in the military service)			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT (IDENTIFY THE UNIT AND ITS ADDRESS)			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	
1.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
2.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
3.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
4.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
5.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED

SECRET

SECRET

(When filled in)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			CHECK IN
				RESIDENCE	TRAVEL	SUPPLY	WORK ASSOCIATION
Cuba	Language-Area knowledge	1919-1924	---	X			
Panama	" " "	1952-58		X			X
Puerto Rico	" " "	various			X		X
Guatemala	" " "	various			X		X
El Salvador	" " "	various			X		X
Mexico	" " "	various			X		X
Dom Rep	" Limited area knowledge	1965					X
Germany	" " "	1963					X
Scotland	" " "	1963					X

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) 40	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK IN APPROPRIATE ITEM <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comparator, mimeograph card punch, etc.) Various			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH. First Aid Instructor. Very active currently. Fire Fighting and safety practices. University of Maryland. Active currently. <i>Shy diving - 10 jumps during 1962. Love sailing.</i>	
2. LIST ALL BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4. SPECIFY. LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS, RECORDING EQUIPMENT, SPEED-READING & REPAIRING, OFFSET PRESS, TURRILLATHNE, ECP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES	
3. 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, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registration number if known) First Aid Instructor - National Red Cross - 1963	5. FIRST LICENSE, CERTIFICATE (year of issue) 1963 6. LATEST LICENSE, CERTIFICATE (year of issue)
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. Do NOT submit copies unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or 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. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE	

SECRET

- 3 -

SECRET

(When filled in)

SECTION IX		MARITAL STATUS			
1. PRESENT STATUS (is-are married, widowed, separated, divorced, annulled, common-law, single)		MARRIED			
2. NAME OF SPOUSE		Veronica MAYLONES			
3. DATE OF BIRTH	4. PLACE OF BIRTH (city, state, country)				
May 23 1914	DuBois, Pa., USA.				
5. OCCUPATION		6. PRESENT EMPLOYER			
Administrative Asst		CIA			
7. CITIZENSHIP		8. FORMER CITIZENSHIP COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	
US		None		N/A	
SECTION X					
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE					
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS	
Frances R. Hidalgo	daughter	Feb 23 1950 NYC NY	US	Alexandria, Va	
Enlmes N. Hidalgo Sr.	father	Dec 15 1890 Puerto Rico	IC	NYC NY	
Rosa Hidalgo	mother	Jan 12 1892 Spain	US	NYC NY	
SECTION XI				PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS	
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP			
		FROM	TO		
American Red Cross Civil Defense team	Montgomery Ctr., Md.	1964	present		
Franconia Volunteer Fire Department	Franconia, Va	1958	1963		
Rockville Volunteer Fire Department	Rockville, Md.	1964	present		
International Rescue and First Aid Association		1967	present		
DATE	SIGNATURE OF EMPLOYEE				
9 Feb 1968	<i>John H. Miller</i>				

SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA				2. LD NO.	
3. NAME (7-24)			4. COMPONENT		5. GRADE	6. DATE OF BIRTH	
7. LANGUAGE			8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE
SKILL							NOT AWARDABLE
14. I CERTIFY THIS EMPLOYEE FOR AWARD				15. TYPE OF AWARD			
SIGNATURE			DATE	A - M	E - I - N	C	R - W - B
							D - V
16. AMOUNT OF AWARD			\$	17. I CERTIFY THAT FUNDS ARE AVAILABLE			
18. FEDERAL TAX DEDUCTION			\$	OBLIGATION REF. NO.		SIGNATURE	
19. STATE/DC TAX DEDUCTION			\$	20. CHANGE ALLOTMENT NO.		DATE	
21. NET AMOUNT OF AWARD			\$	22. EMPLOYEE PAYROLL NO.			
23. FORWARD CHECK TO				24. ALLOTMENT OF ASSIGNMENT			
				25. CHECK NO.		DATE	

FORM 4-58 1273 USE PREVIOUS EDITIONS

SECRET

(10-45) MRD COPY

SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA				2. LD NO.	
3. NAME (7-24)			4. COMPONENT		5. GRADE	6. DATE OF BIRTH	
7. LANGUAGE			8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE
SKILL							NOT AWARDABLE
14. I CERTIFY THIS EMPLOYEE FOR AWARD				15. TYPE OF AWARD			
SIGNATURE			DATE	A - M	E - I - N	C	R - W - B
							D - V
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19. STATE/DC TAX DEDUCTION			\$	20. CHANGE ALLOTMENT NO.		DATE	
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23. FORWARD CHECK TO				24. ALLOTMENT OF ASSIGNMENT			
				25. CHECK NO.		DATE	

FORM 4-58 1273 USE PREVIOUS EDITIONS

SECRET

(10-45) MRD COPY

SECRET
(When Filled In)

(11-8)		LANGUAGE DATA RECORD			
PART I-GENERAL					
1. NAME (Last-First-Middle) Hidalgo, Palmes Nieves JR			2. DATE OF BIRTH (25-30) MONTH DAY YEAR May 27 1912		
3. LANGUAGE (21-33) Spanish 720		4. TODAY'S DATE (34-36) MONTH DAY YEAR May 9 1958		5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS					
SECTION A. Reading (40)					
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.					
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.					
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.					
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.					
5. I HAVE NO READING ABILITY IN THE LANGUAGE.					
SECTION B. Writing (41)					
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.					
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.					
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, UNBARD STYLE, USING THE DICTIONARY OCCASIONALLY.					
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, UNBARD STYLE, USING THE DICTIONARY FREQUENTLY.					
5. I CANNOT WRITE IN THE LANGUAGE.					
SECTION C. Pronunciation (42)					
1. MY PRONUNCIATION IS NATIVE.					
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.					
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.					
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.					
5. I HAVE NO SKILL IN PRONUNCIATION.					
CONTINUE ON REVERSE SIDE					

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (14)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
- ~~2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.~~
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV—CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1C(43). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 May 1958

SIGNATURE

Halmy L. Thelander

(46)

C

(47)

A

SECRET

(When Filled In)

11-81		LANGUAGE DATA RECORD		
127630				
PART I-GENERAL				
1. NAME (Last-First-Middle) (17-24)			2. DATE OF BIRTH (75-30)	
Hidalgo, Balnes Nieves JR			MONTH May	DAY 27
3. LANGUAGE (31-33)			4. TODAY'S DATE (34-39)	
Portuguese 630			MONTH May	DAY 9
			YEAR 1958	
			<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
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3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
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4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
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4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV—CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1(C)(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE BECOMING ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 May 1958

SIGNATURE

John J. Thibault

1401

1471

CONFIDENTIAL

SECURITY APPROVAL

DATE : 17 April 1964

YOUR
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

SUBJECT : HIDALGO, Balnes Nieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:

W. A. Osborne

W. A. Osborne

Chief, Personnel Security Division

CONFIDENTIAL
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : #5077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : ~~REDACTED~~ Hedulge, R. N. Jr.

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Operations Officer under Project JMWAVE.

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

A personal interview in the Office of Security must be arranged by your office.

A personal interview is not necessary.

W. A. Osborne

W. A. Osborne

CHIEF, PERSONNEL SECURITY DIVISION OS

ms

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 10 March 1958

YOUR
REFERENCE:

CASE NO. : 65077

TO : Director of Personnel

FROM : Director of Security

SUBJECT : HIDALGO, Balnes Nieves

1. This is to inform you of security approval of the subject person as follows:

Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.

Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

W. M. Knott
W. M. Knott
Chief, Personnel Security Division

SECRET

BIOGRAPHIC INFORMATION

Name: Raimon N. HIDALGO, Jr.
Grade: GS-11
Service Designation: CI

Date and Place of Birth: 27 May 1919
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1945-46 New York University - No degree (2 yrs)
Nov 45-Dec 49 FBI, Eastern part of United States -
Undercover Agent

Languages: Spanish - Fluent
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard
(Federalized Oct 40) U.S. Army

CIA Experience: 18 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/WH/
HYPOTHESIS, Panama City, Panama
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/WH,
HYPOTHESIS, Panama City, Panama

CIA Training: Covert training

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(When Filled In)

INSTRUCTIONS: COMPLETE IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCY AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

NAME OF EMPLOYEE <i>(Last) (First) (Middle)</i> HIDALGO JA BALMES NIEVES			
1. RESIDENCE DATA			
PLACE OF RESIDENCE WHEN APPOINTED D.C.		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE D.C.			
2. MARITAL STATUS			
CHECK (X) ONE: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED			
IF MARRIED, INDICATE PLACE OF MARRIAGE BALZONI MISS. USA			DATE OF MARRIAGE 9 APR 1943
IF DIVORCED, PLACE OF DIVORCE DECREE			DATE OF DECREE
IF WIDOWED, INDICATE PLACE SPOUSE DIED			DATE SPOUSE DIED
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE REASON(S) FOR TERMINATION, AND DATE(S)			
3. MEMBERS OF FAMILY			
NAME OF SPOUSE LOUISE HIDALGO		ADDRESS (No., Street, City, Zone, State)	
TELEPHONE NUMBER			
NAMES OF CHILDREN LUZ MARIA FRANCES REBECCA		ADDRESS	
SEX F F		AGE 13 8	
NAME OF FATHER (Or male guardian) BALMES N HIDALGO		ADDRESS	
TELEPHONE NUMBER			
NAME OF MOTHER (Or female guardian) ROSE HIDALGO		ADDRESS	
TELEPHONE NUMBER			
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES? WIFE			
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Miss) (Last-First-Middle) HIDALGO, LOUISE		RELATIONSHIP WIFE	
HOME ADDRESS (No., Street, City, Zone, State)		HOME TELEPHONE NUMBER	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE		BUSINESS TELEPHONE & EXTENSION	
IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 7 ON THE REVERSE SIDE OF THIS FORM.			
E. VOLUNTARY ENTRIES			
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS GREENWICH SAVINGS BANK			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

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(When Filled In)

5. (CONTINUED)

IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?

JAMES W. HINDLON FOR Louise Hindlco

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. IF "YES", WHERE IS DOCUMENT LOCATED?

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

*DO NOT NOTIFY OTHER PERSONS IN ITEM 3 OF
EMERGENCY UNLESS WIFE IS NOT AVAILABLE.*

SIGNED BY	DATE	SIGNATURE <i>James W. Hindlon</i>
-----------	------	--------------------------------------

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) HIDALGO JR, BALMIES NIEVES 2. DATE OF BIRTH 27 MAY 1919

9. RETENTION GROUP
 10. CSC STATUS (For permanent employees only)
 YES NO

3. 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).

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN	11. SERVICE		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY		YEAR	MONTH	DAY
US ARMY DEPT OF DEFENSE QUARTERMASTER CORP	51	1	12	Present				7	2	6

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
US ARMY INF	1933	MAR	27	43	SEPT	21	HONORABLE	4	5	25

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? YES NO
 IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.

TYPE IF KNOWN (LWOP, Fuel, Susp, AWOL, Mer Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

13. NONCREDITABLE SERVICE (Leave purposes only)
 14. NONCREDITABLE SERVICE (RIF purposes only)

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS?
 YES NO
 (If answer is "Yes," in what agency were you employed at the time status was acquired?)

15. REEMPLOYMENT RIGHTS YES NO
 16. RETENTION RIGHTS YES NO

7. ARE YOU:
 A. THE WIFE OF A DISABLED VETERAN? YES NO
 B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? YES NO
 C. THE UNMARRIED WIDOW OF A VETERAN? YES NO

17. EXPIRATION DATE OF RETENTION RIGHTS

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.

(DATE) _____ (SIGNATURE) J. Hidalgo Jr
 Subscribed and sworn to before me on this 13th day of Mar 1958 at Washington, D.C.
 (MONTH) (CITY) (STATE)

SEAL

(SIGNATURE) Betty A Bussard

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

(OVER)

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

	YEARS	MONTHS	DAYS
TOTAL SERVICE (Item 12)			
NONCREDITABLE SERVICE (Item 13)			
CREDITABLE SERVICE (Leave purposes)			
ENTRANCE ON DUTY DATE (Present agency)	58	3	17
LESS CREDITABLE SERVICE (Leave purposes)	11	8	1
SERVICE COMPUTATION DATE (Leave purposes)	46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction in force purposes differs from the amount creditable for leave purposes)

	YEARS	MONTHS	DAYS
TOTAL SERVICE (Item 12)			
NONCREDITABLE SERVICE (Item 14)			
CREDITABLE SERVICE (RIF purposes)			
ENTRANCE ON DUTY DATE (Present agency)			
LESS CREDITABLE SERVICE (RIF purposes)			
SERVICE COMPUTATION DATE (RIF purposes)			

(Enter as the "service computation date" on the employee's "Service Record Card," SP-7)

REMARKS:

PERSONAL HISTORY STATEMENT

W 18

1. Name (Last, First, Middle Initial)
 2. Date of Birth (Month, Day, Year)
 3. Place of Birth (City, State, Country)
 4. Present Address (Street, City, State, Zip)
 5. Previous Addresses (Street, City, State, Zip)
 6. Education (School, Degree, Dates)
 7. Employment (Employer, Position, Dates)
 8. Military Service (Branch, Rank, Dates, Status)
 9. Marital Status (Single, Married, Divorced, Widowed)
 10. Spouse's Name (Last, First, Middle Initial)
 11. Children's Names (Last, First, Middle Initial)
 12. Other Family Members (Name, Relationship, Address)
 13. Hobbies and Interests
 14. Other Information (Awards, Certifications, etc.)

PERSONAL AND DOMESTIC RECORDS AND INFORMATION

PERSONAL AND DOMESTIC RECORDS AND INFORMATION

Category	Details	Date	Location
Marriage	[Name]	[Date]	[Location]
Divorce	[Name]	[Date]	[Location]
Children	[Name]	[Date]	[Location]
Other	[Name]	[Date]	[Location]

[The page contains extremely faint and illegible text, likely a document or report, with two circular marks at the bottom.]

[The text in this section is extremely faint and illegible due to heavy noise and low contrast. It appears to be a list or a series of entries, possibly containing names and dates, but no specific words can be discerned.]

[The text in this block is extremely faint and illegible due to heavy noise and low contrast. It appears to be a multi-paragraph document with several lines of text per paragraph. Some faint words like "THE", "AND", "OF", "BY", "IN", "ON", "AT", "TO", "FROM", "FOR", "WITH", "AND", "BY", "IN", "ON", "AT", "TO", "FROM", "FOR", "WITH" are scattered throughout. There are also some faint numbers and symbols, but they cannot be accurately transcribed.]

PROTESTANT LAW

NAME OF APPLICANT: _____

DATE OF BIRTH: _____

STATE OF BIRTH: _____

DATE OF ARRIVAL IN U.S.: _____

RESIDENCE ADDRESS: _____

OCCUPATION: _____

EDUCATION: _____

RELIGIOUS BELIEFS: _____

CHARACTER REFERENCES: _____

REASON FOR APPLICATION: _____

STATE OF RESIDENCE: _____

DATE OF APPLICATION: _____

APPLICANT'S SIGNATURE: _____

WITNESSES: _____

NOTARY PUBLIC: _____

DATE OF NOTARIZATION: _____

PLACE OF NOTARIZATION: _____

STATE OF NOTARIZATION: _____

APPLICANT'S ADDRESS: _____

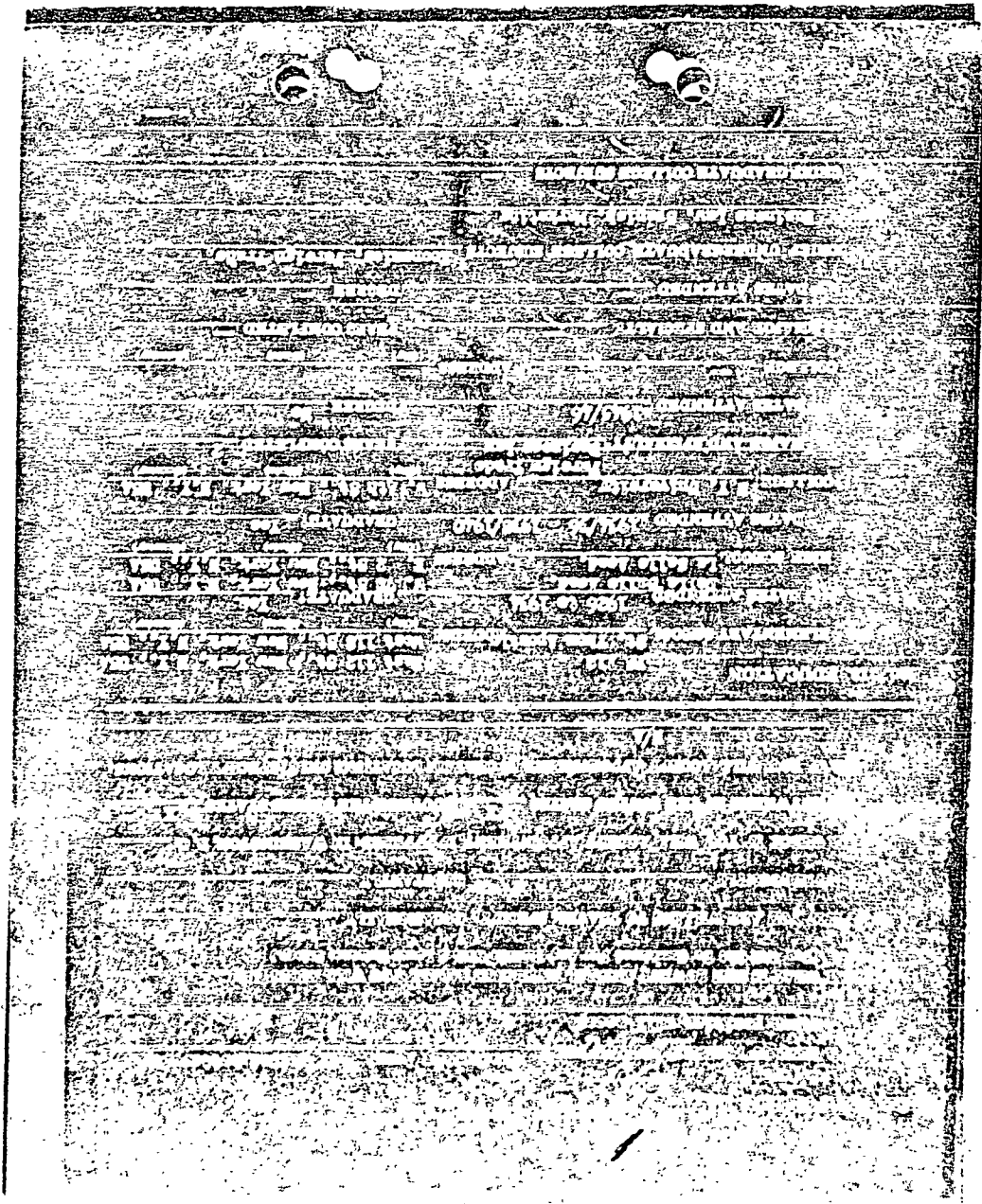
APPLICANT'S PHONE NUMBER: _____

APPLICANT'S SOCIAL SECURITY NUMBER: _____

APPLICANT'S MARITAL STATUS: _____

APPLICANT'S EMPLOYER: _____

APPLICANT'S DATE OF ENTRY: _____



FEDERAL BUREAU OF INVESTIGATION

U. S. DEPARTMENT OF JUSTICE

Form No. 104 (Rev. 1-25-60)

NAME (Last, First, Middle) _____

DATE OF BIRTH _____

RESIDENCE _____

EMPLOYER (Name, Address, City, State, Zip) _____

POSITION _____

DATE OF EMPLOYMENT _____

REASON FOR LEAVING _____

EDUCATION (School, City, State, Year) _____

PROFESSIONAL SOCIETY _____

REFERENCES (Name, Address, City, State, Zip) _____

REMARKS

CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 36 MONTHS. 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. (See instructions on page 1 of this form.)

1. _____

2. _____

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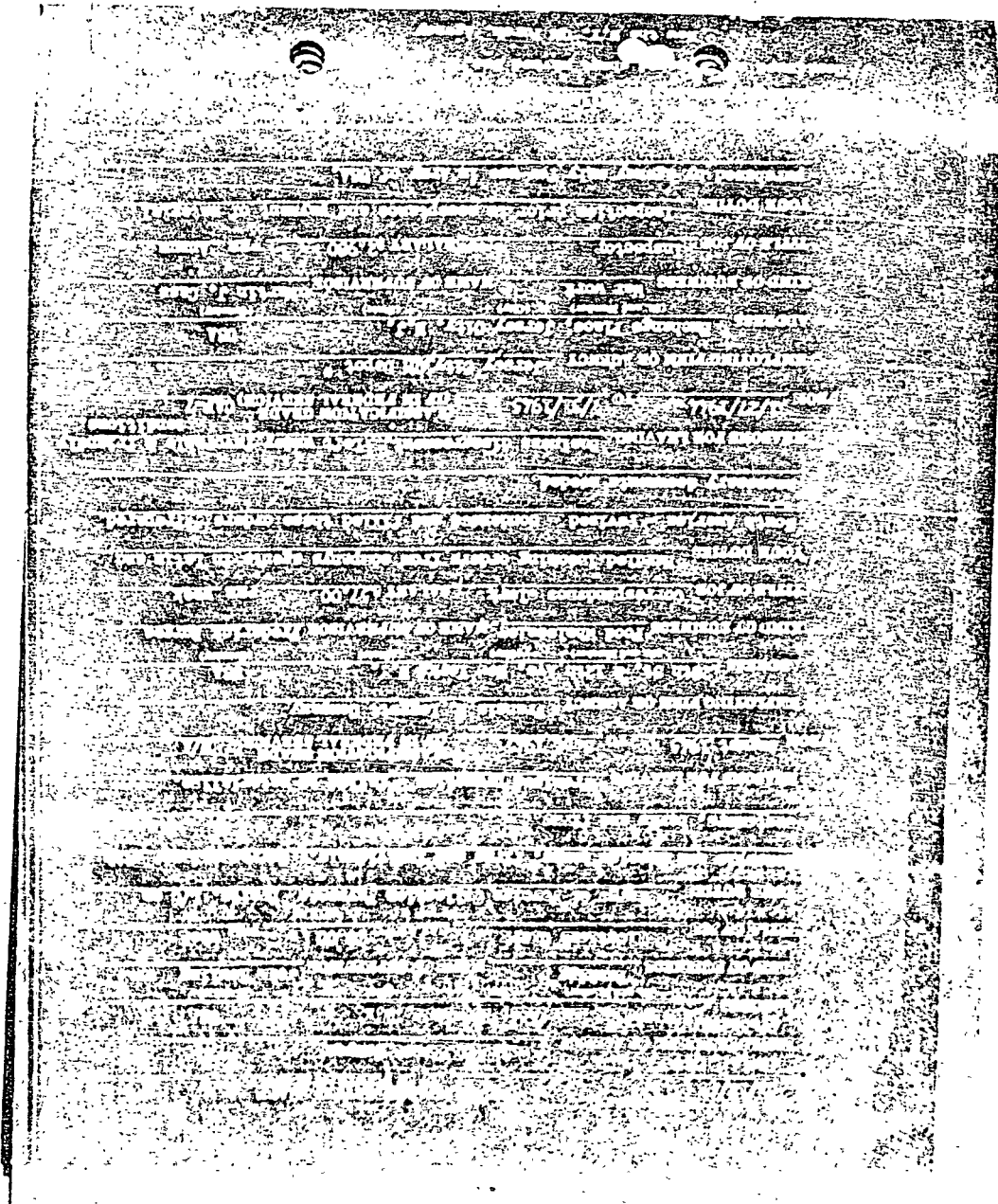
96. _____

97. _____

98. _____

99. _____

100. _____



RECEIVED BY THE BOARD OF DIRECTORS
 OF THE CORPORATION OF THE CITY OF
 LOS ANGELES
 ON THIS 14th DAY OF APRIL 1954
 AT LOS ANGELES, CALIFORNIA
 IN WITNESS WHEREOF
 I HAVE HEREUNTO SET MY HAND AND
 SEAL OF OFFICE
 AT LOS ANGELES, CALIFORNIA
 THIS 14th DAY OF APRIL 1954
 MAYOR
 J. MARKHAM
 CITY CLERK
 J. M. [Name]

[The following text is extremely faint and largely illegible due to heavy noise and low contrast. It appears to be a multi-paragraph document with several distinct sections.]

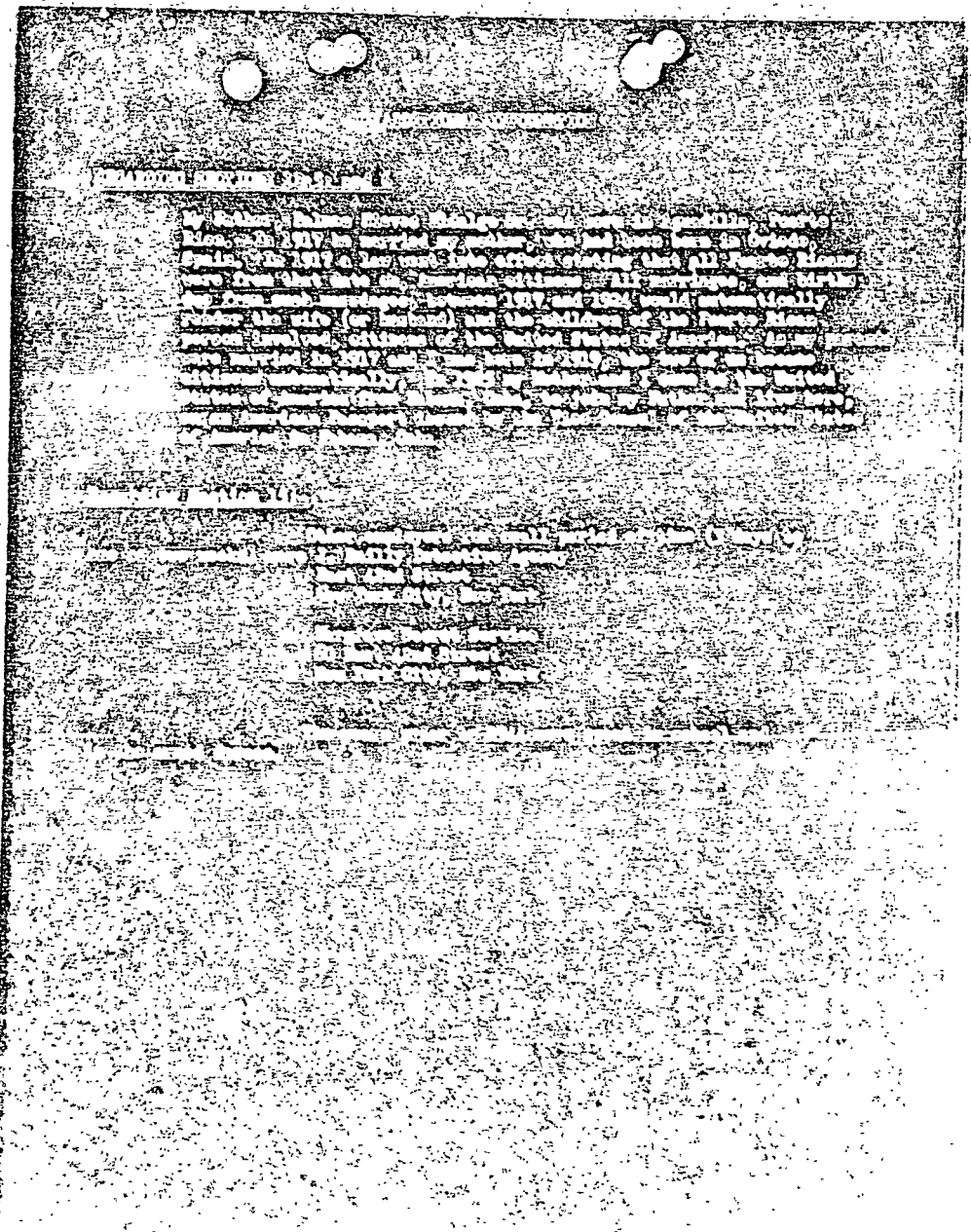
[Section 1: Several lines of text, possibly a header or introductory paragraph.]

[Section 2: A paragraph of text, possibly describing a process or procedure.]

[Section 3: A paragraph of text, possibly a continuation of the previous section.]

[Section 4: A paragraph of text, possibly a concluding statement or summary.]

[Section 5: A paragraph of text, possibly a final note or signature block.]



MEMORANDUM FOR THE RECORD

On 10/10/54, the following information was received from the State of Texas regarding the activities of the Communist Party in the State of Texas during the year 1954. The information was obtained from a report submitted to the State Department of Health, Education and Welfare by the State of Texas.

MEMORANDUM FOR THE RECORD

The following information was received from the State of Texas regarding the activities of the Communist Party in the State of Texas during the year 1954. The information was obtained from a report submitted to the State Department of Health, Education and Welfare by the State of Texas.

CONFIDENTIAL

MEMORANDUM FOR THE DIRECTOR, FBI

SUBJECT: [Illegible]

[The following text is extremely faint and illegible due to heavy noise and low contrast in the scan. It appears to be a multi-paragraph memorandum.]

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." 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

		Telephone:
A. FULL NAME <u>XXX</u>	<u>Ealnes</u>	Office <u>NA</u>
<small>(U.S. Initial)</small>	<small>(First)</small>	Ext. <u>NA</u>
<u>XXX</u>	<u>Nieves</u>	Home <u>NA</u>
	<small>(Middle)</small>	
	<u>Ridalgo, Jr.</u>	
	<small>(Last)</small>	

PRESENT ADDRESS House number 60, 94th St. East, Panama, Republic of Panama
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS NA
(St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bal" **WHAT OTHER NAMES HAVE YOU USED?** See remarks

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? See remarks

HOW LONG? See remarks **IF A LEGAL CHANGE, GIVE PARTICULARS.**
No
(Where) (By what authority)

C. DATE OF BIRTH 27 May 1919 **PLACE OF BIRTH** Havana, Cuba
(City) (State) (Country)

D. PRESENT CITIZENSHIP U. S. **BY BIRTH?** NA **BY MARRIAGE?** NA
(Country)

BY NATURALIZATION CERTIFICATE NO. NA **ISSUED** NA **BY** NA
(Date) (Court)

AT See remarks
(City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? No
(Yes or No) (Country)

HELD BETWEEN WHAT DATES? NA **TO** NA **ANY OTHER NATIONALITY?** NA
(Country)

GIVE PARTICULARS NA

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? No **GIVE PARTICULARS:**
NA

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924

PORT OF ENTRY: NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.

LAST U. S. VISA None
(Number) (Type) (Place of Issue) (Date of Issue)

Sec. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9 1/2" WEIGHT 145
EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin
BUILD slight OTHER DISTINGUISHING FEATURES Mole, Upper left lip.

Sec. 3. MARITAL STATUS

A. SINGLE _____ MARRIED X 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—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie Louise Eeier Hidalgo
(First) (Middle) (Maiden) (Last)

PLACE AND DATE OF MARRIAGE Felzoni, Mississippi - 9 April 1943

~~HIS (OR HER)~~ ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Felzoni, Mississippi, USA
(St. and Number) (City) (State) (Country)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA
(City) (State) (Country)

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

CITIZENSHIP us WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)

OCCUPATION File Clerk LAST EMPLOYER Classified

EMPLOYER'S OR BUSINESS ADDRESS Classified
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
(Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

NA

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

1 NAME Luz Maria Hidalgo RELATIONSHIP Daughter AGE 12
 CITIZENSHIP U. S. ADDRESS Same as applicant.
(St. and Number) (City) (State) (Country)

2 NAME Frances Rebecca Hidalgo RELATIONSHIP Daughter AGE 7
 CITIZENSHIP U. S. ADDRESS Same as applicant.
(St. and Number) (City) (State) (Country)

3 NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

(also dependent)

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

FULL NAME Baldes Reyes Hidalgo
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE NA

PRESENT OR LAST ADDRESS Same as applicant.
(St. and Number) (City) (State) (Country)

DATE OF BIRTH December 1920 PLACE OF BIRTH Aguadilla, Puerto Rico
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 1923 (March) NYC, NY

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? Puerto Rico
(City) (State) (Country)

OCCUPATION Retired LAST EMPLOYER Do not remember

EMPLOYER'S OR OWN BUSINESS ADDRESS None
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
(Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

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

FULL NAME Frances Beatrice Hidalgo
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT OR LAST ADDRESS Same as applicant.
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 12 Jan. 1892 PLACE OF BIRTH Oviedo, Spain

CITIZENSHIP U. S. WHEN ACQUIRED? Marriage 1917 WHERE? Havana, Cuba
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY March 1924, NYC, NY, USA

(4)

OCCUPATION Retired LAST EMPLOYER Leonid De Lescinski
 EMPLOYER'S OR OWN BUSINESS ADDRESS 48 St. NYC, NY
(St. and Number) (City) (State) (Country)
 MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
 COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

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

1. FULL NAME _____ AGE _____
(First) (Middle) (Last)
 PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)

2. FULL NAME _____ AGE _____
(First) (Middle) (Last)
NA PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)

3. FULL NAME _____ AGE _____
(First) (Middle) (Last)
 PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)

4. FULL NAME _____ AGE _____
(First) (Middle) (Last)
 PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)

5. FULL NAME _____ AGE _____
(First) (Middle) (Last)
 PRESENT ADDRESS _____
(St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME Henry B. Ecier
(First) (Middle) (Last)
 LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
 PRESENT, OR LAST, ADDRESS 210 California Avenue, Ioland, Mississippi, USA
(St. and Number) (City) (State) (Country)
 DATE OF BIRTH 1895 PLACE OF BIRTH USA
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA

CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)

OCCUPATION laborer LAST EMPLOYER Unknown

SEC. 9. MOTHER-IN-LAW

FULL NAME Erma Rebecca Peior
(First) (Middle) (Last)
LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
PRESENT, OR LAST, ADDRESS 210 California Avenue, Ieland, Mississippi, USA
(St. and Number) (City) (State) (Country)
DATE OF BIRTH 1893 PLACE OF BIRTH USA
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.
(City) (State) (Country)
OCCUPATION Housewife LAST EMPLOYER NA

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

See
remarks

1. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
2. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (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:

NONE

1. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
2. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____

SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR See covering dispatch reference

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$ 5390.00 P/A
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY Yes
FREQUENTLY CONSTANTLY X

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C. X
ANYWHERE IN THE UNITED STATES X, OUTSIDE THE UNITED STATES X

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:

SEC. 13. EDUCATION

ELEMENTARY SCHOOL St. Thomas Apostolic ADDRESS NYC NY USA
(City) (State) (Country)
DATES ATTENDED 1926-1934 GRADUATE? Yes

HIGH SCHOOL La. Salle Academy ADDRESS 2nd St. and 2nd Avenue NYC, NY, USA
(City) (State) (Country)
DATES ATTENDED 1936-1940 GRADUATE? Yes

COLLEGE University ADDRESS Washington Square, NYC, NY, USA
Foreign Trade and (City) (State) Two (Country)
MAJOR AND SPECIALTY Business Law (School)
DATES ATTENDED 1944-1945 DEGREE No

COLLEGE ADDRESS (City) (State) (Country)
MAJOR AND SPECIALTY YEARS COMPLETED
DATES ATTENDED DEGREE

CHIEF UNDERGRADUATE COLLEGE SUBJECTS

CHIEF GRADUATE COLLEGE SUBJECTS

Sec. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

U. S. Army Cpl. 1940-1943
(Country) (Service) (Rank) (Date of Service)
 Camp Hale, Colorado 202 49766 Honorable
(Last Station) (Postal Number) (Type of Discharge)
 REMARKS: None
 SELECTIVE SERVICE BOARD NUMBER Do not remember ADDRESS
 IF DEFERRED GIVE REASON NA
 INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS NA

Sec. 15. 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. (List all civilian employment by a foreign government, regardless of dates.)

FROM Feb. 1952 TO Present CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-11

EMPLOYING FIRM OR AGENCY See covering dispatch reference
 ADDRESS See covering dispatch reference
(St. and Number) (City) (State) (Country)
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR See covering dispatch
 TITLE OF JOB See covering dispatch SALARY \$ 5390.00 PER annum
 YOUR DUTIES See covering dispatch reference

REASONS FOR LEAVING

FROM January 1951 TO February 1952 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-7

EMPLOYING FIRM OR AGENCY NY Procurement Agency
 ADDRESS 111 East 16th Street NYC, NY, USA
(St. and Number) (City) (State) (Country)
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR Do not remember
 TITLE OF JOB Inspector SALARY \$ 3825.00 PER annum
 YOUR DUTIES Inspecting material being purchased by U. S. Govt. specifically the U. S. Army.

REASONS FOR LEAVING To obtain present position.

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY American Trust Company

ADDRESS Wall Street, New York City, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Left for higher paying work

FROM January 1948 TO May 1950 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Colonial Trust Company

ADDRESS 6th Avenue and 45th Street, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work.

REASONS FOR LEAVING Promised promotion failed to materialize.

FROM August 1945 TO September 1947 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.

ADDRESS 28th Street and 12th Avenue, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Wholesale Grocery house. NAME OF SUPERVISOR Do not remember

TITLE OF JOB Correspondence clerk SALARY \$ 57.00 PER week

YOUR DUTIES Export correspondence clerical duties.

REASONS FOR LEAVING Dissatisfied with type of work.

14-00000

Sec. 16. 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:

No

Sec. 17. GENERAL QUALIFICATIONS

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

LANGUAGE Spanish SPEAK Fluent READ Fluent WRITE Fluent

LANGUAGE Portuguese SPEAK Slight READ Fair WRITE Slight

LANGUAGE SPEAK READ WRITE

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

Judo - Have attained "yellow belt" rank
Photography - Very good degree of proficiency
Bowling - Fair degree of proficiency
Philately - Fair degree of proficiency
Fishing (no comment)

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

Yes. See covering dispatch reference.

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 30 SHORTHAND 0

E. 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.

IF YES, INDICATE KIND OF LICENSE AND STATE No

FIRST LIC. OR CERTIFICATE (YR) _____ LATEST LIC. OR CERTIFICATE (YR) _____

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.

H. DO YOU RECEIVE AN 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 ANSWER IS "YES," GIVE COMPLETE DETAILS:

No

SEC. 18. 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	Edward Lee Anderson	BUS. ADD. See Dispatch reference.		
		RES. ADD.		
2	Willard Galbraith	BUS. ADD. " " "		
		RES. ADD.		
3	Homer Neal	BUS. ADD. " " "		
		RES. ADD.		
4	Andres Rivera	BUS. ADD. " " "		
		RES. ADD.		
5	Joseph Sancho	BUS. ADD. " " "		
		RES. ADD.		

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

		Street and Number	City	State
See remarks	1	BUS. ADD.		
		RES. ADD.		
	2	BUS. ADD.		
		RES. ADD.		
	3	BUS. ADD.		
		RES. ADD.		
	4	BUS. ADD.		
		RES. ADD.		
	5	BUS. ADD.		
		RES. ADD.		

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

		Street and Number	City	State
See remarks	1	BUS. ADD.		
		RES. ADD.		
	2	BUS. ADD.		
		RES. ADD.		
	3	BUS. ADD.		
		RES. ADD.		

SEC. 21. 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 Greenwich Savings Bank, 36th St. and Broadway and 6th Avenue, NYC, NY.

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 _____	ADDRESS _____	(St. and Number)	(City)	(State)
2. NAME <u>None</u>	ADDRESS _____	(St. and Number)	(City)	(State)
3. NAME _____	ADDRESS _____	(St. and Number)	(City)	(State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS.

FROM <u>April 1952</u>	TO <u>Present</u>	<u>Panama Republic of Panama</u>	(City)	(State)	(Country)
FROM <u>1949</u>	TO <u>1952</u>	<u>20 Ave. D, NYC, NY, USA</u>	(City)	(State)	(Country)
FROM <u>1944</u>	TO <u>1948</u>	<u>200 West 82nd St., NYC, NY, USA</u>	(City)	(State)	(Country)
FROM _____	TO _____	_____	(City)	(State)	(Country)
FROM _____	TO _____	_____	(City)	(State)	(Country)
FROM _____	TO _____	_____	(City)	(State)	(Country)
FROM _____	TO _____	_____	(City)	(State)	(Country)
FROM _____	TO _____	_____	(City)	(State)	(Country)

SEC. 22 RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM <u>1919</u>	TO <u>1924</u>	<u>Havana, Cuba</u>	(City or section)	(Country)	Country of birth	(Purpose)
FROM <u>1942</u>	TO <u>1943</u>	<u>Pacific area</u>	(City or section)	(Country)	US Army	(Purpose)
FROM <u>1952</u>	TO <u>Present</u>	<u>Republic of Panama</u>	(City or section)	(Country)	Work	(Purpose)
FROM _____	TO _____	_____	(City or section)	(Country)	_____	(Purpose)
FROM _____	TO _____	_____	(City or section)	(Country)	_____	(Purpose)

SEC. 24. 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. _____	(Name and Chapter)	<u>None</u>	(St. and Number)	(City)	(State)	(Country)
DATES OF MEMBERSHIP: _____						
2. _____	(Name and Chapter)	_____	(St. and Number)	(City)	(State)	(Country)
DATES OF MEMBERSHIP: _____						
3. _____	(Name and Chapter)	_____	(St. and Number)	(City)	(State)	(Country)
DATES OF MEMBERSHIP: _____						

4. (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP:

5. (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP:

6. (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP:

7. (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP:

Sec. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, 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: No (See remarks)

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? Yes IF SO, TO WHAT EXTENT? Beer with meals.

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:

No

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

No

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense

Present Organization

F. IF, 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:

Federal Bureau of Investigation - 1946

This Organisation - 1952

Sec. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Amie Louise Hidalgo RELATIONSHIP wife

ADDRESS Same as applicant
(No. and Number) (City) (State) (Country)

Sec. 27. 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."

No

Sec. 28. 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 Ft. Amador, Canal Zone DATE 19 July 1957
(City and State)

[Signature] (Witness) [Signature] (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.

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

RECORD OF
PREVIOUS GOVERNMENT
SERVICE RETURNED TO
FEDERAL RECORDS CENTER IN
ST. LOUIS, MO.

DATE July 1971