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SECRET

FILE TITLE/NUMBER/VOLUME: Phillips, DAVID ATLEE

INCLUSIVE DATES: 28 MAY 1952 - 13 MAY 1975

CUSTODIAL UNIT/LOCATION: OP

ROOM: 5E13

DELETIONS, IF ANY:

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
2/10/78	2/10/78	DAN HARDWAY	Dan Hardway
17 Feb 78	8/17/78	DAN HARDWAY	Dan Hardway

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PHILLIPS, DAVID A. [REDACTED]

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CENTRAL INTELLIGENCE AGENCY  
WASHINGTON, D.C. 20505

2 February 1976

Mr. David A. Phillips  
8224 Stone Trail Drive  
Bethesda, Maryland 20034

Dear Dave:

From time to time we receive letters and telephonic inquiries concerning the Association of Retired Intelligence Officers. In view of the restrictions of the Privacy Act, we hesitate to release your name and address without your prior knowledge and consent.

If you have no problem with our providing your name and address in response to such inquiries, please indicate to that effect by signing below and returning this letter to us for official filing. In the future, we would then be free to release this information concerning the Association of Retired Intelligence Officers without consulting you in each and every instance.

Thank you for your assistance in this matter, and best wishes.


Sincerely,



B. DeFelice

Acting Director of Personnel

I hereby authorize the Director of Personnel to release my name and address to individuals seeking contact with or information concerning the Association of Retired Intelligence Officers:

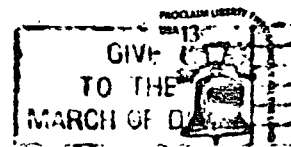
  
David Alee Phillips

4 February 1976  
Date

AND THANKS,  
DAP



Mr. David A. Phillips  
8224 Stone Trail Drive  
Bethesda, Maryland 20034



Director of Personnel  
P. O. Box 1925  
Washington, D. C. 20013

MEMORANDUM FOR: (

Addresses for former Agency employees organizations:

Association of Retired Intelligence Officers  
Mr. David A. Phillips  
8224 Stone Trail Drive  
Bethesda, Maryland, 20034

~~Central Intelligence Retirees Association (CIRA)~~  
Box 1150  
Fort Myer, Virginia, 22211

Date

32 5 9 75

3 JUL 1975

Mr. David A. Phillips  
8224 Stone Trail Drive  
Bethesda, Maryland 20034

Dear Dave:

I am happy to send to you, under separate cover, your Agency Retirement Medallion. The Medallion is a tangible form of recognition and appreciation of your service to the Agency. It should serve as a lasting reminder of an honorable career, rewarding associations and the knowledge that you played your part in a vital activity.

Let me, therefore, add my congratulations and wish you the very best for the future.

Sincerely,

F. W. M. Janney  
Director of Personnel

Distribution:  
Orig - Addressee  
✓ - OPF

OP/RAD/ROB/MWBenthall:cl (1 July 75)

75-2172

10 June 1975

Mr. David A. Phillips  
8224 Stone Trail Drive  
Bethesda, Maryland 20034

Dear Dave:

The ordinary retirement letter is in no way appropriate for you. In the first place, your retirement is no stepping out of the active world into a world of pleasure. Instead, you are launching off on even a tougher challenge because of your sense of dedication. Your retirement also will not be the termination of your interest in intelligence and in this Agency. Instead, you are going to be doing what you can to help it survive the current set of attacks upon it. But most of all, your retirement is the departure of one of our most exceptional officers, to whom I had the great pleasure to give the Distinguished Intelligence Medal and whose work I have admired these many years. The only thing ordinary about your retirement is the sincere and special personal and official good wishes we in the Agency send to you and your family for success and satisfaction in the years ahead. This we send to all our retirees, and we send it to you with special spirit.

Sincerely,

*W. E. Colby*  
W. E. Colby  
Director

WEC: jlp (10 June 75)

Distribution:

- Orig - Addressee
- 1 - DCI
- 1 - Dir/Personnel
- 1 - ER

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 28 March 1975	
1 SERIAL NUMBER 024545		2 NAME (Last-First-Middle) Phillips, David A.				
3 NATURE OF PERSONNEL ACTION Cancellation of N.S.G.A and Retirement (Voluntary) under CIARDS			4 EFFECTIVE DATE REQUESTED MONTH 05 DAY 09 YEAR 75		5 CATEGORY OF EMPLOYMENT Regular	
6 FUNDS VIO V OIO V X OIO O			7. PAN AND NSCA 5135 4523 0000		8 LEGAL AUTHORITY (Completed by Office of Personnel) Public Law 88-643, Section 233	
9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Office of the Chief			10 LOCATION OF OFFICIAL STATION Wash., D.C.			
11 POSITION TITLE Chief, LA Division			12 POSITION NUMBER CN51		13 CAREER SERVICE DESIGNATION DYY	
14 CLASSIFICATION SCHEDULE (GS, ZR, etc.) GS		15 OCCUPATIONAL SERIES 0001.10		16 GRADE AND STEP 18 1		17 SALARY OR RATE \$ 36,000.
18 REMARKS * Supergrade blurb  Co-ordinated with Paul Seidel/ROB 11 April 1975.  <i>Kathleen D. Smith</i> <i>Sec. of Manpt 2/26/75</i>						
18A SIGNATURE OF REQUESTING OFFICIAL <i>H.L. Berthold</i> H.L. Berthold, C/LA/Pers			DATE SIGNED 28 Mar 75		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>A. Beach</i>	
				DATE SIGNED 4/1/75		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE 45	20 EMPLOY CODE 10	21 OFFICE CODING ALPHABETIC	22 STATION CODE	23 INITIATOR CODE	24 HOURS CODE 1	25 DATE OF BIRTH 10/31/22
26 DATE OF LEI	27 DATE OF BIRTH	28 DATE OF GRADE	29 DATE OF LEI	30 SECURITY REQ NO	31 SEX	EOD DATA
32 VET PREFERENCE CODE	33 VET COMP DATE	34 LONG COMP DATE	35 CAREER CATEGORY LEA 011 PROV 710	36 FEGLI HEALTH INSURANCE COOR CODE 8-WAIVER 1-YES 2-RES/OPT 3-UNRELIABLE	37 SOCIAL SECURITY NO	
38 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (25 YEARS) RECAL 3-BREAK IN SERVICE (MORE THAN 25 YEARS)	39 LEAVE CAT CODE	40 FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO	41 FEDERAL TAX DATA CODE NO TAX EXEMPTIONS	42 STATE TAX DATA FORM EXECUTED 1-YES 2-NO	43 STATE TAX DATA CODE NO TAX EXEMPT	44 STATE TAX DATA CODE NO TAX EXEMPT
45 POSITION CONTROL CERTIFICATION <i>OK 5/10/75</i>			46 O.P. APPROVAL 12 MAY 1975 <i>B. Seidel</i>		DATE APPROVED 4 APR 1975	

FORM 1152 USE PREVIOUS EDITION

SECRET

E.2. IMPDET CL BY: 007622



SECRET  
(When Filled In)

**REQUEST FOR PERSONNEL ACTION** DATE PREPARED  
27 Dec 73

1. SERIAL NUMBER: 024345  
2. NAME (Last-First-Middle): PHILLIPS DAVID A

3. NATURE OF PERSONNEL ACTION: PROMOTION  
4. EFFECTIVE DATE REQUESTED: MONTH 12, DAY 23, YEAR 73  
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: V TO V, V TO CF, CF TO V, XX, CF TO CF  
7. FAN AND NSCA: 4135-4523 0001  
8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS: DDO/WH DIVISION OFFICE OF THE CHIEF  
10. LOCATION OF OFFICIAL STATION: WASH., D.C.

11. POSITION TITLE: CHIEF WH DIVISION  
12. POSITION NUMBER: 0001  
13. CAREER SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (G.S., I.B., etc.): GS  
15. OCCUPATIONAL SERIES: 0001.10  
16. GRADE AND STEP: 18 1  
17. SALARY OR RATE: 36,000

18. REMARKS: *Super*  
*Approved By DCI on 21 Dec 1973*  
*RIS*

18A. SIGNATURE OF REQUESTING OFFICIAL: [Signature]  
DATE SIGNED: [Blank]  
18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [Signature]  
DATE SIGNED: 27 Dec 73

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 22	20. EMPLOY CODE ID	21. OFFICE CODING NUMERIC: 51050 ALPHABETIC: WH	22. STATION CODE 75013	23. INTEGRAL CODE	24. PDQTRS CODE 1	25. DATE OF BIRTH MO DA YR 10 31 22	26. DATE OF GRADE MO DA YR 12 23 73	27. DATE OF LEI MO DA YR 12 23 73
28. WTE EXP/RES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA		33. SECURITY REQ NO	34. SEX
35. WTE PREFERENCE CODE 0-None, 1-5 PT, 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE	39. FEELI HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE	44. STATE TAX DATA CODE NO TAX STATE EXEMP. CODE					
45. POSITION CONTROL CERTIFICATION <i>1/20/73</i>	46. OP APPROVAL <i>Tom Jolley</i>	DATE APPROVED 27 Dec 73						

7/17/73

SECRET  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>										DATE PREPARED 10 July 1973		
1. SERIAL NUMBER 024345		2. NAME (Last-First-Middle) PHILLIPS, DAVID A. ✓								cOB		
3. NATURE OF PERSONNEL ACTION CONVERSION FROM FSR STATUS					4. EFFECTIVE DATE REQUESTED MONTH: 07 DAY: 21 YEAR: 73			5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS		v TO v		v TO c		7. PAN AND NSCA 4135 4523 0001		8. LEGAL AUTHORITY (Completed by Office of Personnel)				
c		CP TO V		X CP TO C								
9. ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION OFFICE OF THE CHIEF					10. LOCATION OF OFFICIAL STATION WASH., D.C.							
11. POSITION TITLE CHIEF, WH DIVISION					12. POSITION NUMBER 0001			13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15. OCCUPATIONAL SERIES 0001.10		16. GRADE AND STEP 17-4		17. SALARY OR RATE \$ 36,000					
18. REMARKS WASH., D.C.												
1 - Security 1 - Finance						E2 IMPDET CL BY 007034						
18A. SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD, C/WH/PERS				DATE SIGNED 10 Jul 73		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>				DATE SIGNED <i>[Signature]</i>		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE 56	20. EMPLOY CODE 16	21. OFFICE CODING NUMERIC: 51050 ALPHABETIC: LN		22. STATION CODE 75013	23. INTEGER CODE	24. PROOTS CODE 1	25. DATE OF BIRTH MO: 10 DA: 31 YR: 22		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-SSN 2-ORIG 3-PLA 4-NOM		31. SEPARATION DATA CODE TYPE: MO: DA: YR:		32. CORRECTION/CANCELLATION DATA EOD DATA →		33. SECURITY REQ. 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 CODE: 0-NONE 1-PROV/TIMP		39. FEGLI/HEALTH INSURANCE CODE: 0-NONE 1-YES 2-NO		40. SOCIAL SECURITY NO		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EXECUTED CODE: 1-YES 2-NO		44. STATE TAX DATA NO TAX EXEMPTIONS: 1-YES 2-NO		45. SOCIAL SECURITY NO CODE: NO TAX STATE EXEMPT. CODE		
45. POSITION CONTROL CERTIFICATION 11018-7-1178						46. APPROVAL 15 JUL 1973 <i>[Signature]</i>			DATE APPROVED 16 Jul 73			

6/17/73  
10

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 15 June 1973	
1. SERIAL NUMBER 024345		2. NAME (Last-First-Middle) PHILLIPS, DAVID A.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND DELEGATION OF <del>NON-REG</del>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 15 73		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS		V TO V		V TO CF		7. FINANCIAL ANALYSIS NO. CHARGEABLE 135 0620 0001	
CF TO V		X		CF TO CF		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION OFFICE OF THE CHIEF				10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE 1st Secretary In Rel Off Chief, WH Division (14)				12. POSITION NUMBER 0001		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) FSR GS		15. OCCUPATIONAL SERIES 0001.10		16. GRADE AND STEP 02 3 17 4		17. SALARY OR RATE 33057 \$ 36,000 -	
18. REMARKS FROM: DDO/WH/FOR FOLD/BR 3/CARACAS, VENEZUELA/0093 VICE THEODORE G. SHACKLEY Supergrade Blank - 77003 Caracas, Venezuela 1 - Security 1 - Finance							
18A. SIGNATURE OF REQUESTING OFFICIAL H.L. BERTHOLD, G/WH/PERS				DATE SIGNED 15 Jun 73		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Paul B. Reutwaizer	
				DATE SIGNED 20 Jun 73			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 3710		20. EMPLOY CODE 51050		21. OFFICE CODING NUMERIC ALPHABETIC WH 75013		22. STATION CODE 75013	
23. INTEGRITY CODE 5		24. HOURS CODE 1		25. DATE OF BIRTH MO DA. YR. 10 31 22		26. DATE OF GRADE MO DA. YR.	
27. DATE OF LET MO DA. YR.		28. NTE EXPIRES MO DA. YR. XX/XX/XX		29. SPECIAL REFERENCE 1-ESC 2-ORGN 3-FICA 4-NONE		30. RETIREMENT DATA CODE	
31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE MO DA. YR.		33. SECURITY REQ. NO		34. SEX	
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. SERV COMP DATE MO DA YR		37. LONG COMP DATE MO DA YR		38. CAREER CATEGORY LAC RES PROV. TEMP	
39. FEDERAL HEALTH INSURANCE CODE CODE 0-WAIVER 1-REG 2-REG/OPT 3-INELIGIBLE		40. SOCIAL SECURITY NO		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT CODE	
43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED CODE NO TAX STATE CODE 1-YES 2-NO		45. POSITION CONTROL CERTIFICATION CLASS 6 21-78		46. OP APPROVAL Harry B. Fisher	
				DATE APPROVED 28 June 73			

G  
32

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54

OUTGOING MESSAGE

1				
2				
3				

SIGNAL CENTER USE ONLY

OMF 0 0 0 0 0 0 0 0

SECRET

STAFF

CONF: 4/21/73

INFO: FILE

DATE-TIME GROUP 191830Z

DIRECTOR

MESSAGE REFERENCE NUMBER 411279

DISSEM BY: 28

PER 4/21/73 (FE)

"EYES ONLY!"

TO: IMMEDIATE CARACAS

RYBAT PLVUCADET

CHOADEN FROM PARDEE

REF: CARACAS 2L988 | IN 921770 |

1. I AM PLEASED TO INFORM YOU THAT YOU HAVE BEEN SELECTED AS CHIEF, WH DIVISION. YOUR APPOINTMENT WILL BE EFFECTIVE AT SUCH TIME AS YOU (AND YOUR FAMILY) CAN CONVENIENTLY RETURN TO THE WASHINGTON AREA. [ ] ORDERS FOR YOUR MOVE WILL BE REQUESTED ON A PRIORITY BASIS ON <sup>12/1</sup> 21 MAY. WOULD APPRECIATE YOUR TENTATIVE SCHEDULE AS SOON AS PRACTICABLE.

846

2. YOUR SELECTION WILL BE ANNOUNCED EARLY THIS NEXT WEEK. THEREFORE, YOU SHOULD FEEL FREE TO INDICATE TO WHOMEVER YOU FEEL NECESSARY LOCALLY THE REASON FOR YOUR RETURN AND WHAT YOUR NEXT ASSIGNMENT WILL BE.

3. I WANT TO EXTEND MY PERSONAL CONGRATULATIONS ON YOUR SELECTION. I AM SURE YOU WILL HANDLE THIS VERY IMPORTANT ASSIGNMENT WITH THE SAME KIND OF EXCELLENCE, DEDICATION AND LEADERSHIP THAT HAVE CHARACTERIZED YOUR PAST ASSIGNMENTS.

DATE: 19 MAY 1973  
 ORIG: JAMES W. FLANNERY  
 UNIT: AC/UHD  
 EXT: 3366

CONCUR:

Director of Personnel

5/23/73 Date

RELEASING OFFICER

COORDINATING OFFICERS

AUTHENTICATING OFFICER

REPRODUCTION BY OTHER THAN THE ISSUING OFFICE IS PROHIBITED

E 2 IMPDET



SECRET

1. NAME (Last, First, Middle) SS# 460-28-3930 Phillips, David A.		2. DATE OF BIRTH 31 Oct 22	3. GRADE GS-17
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) State (Integrated) DDP/WH/Brasilia, BrazilX		5. PRESENT POSITION COS	6. EMPLOYEE EXTENSION 7431
7. PROPOSED STATION Caracas, Venezuela		8. PROPOSED POSITION (Title, Number, Grade) COS/0093/GS-16	
9. TYPE OF COVER AT NEW STATION State (Integrated)		10. ESTIMATED DATE OF DEPARTURE August 1972	11. NO. OF DEPENDENTS TO ACCOMPANY YBXX five
12. COMMENTS Vice: Thomas Flores Please schedule appointments for the week of 10 July. Mr. Phillips will not be occupying a specific language position. However, his tested Spanish proficiency of High reading and Intermediate Speaking and Understanding will add to the overall language requirements of the Station.			
13. DATE OF REQUEST 10 May 72	14. SIGNATURE OF REQUESTING OFFICIAL <i>Jean Ferguson</i> Jean Ferguson	15. ROOM NUMBER AND BUILDING 3D 5309 Hqs	16. EXTENSION 7431
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION  5 May <del>11 May</del> 1972  QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS <i>A. C. Satch</i> Chairman, Overseas Candidate Review Panel			
REQUEST FOR PCS OVERSEAS EVALUATION			

**SECRET**  
*(When Filled In)*

REQUEST FOR PERSONNEL ACTION				DATE PREPARED		
1 SERIAL NUMBER <b>024345</b>				2 NAME (Last-First-Middle) <b>Phillips, David A</b>		
3 NATURE OF PERSONNEL ACTION: <b>Promotion</b>			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>11 28 71</b>		5 CATEGORY OF EMPLOYMENT <b>Regular</b>	
6 FUNDS V TO V CF TO V		V TO CF CF TO CF <b>XX</b>		7 FINANCIAL ANALYSIS NO. CHARGEABLE <b>2135-0694-0000</b>		
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH FOREIGN FIELD BRANCH 5 BRASILIA, BRAZIL STATION</b>			10 LOCATION OF OFFICIAL STATION <b>Z BRASILIA, BRAZIL</b>			
11 POSITION TITLE <b>1st Secretary Political Officer Chief of Station</b>			12 POSITION NUMBER <b>0186</b>		13 CAREER SERVICE DESIGNATION <b>D</b>	
14 CLASSIFICATION SCHEDULE (GS, LP, etc.) <b>FSR GS</b>		15 OCCUPATIONAL SERIES <b>0136.05</b>		16 GRADE AND STEP <b>03 7 17 3</b>		
17 SALARY OR RATE <b>\$ 26,563 \$ 34,716</b>						
18 REMARKS  <i>* See De Janeiro Change</i>  <b>cc: Payroll</b>						
18A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Robert W. Sheay</i> <b>Robert W. Sheay, C/CSPS</b>	
DATE SIGNED <b>24 Nov 71</b>						
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING NUMERIC ALPHABETIC		
22 STATION CODE		23 INTEGREE CODE		24 HQGTRS CODE		
25 DATE OF BIRTH MO. DA. YR.		26 DATE OF GRADE MO. DA. YR.		27 DATE OF LEI MO. DA. YR.		
28 AGE EXPRES MO. DA. YR.		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-ESC 2-OPB 3-FAL 4-POSE		
31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33 SECURITY REQ. NO		
34 SEX		35 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36 SERV COMP DATE MO. DA. YR.		
37 LONG COMP DATE MO. DA. YR.		38 CAREER CATEGORY CMB RESV PROV. TEMP		39 FEGLI HEALTH INSURANCE CODE 0-WAIVER 1-REG 2-REG/CPT 3-IRRELIABLE		
40 SOCIAL SECURITY NO.		41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-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 <b>11 26 71 467</b>		
46 OP APPROVAL <b>Hanny B. Fisher</b>		DATE APPROVED <b>1 Dec 71</b>				

SECRET

72-0311

MEMORANDUM FOR: Director of Central Intelligence  
THROUGH : Deputy Director for Plans  
SUBJECT : Appointment of Mr. David A. Phillips, as  
Chief of Station, Caracas, Venezuela

1. The appointment of Mr. David A. Phillips, GS-17, as Chief of Station, Caracas, Venezuela effective on or about 15 July 1972 is recommended. Mr. Phillips would replace Mr. Thomas J. Flores.

2. Mr. Phillips has been with the Agency since 1952, first in a contract capacity, and since April 1955 as a staff employee. He is currently serving as Chief of Station in Brazil. He previously served as COS, Santo Domingo and in Mexico City, Havana, Beirut, Guatemala, and Santiago. Mr. Phillips has a strong command of both Spanish and Portuguese. A biographic profile including information regarding his Agency experience and training is attached.



William V. Broe  
Chief  
Western Hemisphere Division

1 Attachment  
Biographic Profile (Parts 1 and 2)

APPROVAL RECOMMENDED:

  
Deputy Director for Plans

17 Jan 72  
Date

SECRET



SECRET

-2-

SUBJECT: Appointment of Mr. David A. Phillips, as  
Chief of Station, Caracas, Venezuela

The recommendation in paragraph 1 is APPROVED:

Richard Helms  
Director of Central Intelligence

19 Jan 72  
Date

SECRET

By your Clerk  
James M. Smith

SECRET

Use Previous Edition

<b>REQUEST FOR PERSONNEL ACTION</b>		DATE PREPARED <b>2 January 1970</b>
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57

1 SERIAL NUMBER <b>024345</b>	2 NAME (Last-First-Middle) <b>PHILLIPS, DAVID A.</b>
----------------------------------	---

3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>	4 EFFECTIVE DATE REGISTERED MONTH: <b>01</b> DAY: <b>11</b> YEAR: <b>70</b>	5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
---	--	--

6 FUNDS V TO V C TO V X V TO G C TO C	7 FINANCIAL ANALYSIS NO CHARGEABLE <b>0135 0694</b>	8 LEGAL AUTHORITY (Completed by Office of Personnel)
--	--	--

9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH FOREIGN FIELD BRANCH 5 RIO DE JANEIRO, BRAZIL STATION</b>	10 LOCATION OF OFFICIAL STATION <b>RIO DE JANEIRO, BRAZIL</b>
--	--

11 POSITION TITLE <b>1st SECRETARY, POLITICAL OFFICER CHIEF OF STATION (OO)</b>	12 POSITION NUMBER <b>0186</b>	13 CAREER SERVICE DESIGNATION <b>D</b>
--	-----------------------------------	---

14 CLASSIFICATION SCHEDULE (GSA, FA, etc.) <b>FSR GS</b>	15 OCCUPATIONAL SERIES <b>0136.05</b>	16 GRADE AND STEP <b>03 7 16 4</b>	17 SALARY OR RATE <b>23,646 \$27,549</b>
---	--	---	---

18 REMARKS  
**FROM: DDP/WH/COG/OFF OF THE CH/POS #1105  
HOME BASE WH  
APPROVED 259a attached**

*Wash. D.C.*

1 - Finance  
2 - Security

18A SIGNATURE OF REQUESTING OFFICIAL <i>Henry L. Berthold</i> <b>HENRY L. BERTHOLD C/WH/Per's</b>	DATE SIGNED <b>1-1-70</b>	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Russ Hoy</i>	DATE SIGNED <b>1-7-70</b>
---	------------------------------	--	------------------------------

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ALTITUDE CODE <b>51</b>	20 EMPLOY CODE <b>16</b>	21 OFFICE CODING NUMERIC: <b>51734</b> ALPHABETIC: <b>2011</b>	22 STATION CODE <b>44057</b>	23 INTEGRAL CODE <b>5</b>	24 POSTING CODE <b>3</b>	25 DATE OF BIRTH MO: <b>10</b> DA: <b>31</b> YR: <b>22</b>	26 DATE OF GRADE MO: DA: YR:	27 DATE OF LEI MO: DA: YR:
28 WTS EXP/RES MO: DA: YR:	29 SPECIAL REFERENCE 1-ESC 2-ORGR 3-PICA 4-NONE	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE 1970	32 CORRECTION CANCELLATION DATA MO: DA: YR:	<b>EOD DATA</b> →		33 SECURITY REQ NO	34 SEA
35 NET PREFERABLE CODE: 1-NO 2-YES	36 SERV COMP DATE MO: DA: YR:	37 LONG COMP DATE MO: DA: YR:	38 CAREER CATEGORY CODE: 1-YES 2-NO	39 SEGT HEALTH INSURANCE CODE: 1-YES 2-NO	40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE: 1-NO PREVIOUS SERVICE 2-NO DURING IN SERVICE 3-DURING IN SERVICE (LESS THAN 3 YEARS) 4-DURING IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXEMPTED CODE: 1-YES 2-NO	44 STATE TAX DATA FORM EXEMPTED CODE: 1-YES 2-NO		45 POSITION CONTROL CERTIFICATION		46 OP APPROVAL <i>[Signature]</i>

G  
40

45 POSITION CONTROL CERTIFICATION <b>01-12-70 GJK</b>	46 OP APPROVAL <i>[Signature]</i>	DATE APPROVED <b>5 Jan 70</b>
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FORM 1152 3-67

USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

1. NAME (Last, First, Middle) <b>Phillips, David A.</b>		2. DATE OF BIRTH <b>10/31/22</b>		3. GRADE <b>GS-16</b>	
4. OFFICE, DIVISION, BRANCH (or overseas region and existing cover if lateral assignment) <b>DDP/WH/COG</b>			5. PRESENT POSITION <b>Branch Chief</b>		6. EMPLOYEE EXTENSION <b>7451</b>
7. PROPOSED STATION <b>Rio de Janeiro</b>			8. PROPOSED POSITION (Title, Number, Grade) <b>COS, # 0186, GS-00</b>		
9. TYPE OF COVER AT NEW STATION <b>State</b>		10. ESTIMATED DATE OF DEPARTURE <b>o/a 28 Dec. '69</b>		11. NO. OF DEPENDENTS TO ACCOMPANY <b>7</b>	
12. COMMENTS <b>Vice Robert D. Gahagen State Integree Form DS-1686 to be forwarded</b>					
13. DATE OF REQUEST		14. SIGNATURE OF REQUESTING OFFICIAL <i>Ruth A. Sanford</i> <b>Ruth A. Sanford</b>		15. ROOM NUMBER AND BUILDING <b>3D 5309</b>	16. EXTENSION <b>6815</b>
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <b>29 DEC 1969</b> <b>7260</b>					
<b>REQUEST FOR PCS OVERSEAS EVALUATION</b>					

UNCLASSIFIED

CONFIDENTIAL

SECRET

ROUTING AND RECORD SHEET

SUBJECT (Optional)

Appointment of Mr. David A. Phillips as Chief of Station, Rio de Janeiro

FROM

Specialary, FMC

EXTENSION

NO.

DATE

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. Chairman, FMC

COS, Rio de Janeiro is a GS-17 position.

2.

Mr. Phillips' current assignment as Chief, Cuban Operations Group plus previous overseas tours in WH Div. including a tour as Chief of Station, Santo Domingo, qualify him for the proposed assignment as Chief of Station, Rio de Janeiro.

3. ADOP

4.

5. DDP

He will enter Portuguese language training this fall which should provide adequate exposure to make the transition from Spanish which he speaks with native fluency.

6.

7. XXXXX DCI

Mr. Phillips has been highly effective as a senior member of WH Div., both at Headquarters and in the field. His relations with his co-workers and subordinates have always been excellent and his liaison with State Department representatives has been marked by good will and mutual respect.

8. "Phillips" 1 COS

9. Chairman, FMC

NOTE: Above statement prepared by WH Division.

11. Secretary, FMC GS10

Mr. Cahagan has been recalled from the Station. The DCOS Mr. Stewart D. Barton, GS-15, will serve as Acting COS until the arrival of Mr. Phillips in January 1970.

12.

13.

14.

15.

SECRET

CONFIDENTIAL

INTERNAL USE ONLY

UNCLASSIFIED

SECRET

9-4209

8 AUG 1953

MEMORANDUM FOR: Director of Central Intelligence

THROUGH : Deputy Director for Plans

SUBJECT : Appointment of Mr. David A. Phillips as  
Chief of Station, Rio de Janeiro, Brazil

1. The appointment of Mr. David A. Phillips, GS-16, as Chief of Station, Rio de Janeiro, effective on or about 15 January 1970 is recommended. Mr. Phillips would replace Mr. Robert D. Gakagen.

2. Mr. Phillips has been an employee of the Agency since 1951 initially in a contract capacity. He has served in Santiago, Guatemala City, Havana, Beirut, Mexico City and most recently as Chief, Cuban Operations Group. Mr. Phillips is fluent in the Spanish language and is scheduled for two months of full-time Portuguese training immediately prior to his departure. A biographic profile including information regarding his Agency experience and training is attached.

Signed William V. Brock

William V. Brock  
Chief  
Western Hemisphere Division

Attachment  
Biographic Profile (Parts 1 and 2)

SECRET

SECRET

- 2 -

SUBJECT: Appointment of Mr. David A. Phillips as Chief of Station, Rio de Janeiro, Brazil

APPROVAL RECOMMENDED:

/s/ Thomas H. Harman

8 OCT 1959

Deputy Director for Plans

Date

The recommendation in paragraph one is APPROVED:

8 OCT 1959

1 OCT 1959

Director of Central Intelligence

Date

Distribution:

Original & 2 - Addressee

2 - DDP

1 - C/WRS

1 - C/CSFS

1 - C/WII/S

1 - C/WI/SS

1 - C/WI/Personnel

RDF/WI/PLRS/PFRACDCUGAL/rajr/CS15 (5 August 1959)

SECRET

23 October 1968

MEMORANDUM FOR: Secretary, Clandestine Services  
Career Service Board

SUBJECT : Recommendation for Promotion to  
GS-16: David A. Phillips

1. Mr. David A. Phillips is strongly recommended for promotion to GS-16 and is ranked Number 2 in WH Division's preference for promotion in that grade.

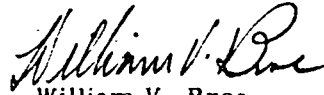
2. Mr. Phillips stands out among his peers as a true Clandestine Services operator. He has had a range of operational assignments enjoyed by few Clandestine Services officers. He served in Cuba, Guatemala, Beirut, Chile, Mexico and the Dominican Republic. His functional assignments have included Contract Agent, Operations Officer under both unofficial and official cover, Chief of Station, and he is currently assigned as Chief, Cuban Operations Group. In regard to his tour as Chief of Station, Santo Domingo, I cite the following quote made by [redacted] of the Dominican Republic, concerning the turbulent events in his country during his tenure:

"You know," he said, "looking back over those months when things seemed pretty bleak, two names come immediately to mind as able and effective representatives of the United States. They are Ellsworth Bunker and David Phillips."

*Approved*  
*23 Oct 1968*



3. Mr. Phillips has the intelligence, language capability, personality, management and operational ability to move forward steadily in this Agency and he is now ready for promotion to GS-16. I urge you to act affirmatively on this promotion recommendation.



William V. Broe

Chief

Western Hemisphere Division

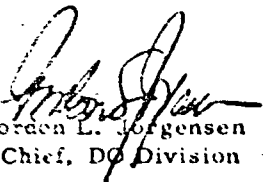
S-E-C-R-E-T.

27 February 1969

MEMORANDUM FOR: Chief, WH Division

SUBJECT: Briefing at DO Base Chiefs' Conference  
by Mr. David A. Phillips

I should like to express my thanks to you for having made available Mr. David A. Phillips to brief the DO Base Chiefs' Conference on 17 February 1969. His briefing was extremely lucid and helpful and expressly commended by all Conference participants. Please convey to him my personal appreciation of his efforts.

  
Gordon L. Jorgensen  
Chief, DO Division

S-E-C-R-E-T

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1 SERIAL NUMBER 024345						2 NAME (Last-First-Middle) PHILLIPS, David A.	
3 NATURE OF PERSONNEL ACTION <b>PROMOTION</b>				4 EFFECTIVE DATE REQUESTED MONTHS DAY YEAR 12 15 68		5 CATEGORY OF EMPLOYMENT Regular	
6 FUNDS		7 FINANCIAL ANALYSIS NO CHARGEABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel)		9 ORGANIZATIONAL DESIGNATIONS	
V TO V		V TO CF		9135-0620		DDP/WH WH/COG Office of the Chief	
CF TO V		X CF TO CF		10 LOCATION OF OFFICIAL STATION Washington, D. C.		11 POSITION TITLE Att Pol Officer Op. Officer-Ch FSR GS	
				12 POSITION NUMBER 1105		13 CAREER SERVICE DESIGNATION D	
		14 CLASSIFICATION SCHEDULE (G.S., F.B., etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 03 5 16 4	
				17 SALARY OR RATE <del>16,000</del> 20 335 \$25,118		18 REMARKS	
19A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>W. H. Fisher</i> Secretary, CSCS Board	
						DATE SIGNED 9 Dec 68	
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 INTERIE CODE	24 REGIONS CODE	25 DATE OF BIRTH MO. DA YR
					5	1	12 15 22
28 BTE EXPIRES MO DA YR	29 SPECIAL REFERABLE	30 RES. PAYMENT DATA 1-00 2-CRSM 3-172 4-000		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO DA YR		33 SECURITY REQ NO
					EOD DATA →		34 SER
35 PET 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 LGR RES PROG TEMP	39 FEDERAL HEALTH INSURANCE CODE CODE 0-NONE 1-YES	40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)			42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		44 STATE TAX DATA FORM EXECUTED CODE MO TAX STATE CODE 1-YES 2-NO	
45 POSITION CONTROL CERTIFICATION				46 OP APPROVAL <i>H.B. Fisher</i>			DATE APPROVED 13 Dec 68



VOICE OF AMERICA  
UNITED STATES INFORMATION AGENCY  
WASHINGTON, D.C. 20547

CO: P 16 37

April 15, 1968

Dear Dave:

I thought you would be pleased about a reference to you which came up in the course of a longish conversation last night with

[redacted] about the turbulent events in his country three years ago.

"You know," he said, "looking back over those months when things seemed pretty bleak, two names come immediately to mind as able and effective representatives of the United States. They are Ellsworth Bunker and David Phillips."

I thought such a pleasant echo of a rough period would help heal your ulcers.

Cordially,

Richard G. Cushing  
Deputy Director

Mr. David A. Phillips  
8224 Stone Trail Drive  
Carderock Springs  
Bethesda, Md. 20034

SECRET

18 Nov 1967

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

30 August 1967

1 SERIAL NUMBER 024345		2 NAME (Last-First-Middle) PHILLIPS, David A.	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT		4 EFFECTIVE DATE REQUESTED MONTH: 9, DAY: 10, YEAR: 67	
5 CATEGORY OF EMPLOYMENT REGULAR		6 FUNDS V TO V, CP TO V, X, V TO CP, CP TO CP	
7 FINANCIAL ANALYSIS NO. CHARGERS 8235 0620		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG OFFICE OF THE CHIEF		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE ATTN: OPS OFFICER-CH		12 POSITION NUMBER 1105	
13 CAREER SERVICE DESIGNATION D		14 CLASSIFICATION SCHEDULE (GS 11B, etc.) FSR GS	
15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 03 5 15 5	
17 SALARY OR RATE 18'041 19,978		18 REMARKS FROM: DDP/WH/DR STATION K. Santo Domingo, Lion Rap Resignation Accepted by Pers. SD/GS 8/31/67 Rec 9/11/67 1 - doc. 1 - [unclear]	
18A SIGNATURE OF REQUESTING OFFICER Henry L. Berthold C/WH/Pers		DATE SIGNED 9/11/67	
18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 EMPLOY. CODE 10	21 OFFICE CODING NUMERIC: S, ALPHABETIC: S, W, H	22 STATION CODE 75013
23 INTEGRITY CODE S	24 HOURS CODE 1	25 DATE OF BIRTH 3/1/22	26 DATE OF GRADE [blank]
27 DATE OF LEI [blank]	28 WTE EXPIRES [blank]	29 SPECIAL REFERENCE [blank]	30 RETIREMENT DATA [blank]
31 SEPARATION DATA CODE [blank]	32 CORRECTION/CANCELLATION DATA [blank]	33 SECURITY REQ NO [blank]	34 SEX [blank]
35 VET PREFERENCE [blank]	36 SERV COMP DATE [blank]	37 LONG COMP DATE [blank]	38 CAREER CATEGORY [blank]
39 FEEDBACK HEALTH INSURANCE [blank]	40 SOCIAL SECURITY NO [blank]	41 PREVIOUS CIVILIAN GOVERNMENT SERVICE [blank]	42 LEAVE CAT. CODE [blank]
43 FEDERAL TAX DATA [blank]	44 STATE TAX DATA [blank]	45 POSITION CONTROL CERTIFICATION [blank]	46 O.P. APPROVAL [Signature]
DATE APPROVED 8 sept 67		FORM EXECUTED [blank]	

SECRET  
(When Filled In)

25 October 1966

David A. Phillips

MEMORANDUM FOR: [REDACTED]

THROUGH :

SUBJECT : Notification of Designation as a Participant in the Organization Retirement and Disability System

REFERENCE : Book Dispatch 5096 dated 12 August 1965

1. You have been found to be qualified as a participant in the Organization Retirement and Disability System and have been so designated effective 23 October 1966.

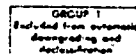
2. Although such designation under present statutes is viewed favorably by most persons, the regulation governing this retirement system gives the individual the right to appeal such a determination if he deems the designation adverse to his best interests. In order that this technical requirement may be satisfied, you are hereby notified of your right to appeal. An appeal with reasons therefore must be received in Headquarters within 60 days of the date of this memorandum or acceptance of designation will be assumed. Any questions that you may have in connection with your designation that cannot be answered by referring to referenced Book Dispatch should be forwarded to Headquarters.

3. We believe that the benefits of the Organization Retirement System are superior to the benefits of the Civil Service Retirement System. However, there are a few situations in which an employee *at the time of retirement* may have so many years of service (almost 37) that he would receive a higher annuity under the Civil Service System. Because of this, the policy decision has been made that a participant in the Organization System who would receive a higher annuity under the Civil Service System may, not later than one year prior to his retirement, apply to be removed from our system and transferred to the Civil Service System. Thus, you should not anticipate this contingency as a factor in deciding whether you regard your designation as a participant adverse to your best interests.

Richard B. Egan

RICHARD B. EGAN

SECRET



David A. Phillips

**CONFIDENTIAL**

24 October 1966

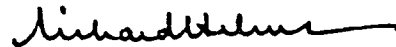
**MEMORANDUM FOR:** Chief, WH Division

**THROUGH** : Deputy Director for Plans

**SUBJECT** : Commendation

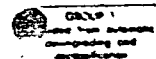
1. The Dominican Republic Station has distinguished itself by especially meritorious service during the past year and has made a major contribution toward the advancement of the objectives of the United States Government in a critical situation. One year ago the people of the Dominican Republic were facing a dismal future. Today, while the future remains uncertain, the prospects for eventual stability have been immeasurably increased. Several Departments and Agencies of the United States Government engaged in an effort to bring this about. I believe that the role of the CIA in the Dominican Republic during the past year was a crucial one. The highly effective performance of the Santo Domingo Station and the Base at Santiago was the result of the combined efforts of each officer and employee stationed there. These men and women gave unsparingly of their time, energy and brain power. Their efforts were sustained over a long period under stressful circumstances. Now, while our long-term mission continues, a significant milestone has been reached and it is most appropriate at this time to grant this special recognition for a job well done to all members of the CIA team in the Dominican Republic during the year ending June 30, 1966.

2. I should like to commend each member of the Station who contributed to this noteworthy performance and request that a copy of this commendation be placed in individual personnel files as appropriate.



Richard Helms  
Director of Central Intelligence

**CONFIDENTIAL**



SECRET  
(If Not Filled In)

G-54

REQUEST FOR PERSONNEL ACTION										DATE PREPARED		
1 SERIAL NUMBER <b>024345</b>										2 NAME (Last-First-Middle) <b>PHILLIPS, DAVID A.</b>		
3 NATURE OF PERSONNEL ACTION <b>DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM</b>						4 EFFECTIVE DATE REQUESTED MONTH <b>10</b> DAY <b>23</b> YEAR <b>66</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>				
6 FUNDS		V TO V		V TO CF		7 FINANCIAL ANALYSIS NO CHARGEABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel) <b>PL 88-643 Sect. 203</b>				
CF TO V		<b>X</b>		CF TO CF		<b>7135-0875</b>						
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH</b>						10 LOCATION OF OFFICIAL STATION <b>SANTO DOMINGO, DOMINICAN REPUBLIC</b>						
11 POSITION TITLE						12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION <b>D</b>				
14 CLASSIFICATION SCHEDULE (G.S. L.B. etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP <b>15</b>		17 SALARY OR RATE <b>3</b>				
18 REMARKS <b>EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.</b>												
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTEGREE CODE	24 MOOTHS 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-USE 3-FICA 5-NONE CODE <b>2</b>		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO DA YR		33 SECURITY REQ NO		34 SEX		
35 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY CAR RESH PROV TEMP		39 REG. HEALTH INSURANCE CODE 0-WAIVER 1-YES		40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO		44 STATE TAX DATA NO TAX EXEMPTIONS FORM EXECUTED 1-YES 2-NO		45 POSITION CONTROL CERTIFICATION			
45 POSITION CONTROL CERTIFICATION <b>10-13 GGN</b>						46 O.P. APPROVAL See memo signed by D/Pers dated <b>10 OCT 1966</b>				DATE APPROVED		



CONFIDENTIAL  
(When Filled In)

<b>NOTICE OF CREDITABLE SERVICE</b> [FOR LEAVE PURPOSES]		<input type="checkbox"/> VOUCHERED <input checked="" type="checkbox"/> UNVOUCHERED
NAME (Last, First, Middle) <b>PHILLIPS, David A.</b>		SERIAL NO. <b>004345</b>
OFFICE (and Division) <b>DDP/VH Foreign Field Branch</b>		
<input type="checkbox"/> ORIGINAL	SERVICE COMPUTATION DATE (Mo - da - yr)	
<input checked="" type="checkbox"/> CORRECTION	<b>01-15-53</b>	
THIS DATE <b>7-01-66</b>	SIGNATURE (Office of Personnel) <i>[Signature]</i> <b>Lowell P. Moor</b>	

FORM 171 OBSOLETE PREVIOUS EDITIONS. 5-63

CONFIDENTIAL

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(4)

SECRET

(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>27 JULY 1965</b>	
1 SERIAL NUMBER <b>024345</b>		2 NAME (Last-First-Initial) <b>PHILLIPS, DAVID A.</b>					
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>JUN 6 65</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6 FUNDS V TO V CF TO V		V TO CF <b>XX</b>		7 COST CENTER NO CHARGE ABLE <b>6135 0875</b>		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WII FOREIGN FIELD BRANCH 2 SANTO DOMINGO, DOMINICAN REPUBLIC STATION</b>				10 LOCATION OF OFFICIAL STATION <b>SANTO DOMINGO, DOMINICAN REPUBLIC</b> <i>Dom Rep</i>			
11 POSITION TITLE <b>ATT POL OFF <del>MANAGER</del> (CHIEF OF STATION)</b>				12 POSITION NUMBER <b>0274</b>		13 CAREER SERVICE DESIGNATION <b>D</b>	
14 CLASSIFICATION SCHEDULE (GS, LP, etc.) <b>FSR GS</b>		15 OCCUPATIONAL SERIES <b>0136.05</b>		16 GRADE AND STEP <b>03 5 15 4</b>		17 SALARY OR RATE <b>16,920 18,170</b>	
18 REMARKS FROM: <b>DDP/WII/BRANCH 1 MEXICO CITY, MEXICO STATION/0340/</b> MEMORANDUM SENT TO DDCT VIA DDP REQUESTED THE APPOINTMENT OF MR. PHILLIPS AS COS, SANTO DOMINGO, DOM. REP. STATION APPROVED ON 13 APRIL 1965. MR. PHILLIPS REPLACED MR. EDWIN M. TERRELL WHO HAS BEEN ASSIGNED TO WII/BRANCH 2/HEADQUARTERS, EFFECTIVE 6 JUNE 1965. FORM 259 HAS BEEN SUBMITTED <i>Security Approval Granted by Pers. SD/OS 7/25/65 LCC styles</i>							
19 FINANCE SECURITY		19A SIGNATURE OF REQUESTING OFFICER <i>Robert D. Cashman</i> <b>ROBERT D. CASHMAN C/WII/PERS</b>		DATE SIGNED <b>29 July 65</b>		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	
				DATE SIGNED <b>8/3/65</b>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE <b>37</b>	20 EMPLOY CODE <b>10</b>	21 OFFICE CODING NUMERIC ALPHABETIC <b>51650 W14</b>		22 STATION CODE <b>19039</b>	23 INTEGRAL CODE	24 HOURS CODE <b>3</b>	25 DATE OF BIRTH MO DA YR <b>10 31 43</b>
26 DATE OF LEI MO DA YR	27 DATE OF GRADE MO DA YR	28 DATE OF LEI MO DA YR	29 DATE OF GRADE MO DA YR	29 DATE OF LEI MO DA YR	29 DATE OF GRADE MO DA YR	29 DATE OF LEI MO DA YR	29 DATE OF GRADE MO DA YR
28 NTE EXPIRES MO DA YR <b>XX/XX/XX</b>	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-CSC 2-FICA 3-VERA		31 SEPARATION DATA CODE	32 CORRECTION-CANCELLATION DATA TYPE MO DA YR		33 SECURITY REQ NO
34 SECURITY REQ NO	34 SER	35 VET PREFERENCE CODE 3-NONE 1-5 PT 7-10 PT		36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY CAR BENE PROV TEMP	39 FEGLI HEALTH INSURANCE CODE CODE 3-None/1-YES 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 (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 1-YES 2-NO		44 STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO	
45 POSITION CONTROL CERTIFICATION <b>8-3-65</b>	46 O.P. APPROVAL <i>[Signature]</i>				DATE APPROVED <b>8/3/65</b>		

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

S-E-C-R-E-T

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C. 20505

TO : David A. Phillips

SUBJECT: TDY in the Dominican Republic

Most of you who went down to the Dominican Republic departed with so much speed and so little ceremony that there was no time to explain the importance and urgency of your assignments. Now that you have served there during the crisis, the importance of the task needs no embellishment from us, but you should know that the contribution of the augmented Station was decisive in shaping the policies and actions of the government and in avoiding several major mistakes. For weeks after the April revolution, our Station reporting was literally the only source of information that the United States had on the role of Communism among the rebel forces and on conditions outside the capital.

Many fine things were done in the Station and in the hinterland by all of you. Manning the check-points under fire, flying to remote and hostile villages, moving tons of supplies through the gauntlet of the communications line, toiling over midnight reports, and keeping open our country's only commo link -- all these things were commonplace. The dedication, discipline, and routine of our personnel placed them in a class apart.

To the sense of pride and accomplishment you must already feel, I want to add the gratitude and admiration of the DDP and of the Agency.



Richard Helms  
Deputy Director of Central Intelligence

S-E-C-R-E-T

SECRET

100-5-1166

12 Apr 1965

65-1911

MEMORANDUM FOR: Deputy Director of Central Intelligence

VIA : Deputy Director for Plans

SUBJECT : Appointment of Mr. David A. Phillips as Chief of Station, Santo Domingo, Dominican Republic

1. The appointment of Mr. David A. Phillips as Chief of Station, Santo Domingo, Dominican Republic, effective on or about 15 October 1965, is recommended. Mr. Phillips would replace Mr. Edwin M. Terrell.

2. Mr. Phillips was employed in a contract status from 1952 to 1955 and became a Staff Employee in April 1955. He resigned from the Agency in August 1958 to enter private business. In March 1960 he returned to the Agency as a staff employee and is presently assigned as Operations Officer, Mexico City, Mexico, GS-15. A biographic data sheet, giving more detailed information on Agency experience and training, is attached.

*R. W. Hecker*  
Desmond FitzGerald  
Chief

Western Hemisphere Division

1 Attachment  
Biographic Profile (Part 1)

APPROVAL RECOMMENDED:

*[Signature]*

Deputy Director for Plans

(Date)

The recommendation in paragraph 1 is APPROVED:

*[Signature]*  
Deputy Director of Central Intelligence

20 Apr 1965  
(Date)

SECRET

100-5-1166

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 024345						2. NAME (Last-First-Middle) PHILLIPS, DAVID A	
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09   29   63		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS		7. COST CENTER NO. CHARGE-ABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
V TO V		V TO CF		41355700 1000			
CF TO V		X CF TO CF					
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3 MEXICO CITY MEXICO STATION				10. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO			
11. POSITION TITLE ATT POL OFF OPS OFFICER				12. POSITION NUMBER 0340		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) FSR GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 03 0 15 @ 3		17. SALARY OR RATE <del>12,955</del> 13,440 <del>15,045</del> 15,525	
18. REMARKS  This is a PMA in accordance with SF 20-01c(1) for 2 years							
18a. SIGNATURE OF REQUESTING OFFICIAL ROBERT D. CASHMAN, C/WH/PERS				DATE SIGNED 9/23/63		18b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]	
				DATE SIGNED 9/27/63			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 2		20. OFFICE CODE NO. 51400		21. STATION CODE WH		22. DATE OF BIRTH 10/31/22	
23. EMPLOYMENT STATUS 1		24. SPECIAL RESERVE 3		25. DATE OF PROMOTION 09/29/63		26. DATE OF DEPARTURE 09/29/63	
27. NET PREFERENCE 1		28. SERVA. COMP. DATE NO		29. SERVA. COMP. DATE NO		30. SOCIAL SECURITY NO.	
31. PRODUCT MANAGEMENT SERVICE DATA NO		32. MILITARY SER. CODE NO		33. MILITARY SER. DATA NO		34. STATE AB DATA NO	
35. POSITION CONTROL CERTIFICATION 1		36. D.P. APPROVAL [Signature]		37. DATE APPROVED 9/29/63			

SECRET

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
1. STORAGE NUMBER						17 August 1961
2. NAME (Last, First, Middle)		3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE OF ACTION
PHILLIPS, David A.		REASSIGNMENT--Dept. of State		MONTH DAY YEAR 8 23 61		
5. FINES		6. COST CENTER NO. CHARGE		7. EMPLOYMENT CATEGORY		
Y TO V		1155-5700-1000		Regular		
CF TO V		X CF TO CF		8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION			
7 DDP/AM Branch 3 Mexico City Mexico Station			Mexico City, Mexico			
11. POSITION TITLE		12. POSITION NUMBER	13. PCB CONTROL NO.	14. CAREER SERVICE DESIGNATION		
Attache, Political Officer Ops. Officer		340		1		
15. CLASSIFICATION SCHEDULE (GN, LP, etc.)		16. OCCUPATIONAL SERIES	17. GRADE AND STEP	18. SALARY OR RATE		
GS		0136.01	15 3	\$18,935 \$12,730		
19. REMARKS						
No sick and No hours annual leave to be transferred to the Dept. of State						
20. SIGNATURE OF REQUESTING OFFICIAL			21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			
M. Honey, Cover Officer, 10104						
SPACE BELOW FOR EXHIBITS (USE OF THIS SPACE IS OPTIONAL)						
22. EXHIBIT NO.	23. EXHIBIT TITLE	24. EXHIBIT DATE	25. EXHIBIT TYPE	26. EXHIBIT NO.	27. EXHIBIT DATE	28. EXHIBIT TYPE
55	10	64700	COH	45015	3	10.31.22
END DATA →						
29. POSITION CONTROL CERTIFICATION						
30. APPROVAL						
31. Kearney 08/31/61						

FORM 1152 (REVISED 1-59)

SECRET

SECRET

Sec. Rilled 1-61

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER						28 June 1961	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)					
024345		PHILLIPS, DAVID A.					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
REASSIGNMENT				08 1961		REGULAR	
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE	
CF TO V		X		CF TO CF		2135 5700 1000	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
DIP WH BRANCH 3 MEXICO CITY, MEXICO STATION				MEXICO CITY, MEXICO			
11. POSITION TITLE				12. POSITION NUMBER		13. PER CONTROL NO.	14. CAREER SERVICE DESIGNATION
OPS OFFICER				D		340	D
14. CLASSIFICATION SCHEDULE (GS, LP, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		14		0136.01		14 3	
						12,730	
18. REMARKS							
From: DDP/WH/4/BA-624/Wash., D.C. <del>10/1/61</del>							
Subject scheduled to integrate o/a <sup>16</sup> August 1961.							
<del>It is requested that this action be made effective no later than 6 August 1961.</del>							
1 copy to Security.							
Security Approval Granted by Pers. SO/OS 7/12/61 6/18/61							
18A. SIGNATURE OF REQUESTING OFFICIAL				18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			
Henry Posthale				Ronald Gage			
USE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. OFFICE CODE	20. OFFICE SYMBOL	21. OFFICE NUMBER	22. OFFICE NAME	23. OFFICE ADDRESS	24. OFFICE PHONE NUMBER	25. OFFICE TELETYPE NUMBER	26. OFFICE FAX NUMBER
37	10	64700	WH	45075	3	1013122	
27. DATE PREPARED	28. DATE RECEIVED	29. DATE APPROVED	30. DATE OF ACTION	31. DATE OF REVIEW	32. DATE OF REVIEW	33. DATE OF REVIEW	34. DATE OF REVIEW
35. WT. PREVIOUS SERVICE	36. WT. PREVIOUS SERVICE	37. WT. PREVIOUS SERVICE	38. WT. PREVIOUS SERVICE	39. WT. PREVIOUS SERVICE	40. WT. PREVIOUS SERVICE	41. WT. PREVIOUS SERVICE	42. WT. PREVIOUS SERVICE
43. POSITION CONTROL CERTIFICATION	44. U.P. APPROVAL						
W. Kearney 6/15/61	R. Gage						

SECRET

12443

29 June 1961

MEMORANDUM FOR THE RECORD

SUBJECT: David A. Phillips

On 14 June 1961 the undersigned reviewed with Mr. David A. Phillips his career development prospects for the next five year period. We agreed that the following represented a desirable and fairly firm goal in this respect:

a. In general his future training and field experience should place sufficient stress on the CI and FI fields to avoid the career confinement of strict CA specialization.

b. His next assignment would be a normal field tour in Mexico City. Upon return from that assignment, he would receive up to six months training to be followed by an assignment to the CA Staff (or the organizational successor thereof). One of his primary undertakings in the CA Staff would be to develop what might best be termed "ideological warfare" (e. g., a search for basic ideas and concepts with wide appeal) as opposed to the normal propaganda approach (e. g., a running debate on current events).

(Signed) RICHARD M. BISSELL, JR.

RICHARD M. BISSELL, JR.  
Deputy Director  
(Plans)

cc: ASIA (Per)  
Attn Panel A  
Mr. Phillips  
Tara C/WH  
-OP/RSD

NY 8004

JUN 30 1961

SECRET

OFFICE OF THE DIRECTOR



4-00000

**SECRET**

1 June 1961

**MEMORANDUM FOR:** Chief, Finance Division  
**FROM:** Chief, WH/4/Support  
**SUBJECT:** Premium Pay

Due to the recent reduction in heavy workload requirements, the following employees are no longer entitled to Premium Pay. It is requested that this entitlement be discontinued effective c.o.b. 10 June 1961. The salaries are chargeable to Allotment #535-5000-8021:

BELSITO, Frank J.  
BROWN, Fravel S.  
CANN, Ruth E.  
CARTWRIGHT, Cecil J.  
CHELLINO, Samuel J.

KENT, William M.  
MORALES, David S.  
MURRAY, William J.  
OVERJORDE, Robert W.  
PATTON, Lee E.

PETERS, John D.  
PHILIPS, David A.  
PIEDMONTE, Robert P.  
REYNOLDS, Robert

*William E. Eisemann*  
WILLIAM E. EISEMANN  
Chief, WH/4/Support

**Distribution:**  
2 - Chief, Finance Division (ea. employee)  
2 - Director of Personnel (ea. employee)

**SECRET**

**SECRET**  
**REQUEST FOR PERSONNEL ACTION**

1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth			4. Var. Prof.		5. Sex	6. CS, EOD		
					Mo. Da. Yr.			None 5 Pr-1 10 Pr-9			Mo. Da. Yr.		
7. SCD		8. CSC Retmt.		9. CSC Or Other Legal Authority			10. Appt. Affidav.		11. FEGLI		12. LCD		13. <small>Min. Serv. Req.</small>
Mo. Da. Yr.		Yes-1 No-2					Mo. Da. Yr.		Yes-1 No-2		Mo. Da. Yr.		Yes-1 No-2

**PREVIOUS ASSIGNMENT**

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

**ACTION**

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Data
REASSIGNMENT		54	Mo. Da. Yr.		REGULAR		e/	

**PRESENT ASSIGNMENT**

31. Organizational Designations		Code	32. Location Of Official Station			Station Code		
DIP WH BRANCH 4		4211	WASH., D. C.					
33. Dept. - Field		Code	34. Position Title			35. Position No.	36. Serv.	37. Occup. Series
Dept. - US/ld - Frgn -		1	OPS OFFICER			PA-624	GS	0136.01
38. Grade & Step		39. Salary Or Rate	40. SD	41. Date Of Grade		42. PSI Due	43. Appropriation Number	
14 3		\$ 11835	D	Mo. Da. Yr.		Mo. Da. Yr.	0135 1000 1000	

**SOURCE OF REQUEST**

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
P. C. BOWERS WH/PERSONNEL OFFICER			
B. For Additional Information Call (Name & Telephone Ext.)			
JOHN WASHINKO X8242			

**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			D. Placement		
B. Pos. Control		7-15-60	E.		
C. Classification			F. Approved By		

Remarks: Staffing Complement Change.

2 copies to Security.



OFFICE OF PERSONNEL

RESIGNATION

I Resign For The Following Reason:

FEB 4 2 37 PM '60

MAIL ROOM

My Last Working Day Will Be

This Date (Date Of Signature)

Signature

Forward Communications, Including Salary Checks And Bonds, To The Following Address (Number, Street, City, Zone, State):

*I have resigned for personal reasons in order to accept a job  
with a private firm where I will be able to use my  
skills in a more efficient manner.*

*Office Memorandum* • UNITED STATES GOVERNMENT

TO : File

DATE 18 March 1960

FROM :

SUBJECT: PHILLIPS, DAVID A.

Effective date of CA is 19 Aug 1958, per Mr. Toomey, x2823

This time is creditable for LCD only, per Mr. Stevens.

Mr. Phillips was same as independent contractor, per Lyle Miller, x3039.

*LC*

David Phillips

Per Mr. Washburn x 8 v 12

Phillips is presently contract agent.  
and (is staff employee)

DDP approval for Bisell via Cable  
will be here to Food 1 March.

WH - has already contacted <sup>(Cigbome)</sup> Security  
and they will grant clearance, subject  
to poly.

Kennedy (MC) has copies of 89 (on  
Phillips wife and children). He says  
OK to enter on duty, but will  
be subject to medical when on  
duty.

Phillips will be in (2 Feb) Mon.  
for TOY and will have poly at  
that time (1:00 pm)

2-8-60 <sup>Poly is</sup> ~~Permitted poly~~ <sup>will</sup> be in  
at 14 March. W-60

**SECRET**  
(When Filled In)

<b>REQUEST FOR SECURITY CLEARANCE</b>				REQUEST NO. (1-8) 1-8573 L.V. Corp REQUEST DATE (9-11) 8 Feb 1960
NAME (LAST - FIRST - MIDDLE) (12 - 80) PHILIP H. BARTLETT				YEAR OF BIRTH (29-30) 1922
POSITION TITLE OPS OFFICER		POSITION NUMBER (31 - 36) 013600	OCCUP. CODE (37 - 48)	GRADE (42-44) GS-11
LOCATION (CITY, STATE, COUNTRY) Washington, DC		ASSIGNMENT (OFFICE, DIVISION, BRANCH) SIR/WH Division GS/CG Dev Corp		ORGN. CODE (49-50) 1600
TYPE OF APPLICANT	<input type="checkbox"/> REGULAR	<input type="checkbox"/> CONSULTANT	CONVERSION ACTION	TYPE OF APPL. (40) 7
	<input checked="" type="checkbox"/> CONTRACT	<input type="checkbox"/> MILITARY	IF OTHER, SPECIFY: CONTRACT to SE	
NAME OF REQUESTER (OR OFFICIAL) G. W. Stewart/hc		TYPE OF ASSIGNMENT AND FUNDS		NOGTR & FUND (50) 1
CLEARANCE REQUIRED	PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)			CLEARANCE (51) 3
	<input type="checkbox"/> SECRET	<input checked="" type="checkbox"/> FULL		
ATTACHMENTS	<input type="checkbox"/> PERSONAL HISTORY STATEMENT	<input type="checkbox"/> APPENDIX I	REQUEST FOR WAIVER	
	<input type="checkbox"/> PHOTOGRAPHS	<input type="checkbox"/> APPENDIX II	REPORT OF INTERVIEW	
VETERAN STATUS	<input checked="" type="checkbox"/> MALE - VETERAN	<input type="checkbox"/> FEMALE - VETERAN		RECRUIT. CODE (52-54) 001
	<input type="checkbox"/> MALE - NON-VETERAN	<input type="checkbox"/> FEMALE - NON-VETERAN		VET PREP. & SEX (55) 1

PLEASE EXPEDITE

Mr. Washinko, WH Division, advises that Mr. Osborne (Office of Security) has indicated that subject would be granted immediate security clearance, subject to poly.

Former Staff Employee. Your Case #10696.

Presently Contract Agent.

HAND CARRY

- SO
- OTF

SPACE BELOW FOR OS USE ONLY

UNCLASSIFIED  INTERNAL USE ONLY  CONFIDENTIAL  SECRET

### ROUTING AND RECORD SHEET

SUBJECT: (Optional)				
FROM: <i>JW</i> WH/Personnel			NO.	
			DATE 22 January 1960	
TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS	COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)
	RECEIVED	FORWARDED		
1. WH/Pers Ofcr	<i>22 Jan</i>		<i>JCB</i>	<p>Servine as CA with agencies, no creditable business RCD, but not SCD. - 3-14-60 <i>per Gene Starna</i></p> <p>Please coordinate with Ron Gage per his conversation with Mr. Bowers, WH/Pers on 22 Jan 60.</p> <p>Send 259 p to Mr Kenney MO. stating 89's have been forwarded to MO on Phillips, wife, and all children.</p> <p><i>Just to MO 1-10-60</i></p> <p>Food missed - 15 Mar - 8:30</p>
2.				
3. C/WH/Support	<i>JAN 1960 25</i>		<i>MR</i>	
4.				
5. WH/Pers				
6. <i>Paul A</i>	<i>JAN 1960 26</i>	<i>1/27</i>	<i>RG</i>	
7. CS/PO 2120 I Bldg.	<i>42h 60</i>		<i>JK</i>	
8.				
9. <i>MRS CARLIOTTA</i>				
10. <i>CURIZ</i>				
11.				
12.				
13.				
14. <i>P</i>				
15.				



UNCLASSIFIED  INTERNAL USE ONLY  CONFIDENTIAL  SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

NEA/ADM/Personnel  
408 1 Bldg. x8671

NO.

DATE

6 August 1958

TO: (Officer designation, room number, and building)

DATE

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1.

NEA/B & F

8/6

MS

Employee had following:

2.

3.

~~NEA/ADM~~

4.

Security debriefing  
CPA  
Finance  
Logistics

5.

NEA/PERSONNEL

18 Aug 58 Loo

6.

7.

CS/CS PANEL (Section A) 2100L

13 AUG 58

AUG 13

F. H. Oswald

8.

CPD

8 Aug 15 Aug 58

1, 13, 00, 4, 1

9.

~~OFFICE OF PERSONNEL~~

10.

C/CPD

In your signature  
Bleam - Thru Resig.

11.

2102-L

12.

13.

14.

15.

14-92-14-4

SECRET

CONFIDENTIAL

INTERNAL USE ONLY

UNCLASSIFIED

UNCLASSIFIED

INTERNAL USE ONLY

CONFIDENTIAL

**SECRET**

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

NEA/ADM/Personnel  
1103 I Bldg. x8671

NO.

DATE

16 May 1957

TO: (Officer designation, room number, and building)

DATE

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1.

NEA/B & P

*EBB*

2.

3.

NEA/TRG

*20 May 9*

4.

5.

NEA/PERSONNEL

*20 May*

*CNEA*

*approved by DC/NEA 9/22*

7.

HR DIVISION

*23 May 22 2058*

*Please attach enclosed fitness report*

8.

9.

CS/CS PANEL (Section A) 2309L

*MAY 24 1957*

*Pat*

*Latest Fitness Report for period February - September 1956 is in file. Shortly after this period report was returned for TDI with NEA.*

10.

PEP

*20/6/57*

*4/21/57*

*2058*

11.

OFFICE OF PERSONNEL

*1957*

*25 JUN 1957*

*715*

12.

CPD Room 401

*10/6*

*26 June*

*26 June*

*26 June*

13.

Here

*Sheff*

*261 using 20 June 57  
cont'd = 542*

14.

Chief/CPD

*For your signature*

*TO support check of needed submitted to you 19 June 1957*

15.

CONTACT PERSONNEL DIVISION  
Room 207 Ext 2555

FORM 1 DEC 56

610 USE PREVIOUS EDITIONS

**SECRET**

CONFIDENTIAL

INTERNAL USE ONLY

UNCLASSIFIED



**Office Memorandum • UNITED STATES GOVERNMENT****TO :** The record**DATE:** 15 Aug 58**FROM :** Dorothy S. Kreinheder/CFD(Staff Agent Branch)**SUBJECT:** *Special Phillips*  
~~████████████████████~~

1. This is certification that during the Personnel interview with Mr. ~~██████████~~ on 7 Aug 58 he specifically stated that he did not want an SF-8 (Unemployment Compensation Program) sent to the DDP/NEA Division.

2. Subject coordinated with CCB 7 Aug 58 re: retirement (all services were being combined and sent to the CSC)

3. Subject had intention of checking B & C re: Hospitalization, Mutual Insurance & Conversion of FEGLI.

*Dorothy S. Kreinheder*  
Dorothy S. Kreinheder

11 August 1958

I receive from Central Intelligence Agency  
effective date of business Wednesday 13th  
of August, 1958.

David A. Johnson

4824 WASHBURN ST.  
FORT WORTH, TEXAS

**SECRET**

(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION										V to V		V to UV	
Mo	Da	Yr.											UV to V		UV to UV	
8	6	58														
1. Serial No.			2. Name (Last-First-Middle)				3. Date of Birth			4. Year, Pref.		5. Sex		6. CS - EOD		
			<i>Frank J. Dewall</i>				Mo Da Yr			Mo Da Yr		Mo Da Yr		Mo Da Yr		
							10 31 22			Mo Da Yr		Mo Da Yr		Mo Da Yr		
7. SCD			8. CSC Releas.		9. CSC Or Other Legal Authority			10. Appt. Affidav.		11. FEGLI		12. LCD		13. MIL. SERV. CREDIT, LCD		
Mo Da Yr			Yes - 1 Code					Mo Da Yr		Yes - 1 Code		Mo Da Yr		Yes - 1 Code		
			No - 2											No - 2		

**PREVIOUS ASSIGNMENT**

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP/NEA PROJECT ANNEX EGYPT & ARAB STATES BRANCH PROJECT PECCATE						BEIRUT, LEBANON					
16. Dept.-Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. Valid-Frgn.		Code		CPS. OFFICER (P)				REP 8127		GS 0136.31	
5											
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
14 3		\$ 11,835.00		DP		Mo Da Yr		Mo Da Yr		9-33-1-91-215	

**ACTION**

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
RESIGNATION*		Tot		8 13 58		REGULAR (SA)					

**PRESENT ASSIGNMENT**

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
33. Dept.-Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. Valid-Frgn.		Code									
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
		\$				Mo Da Yr		Mo Da Yr			

**SOURCE OF REQUEST**

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
FRANK J. DEWALL, JR., NEA/SS/PERSONNEL			
B. For Additional Information Call (Name & Telephone Ext.)			
Shirley M. Ryan ext. 6011			

**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>Ronald Gage</i>	12-13	D. Placement		
B. Pos. Control			E.		
C. Classification			F. Approved By	<i>Frank J. Dewall</i>	1/1/58
Remarks					
*See reverse side.					
Employee had following assignments - Security - Lebanon - CIA and together - Employee is being by the					



SECRET

STANDARD FORM 52 PREPARED BY THE U. S. GOVERNMENT PRINTING OFFICE WASHINGTON, D. C. 20540 GSA GEN. REG. NO. 27 MAY 1962 EDITION GSA GEN. REG. NO. 27	<b>UNVOUCHERED</b>
--	--------------------

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, initial(s), and surname) <b>[REDACTED] (P) David Phillips</b>	2. DATE OF BIRTH <b>31 Oct. 1922</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>16 May '57</b>
---	---	----------------	---

5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment (Staff Grade)</b>	6. EFFECTIVE DATE & PROPOSED: <b>30 April 1957 16 June 57 16 June 57</b>	7. C. S. OR OTHER LEGAL AUTHORITY
--	---	-----------------------------------

B. POSITION (Specify whether establish, change grade or title, etc.) <b>FROM - Ops. Off. (PP) BAF 125 GS-0136.31-14 \$10,535.00 p.a. DDP/WE Branch III HAVANA, CUBA - STAFF Havana, Cuba <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL</b>	8. POSITION TITLE AND NUMBER	9. SERVICE, GRADE AND SALARY	10. ORGANIZATIONAL DESIGNATIONS <b>TO - Ops. Off. (PP) BAF 125 GS-0136.31-14 \$10,535.00 p.a. DDP/NEA Egypt and Arab States Branch Project PECTATE Beirut, Lebanon <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL</b>
---	------------------------------	------------------------------	---

A. REMARKS (Use reverse if necessary)  
**Transferred from WAF/PP to NEA  
16 July 57  
16 June 57  
16 June 57**

B. REQUESTED BY (Name and title) <b>T. J. Hester, NEA/ADM/PERSONNEL</b>	D. REQUEST APPROVED BY <b>Signature: [Signature] Title: [Title]</b>
--	--

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Shirley Matthews ext. 8671</b>	13. VETERAN PREFERENCE SCORE: <input type="checkbox"/> OTHER: <input type="checkbox"/> 10 POINT <b>1000 12 June 57 1000 12 June 57 1000 12 June 57</b>	14. POSITION CLASSIFICATION ACTION NEW VICE L.A. PEAL <b>163 14 JUNE 57 SD-DP</b>
--	--	---

15. SECURITY FUNDS AVAILABLE: <b>M Charge 1743361-91-215</b>	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	19. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
---	--	--	--

20. STATE OF DEPARTMENTAL REMARKS  
**Present letter o.k. Per Klev. 8 July 57  
Havana taking care of equal. All outstanding.**

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A			
B CELL OR POS CONTROL	<b>MIS</b>	<b>25 JUN 57</b>	
C CLASSIFICATION	<b>not 57</b>	<b>21 June 57</b>	
G PLACEMENT OR EMPL	<b>[Signature]</b>	<b>16 JUN 57</b>	
E			

F. APPROVED BY  
**Louis W. [Signature]**



SECRET

STANDARD FORM 52 FORM 52 OF THE U.S. AIR FORCE COMMISSION REGULATIONS ON PERSONNEL SERIES, CHAPTER 2	UNVOICHERSED
--	--------------

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., etc. and name, initial(s), and surname) <i>Harold [unclear]</i>	2. DATE OF BIRTH 31 Oct 1922	3. REQUEST NO.	4. DATE OF REQUEST 7 May 1956
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment (Staff Agent)		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: JUN 3 1956	

FROM— Ops Officer (PP) EAF-125	A. POSITION TITLE AND NUMBER	TO— Ops Officer (PP) EAF-125
B. SERVICE, GRADE, AND SALARY		GS-0136.31-14 \$10320.00 p.a.
C. ORGANIZATIONAL DESIGNATIONS		DDP/AM Branch III HAVANA-CUBA STATION Havana, Cuba
D. HEADQUARTERS		
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL (DP)

A. REMARKS (Use reverse if necessary)  
New T/O

POSTED ON  
OF-AM  
7 May 56

USED IN LIEU OF SF50  
NOTIFICATION OF PERSONNEL ACTION

B. REQUESTED BY (Name and title) <i>Philip C. [unclear]</i>	C. REQUEST APPROVED BY Signature: _____ Title: _____
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <i>J. NOJANOVICH 7-1457</i>	

13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER SPT <input type="checkbox"/> 15 POINT <input type="checkbox"/> DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I A <input type="checkbox"/> REAL <input type="checkbox"/>
--	---

15. SEX M <input checked="" type="checkbox"/> W <input type="checkbox"/>	16. RACE W <input checked="" type="checkbox"/> N <input type="checkbox"/>	17. APPROPRIATION FROM: 6-3545-55-355 TO: Same	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
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21. STANDARD FORM 50 REMARKS

Approved CONCUR  
PP Career Series APPROVED  
1956

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR PASS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	CEB 5/17/56		
E.			
F. APPROVED BY <i>Alfred A. [unclear]</i>			

SECRET

STANDARD FORM 52  
 FORMS OBTAINED BY THE  
 U.S. GOVERNMENT PRINTING OFFICE  
 WASHINGTON 20540-OTR-100-100000  
 GPO: 1955 O-475-000

**REQUEST FOR PERSONNEL ACTION**

UNVOUCHERED

**REQUESTING OFFICE:** Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

<b>1. NAME (Mr., Miss, Mrs., One Word name, initials, and surname)</b> Miss <i>Marie [unclear]</i> ( [unclear] )	<b>2. DATE OF BIRTH</b> 31 Oct 1922	<b>3. REQUEST NO.</b>	<b>4. DATE OF REQUEST</b> 16 Jan 56
<b>5. NATURE OF ACTION REQUESTED:</b> <b>A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)</b> Excepted Appointment (Staff Agent)		<b>6. EFFECTIVE DATE A. PROPOSED:</b>	<b>7. C.S. OR OTHER LEGAL AUTHORITY</b>
<b>B. POSITION (Specify whether establish, change grade or title, etc.)</b>		<b>B. APPROVED:</b> FEB 7 1956	

<b>FROM—</b>  <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<b>8. POSITION TITLE AND NUMBER</b> <b>9. SERVICE, GRADE, AND SALARY</b> <b>10. ORGANIZATIONAL DESIGNATIONS</b> <b>11. HEADQUARTERS</b>	<b>TO—</b> Ops Officer (PP)    EAF-125 GS-0136.31-14 \$10,320.00 p.a. DDP/WH Havana, Cuba.
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL    (PP)

**A. REMARKS (Use reverse if necessary)**

<b>B. REQUESTED BY (Name and title)</b> <i>Frank [unclear] /WH</i>	<b>D. REQUEST APPROVED BY</b> Signature: _____ Title: _____
<b>C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)</b> P. C. POWERS	

<b>13. VETERAN PREFERENCE</b> NONE <input type="checkbox"/> WAR <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input checked="" type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. OTHER <input type="checkbox"/>	<b>14. POSITION CLASSIFICATION ACTION</b> NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> SD-DP
---	--

<b>15. SEX</b> M <input checked="" type="checkbox"/> W <input type="checkbox"/>	<b>16. RACE</b> W <input checked="" type="checkbox"/> O <input type="checkbox"/>	<b>17. APPROPRIATION</b> FROM: _____ TO: 6-3545-55-055	<b>18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)</b> Yes	<b>19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)</b>	<b>20. LEGAL RESIDENCE</b> <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: _____
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**21. STANDARD FORM 50 REMARKS**

Approved JAN 16 1956  
*[Signature]*  
 APPROVED Service  
 CONTRACT PERSONNEL DIVISION

<b>22. CLEARANCES</b> A _____ B CEIL OR POS CONTROL _____ C CLASSIFICATION _____ D PLACEMENT ON ENPL _____ E _____	INITIAL OR SIGNATURE _____ DATE _____ 23 JAN 23 1956 11/8/56	<b>REMARKS</b> Effective: FEB 7 1956 _____ _____ _____ _____ _____ _____ _____
---	---	--

**F. APPROVED BY**  
*[Signature]*

STANDARD FORM 52  
 FORM BATED BY THE  
 U. S. CIVIL SERVICE COMMISSION  
 JANUARY 1956 - FEDERAL PERSONNEL  
 MANUAL, CHAPTER 11

**REQUEST FOR PERSONNEL ACTION**

**BOUCHERED**

**REQUESTING OFFICE:** Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname) <b>Mr. David A. PHILLIPS</b>		2. DATE OF BIRTH <b>31 Oct 1922</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>1956 16 January 1</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Resignation</b>		6. EFFECTIVE DATE A. PROPOSED:		7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <b>FEB 6 1956</b>		<b>AD</b>

FROM— <b>Ops Officer BW-229</b> <b>GS-0136, 31-14 \$10,320.00 p.a.</b> <b>DDP/PP Operations Staff</b> <b>Information Coordination Division</b> <b>Office of the Chief</b> <b>Washington, D. C.</b>	9. POSITION TITLE AND NUMBER	TO—
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	10. SERVICE, GRADE, AND SALARY	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL
	11. ORGANIZATIONAL DESIGNATIONS	
	12. HEADQUARTERS	
	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)  
*Concurred on with Mr. Sinafor Chief/ICD/PP by phone 3 Feb 1956.  
 To seek other employment. H.L.W.*

B. REGISTERED BY (Name and title) <i>Harold J. ...</i>	D. REQUEST APPROVED BY Signature: _____ Title: _____
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>P. C. BOWERS X 4457</b>	

13. VETERAN PREFERENCE NONE: WWII OTHER: 5-PT. 10-POINT <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW VICE T A REAL <b>SD-OP</b>
--	---

15. SEX <b>M</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>6-2105020</b> TO:	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
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21. STANDARD FORM 50 REMARKS  

Approved by \_\_\_\_\_  
 per F. Bear, Jr 18 Jan '56

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS CONTROL		<b>23 JAN 1956</b>	
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.	<i>DE</i>	<i>1/18/56</i>	
E.			

F. APPROVED BY  
*per F. Bear, Jr 18 Jan '56*

STANDARD FORM 52  
 FORM 4472 (Rev. 1-55)  
 U. S. GOVERNMENT PRINTING OFFICE  
 WASHINGTON 20540  
 GSA GEN. REG. NO. 27  
 (4-58)

**REQUEST FOR PERSONNEL ACTION**

**VOUCHERED**

**REQUESTING OFFICE:** Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname) <b>MR. DAVID A. PHILLIPS</b>	2. DATE OF BIRTH <b>31 Oct '22</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>16 Sept. '55</b>
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>REASSIGNMENT (CORRECTION)</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED <i>[Signature]</i>	

FROM— Paramilitary Off. BW-156 GS-0136.11-14 <del>19600</del> p/a <i>10,320</i> DDP/PP Operations Staff Office of the Chief Washington, D. C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	10. POSITION TITLE AND NUMBER 11. SERVICE GRADE AND SALARY 12. ORGANIZATIONAL DESIGNATIONS 13. HEADQUARTERS 14. FIELD OR DEPARTMENTAL	TO— Ops Officer BW-229 GS-0136.31-14 <del>19600</del> p/a <i>10,320</i> DDP/PP Operations Staff Information Coordination Div. Office of the Chief Washington, D. C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
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A. REMARKS (Use reverse if necessary)  
**To correct allotment number shown in action effective 14 Aug '55**

B. REQUESTED BY (Name and title) <i>[Signature]</i> <b>Laura E. Keen, AC/PP/Admin</b>	D. REQUEST APPROVED BY Signature: _____ Title: _____
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Frances A. Taylor - x-8606</b>	

15. VETERAN PREFERENCE NAME: _____ GRADE: _____ JOINER: <input checked="" type="checkbox"/> SPT: _____ POINT: _____ REAR: _____ OTHER: _____	16. POSITION CLASSIFICATION ACTION NEW: _____ VICE: _____ L.A.: _____ REAL: _____ <b>SD:DP</b>
17. APPROPRIATION FROM: <b>6-2101-20</b> TO: <b>6-2105-20</b> <i>Cont'd</i>	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) <b>Yes</b>
19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSION ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <i>Calif</i>

Approved **SEP 20 1955**  
*[Signature]*  
 PP/Career Services

CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A			
B. CER. OR POS CONTROL		<i>SA 3 24 Sept</i>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>SA 21 Sept 55</i>		
E			

F. APPROVAL ON  
*[Signature]* per *[Signature]* 22 Sept 55

STANDARD FORM 52  
 PREPARED BY THE  
 U. S. GOVERNMENT PRINTING OFFICE  
 SUBJECT: FEDERAL PERSONNEL  
 MANUAL CHAPTER 9

VOUCHERED

## REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) <b>MR. DAVID <del>SMITH</del> PHILLIPS</b>	2. DATE OF BIRTH <b>31 Oct. 1922</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>1 July 1955</b>
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <b>14 Aug 55</b>	

FROM - Paramilitary Off. - BW-156 <b>GS-0136.11-14</b> <sup>10 320</sup> <del>\$9600</del> p/a	9. POSITION TITLE AND NUMBER	TO - Ops Officer <b>BW-229</b>
DDP/PP Operations Staff Office of the Chief  Washington, D.C.	10. SERVICE GRADE AND SALARY	<b>GS-0136.31-14</b> <sup>10 320</sup> <del>\$9600</del> p/a
	11. ORGANIZATIONAL DESIGNATIONS	DDP/PP Operations Staff Information Coordination Div. Office of the Chief
	12. HEADQUARTERS	Washington, D.C.
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

For record purposes only

Approved JUL 14 1955  
*N. M. Taylor*  
 PP/Career Service

B. REQUESTED BY (Name) <i>Jeanne K. Letellier</i> <b>Jeanne K. Letellier, C/PP/Admin</b>	D. REQUEST APPROVED BY <i>N. M. Taylor</i> <b>PP/Career Service</b>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Frances A. Taylor, x 8606</b>	E. TITLE

13. VETERAN PREFERENCE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NONE</td> <td>WAR</td> <td>OTHER 5 PT.</td> <td>10 POINT</td> </tr> <tr> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td>DISAB OTHER</td> </tr> </table>	NONE	WAR	OTHER 5 PT.	10 POINT			<input checked="" type="checkbox"/>	DISAB OTHER	14. POSITION CLASSIFICATION ACTION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NEW</td> <td>VICE</td> <td>E.A.</td> <td>REAL</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="text-align: right;"><b>SD-DP</b></p>	NEW	VICE	E.A.	REAL				
NONE	WAR	OTHER 5 PT.	10 POINT														
		<input checked="" type="checkbox"/>	DISAB OTHER														
NEW	VICE	E.A.	REAL														
15. SEX <b>M</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>5-2101-20</b> TO: <b>6-2101-20</b>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>NO</b>	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) <b>27 Apr 55</b>	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>CA</b>												

21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A			
B. CEIL OR POS CONTROL	<i>JKL</i>	<i>27 Jul 55</i>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>7-B</i>	<i>8-1</i>	
E			

F. APPROVED BY  
*[Signature]* per *Beary* 14 Aug 55

SECRET

ENTRANCE ON DUTY NOTICE		1. DATE 7 June 1955
TO: Frac Taylor		DDP/PP
2. NAME (LAST) (FIRST) (MIDDLE) Phillips, David A.		
3. EFFECTIVE DATE OF ACTION 1 April 1955		4. POSITION TITLE AND GRADE Paramilitary Off. GS-14
5. TYPE CLEARANCE Full		6. OTHER: <input type="checkbox"/> REASSIGNMENT
7. REMARKS: (For the protection of other limitations)		
H. G. Reynolds <i>sep</i>		
DISTRIBUTION: ORIGINAL AND COPY (WHITE) TO ITEM NO. 3. COPY (PINK) TO PERSONNEL FOLDER		

FORM NO. 37-118 PREVIOUS EDITIONS NOT TO BE USED  
NOV 1952

SECRET

CONFIDENTIAL

REQUEST FOR PRE-EMPLOYMENT MEDICAL EVALUATION		1. DATE 1/7/55
2. NAME (LAST) (FIRST) (MIDDLE) Phillips, David Allen		3. SUSPENSE DATE (10 WORKING DAYS)
4. ORGANIZATIONAL ASSIGNMENT DDP/PP	5. POSITION TITLE (and grade) Paramilitary Off. GS-14	6. PERSONNEL DIVISION <input type="checkbox"/> Overt <input type="checkbox"/> Covert
7. THE MEDICAL OFFICE IS REQUESTED TO CHECK THE DESIRED ACTION, RETURNING THE ORIGINAL COPY OF THIS FORM TO THE APPROPRIATE PERSONNEL DIVISION NO LATER THAN THE SUSPENSE DATE INDICATED IN ITEM NO. 3.		
A <input checked="" type="checkbox"/> Approve processing for E.O.D.    B <input type="checkbox"/> Hold pending receipt of additional medical information (form letters attached)    C <input type="checkbox"/> Request pre-employment medical examination		
D <input type="checkbox"/> Rejected for medical reasons		
8. Remarks:  This (approval) <del>request</del> supersedes the previous (hold) <del>approval</del>		
<i>Hasfelder</i>		<i>James M. Shandy, Jr.</i> SIGNATURE FOR MEDICAL OFFICE

FORM NO. 37-163  
FEB 1953

CONFIDENTIAL

[ CONFIDENTIAL ]

REQUEST FOR PRE-EMPLOYMENT MEDICAL EVALUATION		1. DATE 30 March 1955
2. NAME (LAST) (FIRST) (MIDDLE) Phillips, David Allen		3. SUSPENSE DATE (10 WORKING DAYS)
4. ORGANIZATIONAL ASSIGNMENT DDP/PP	5. POSITION TITLE (and grade) Paramilitary Off. GS-14	6. PERSONNEL DIVISION <input checked="" type="checkbox"/> Overt <input type="checkbox"/> Covert
7. THE MEDICAL OFFICE IS REQUESTED TO CHECK THE DESIRED ACTION, RETURNING THE ORIGINAL COPY OF THIS FORM TO THE APPROPRIATE PERSONNEL DIVISION NO LATER THAN THE SUSPENSE DATE INDICATED IN ITEM NO. 3.		
A <input type="checkbox"/> Approve processing for E.O.D.    B <input checked="" type="checkbox"/> Hold pending receipt of additional medical information (form letters attached)    C <input type="checkbox"/> Request pre-employment medical examination		
D <input type="checkbox"/> Rejected for medical reasons		
8. Remarks: ADDITIONAL MEDICAL INFO ON: (6-55) Trench mouth or pyorrhea Bad wetting after 6 years of age.		

CONFIDENTIAL

REQUEST FOR SECURITY CLEARANCE		REFERENCE NO.
		SR-6038-PP
		31
		29 March 1955
FULL NAME	EMPLOYER	YEAR OF BIRTH
Phillips, David	Atlee	1922
POSITION TITLE	GRADE	CODE
Paramilitary Off. PP PW-156-11	GS-11	
LOCATION (OFFICE)	DIVISION	BRANCH
DDP/PP	Operations Staff	Office of Chief
GEOGRAPHIC DESTINATION (CITY AND STATE OR COUNTRY, AS APPLICABLE)		
Washington, D. C.		
TYPE OF EMPLOYEE		
1. <input type="checkbox"/> OTHER		
2. <input checked="" type="checkbox"/> REGULAR		
3. <input type="checkbox"/> CONTACT		
4. <input type="checkbox"/> CONSULTANT		
5. <input type="checkbox"/> MILITARY		
FUNDS		
<input type="checkbox"/> VOUCHERED <input type="checkbox"/> UNVOUCHERED		
TYPE(S) OF SECURITY CLEARANCE REQUESTED		
<input type="checkbox"/> PROVISIONAL (FCM) (show name of pool or group)		
<input type="checkbox"/> SECRET		
<input checked="" type="checkbox"/> FULL		
<input type="checkbox"/> WAIVER		
AVAILABILITY DATE (MM-DD-YY)	EST. CLEARANCE DATE (MM-YY)	RECRUITMENT SOURCE
ASAP		
SEX AND VETERAN STATUS	1. <input type="checkbox"/> M-V	3. <input type="checkbox"/> F-V
	2. <input checked="" type="checkbox"/> M-NV	4. <input type="checkbox"/> F-NV
REMARKS:		
NO CORRECTION		
Attachments:		
FMS 1 (SO) 1 (otf)		
Appenl. 6-II-1		
Photos.		
H. G. Reynolds		ep
Director of Personnel		

UNCLASSIFIED

CONFIDENTIAL

SECRET

### ROUTING AND RECORD SHEET

**INSTRUCTIONS:** Officer designations should be used in the "TO" column. Under each comment a line should be drawn across sheet and each comment numbered to correspond with the number in the "TO" column. Each officer should initial (check mark insufficient) before further routing. This Routing and Record Sheet should be returned to Registry.

FROM: <i>PP/CS</i>		TELEPHONE NO.
		DATE: <i>3 March 55</i>

TO	ROOM NO.	DATE		OFFICER'S INITIALS	TELEPHONE	COMMENTS
		REC'D	FOR'D			
<i>CS/CSP</i>	<i>2001 L1</i>	<i>3/3</i>	<i>3/3</i>	<i>F</i>		<p><i>2. Do suggest was approved on behalf of 2001 CS/CSP and circulate a brief sheet for the info of all members.</i></p> <p><i>2 &amp; 3 agree.</i></p> <p><i>J</i></p>
<i>W. Carroll</i>		<i>3 March</i>	<i>3 March</i>	<i>J</i>		
<i>Ledford</i>		<i>3/4</i>	<i>3/17</i>	<i>BW</i>		
<i>P. R. D. Curie</i>						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						



STANDARD FORM 52  
 PROVIDED BY THE  
 U. S. GOVERNMENT PRINTING OFFICE  
 WASHINGTON, D. C. 20540

VOUCHERED

**REQUEST FOR PERSONNEL ACTION**

REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr. -- Miss -- Mrs. -- One given name, initial(s), and surname)		2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
MR. DAVID ATLEE PHILLIPS		31 October 1922		4 Feb. '55
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)			6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
EXCEPTED APPOINTMENT			1 April 1955	
8. POSITION (Specify whether establish, change grade or title, etc.)			8. APPROVED:	

FROM—	9. POSITION TITLE AND NUMBER	10. Paramilitary Off. <sup>PP</sup> BW-156-14
	10. SERVICE, GRADE, AND SALARY	GS-0136.11-14 \$9600 p/a
	11. ORGANIZATIONAL DESIGNATIONS	DDP/ <sup>PP</sup> Operations Staff Office of the Chief
	12. HEADQUARTERS	Washington, D.C.
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)  
 For slotting purposes only pending approval of new T/O

*[Signature]*  
 John E. Baker, C/PP

B. REQUESTED BY (Name and title)	D. REQUEST APPROVED BY
Jeanne K. Letellier, C/PP/Admin	<i>[Signature]</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)	Title:
Frances A. Taylor, x 8606	Career Service:PP

13. VETERAN PREFERENCE	14. POSITION CLASSIFICATION ACTION
NONE <input type="checkbox"/> WAR <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT <input type="checkbox"/> 10 POINT <input type="checkbox"/> 15 POINT <input type="checkbox"/>	NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>
	<i>1/6 Seaford, CS/PP/NO SD:PP D</i>

15. SEX	16. RACE	17. APPROPRIATION FROM	18. SUBJECT TO C. S. RETIREMENT ACT (YES--NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE
M	W	TO 5-2101-20			<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:

21. STANDARD FORM 50 REMARKS

Approved MAR 2 1955  
*[Signature]*  
 PP/Career Service

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. CEIL. OR POS. CONTROL	EH	3/24	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	EH	3/15/55	
E.			

F. APPROVED BY *Robert A. Stricklin by John J. Caldwell*

UNCLASSIFIED

CONFIDENTIAL

SECRET

ROUTING AND RECORD SHEET

INSTRUCTIONS: Officer designations should be used in the "TO" column. Under each comment a line should be drawn across sheet and each comment numbered to correspond with the number in the "TO" column. Each officer should initial (check mark insufficient) before further routing. This Routing and Record Sheet should be returned to Registry.

FROM:				TELEPHONE	NO.	
PP/Admin						
				DATE		
				7 February 1955		
TO	ROOM NO.	DATE		OFFICER'S INITIALS	TELEPHONE	COMMENTS
		REC'D	FWD'D			
1. C/PP	2032 K	PED	21 Feb 1955	JBL		Contract will be terminated effective April 55
2. CS/PP						
3. CS/CS	2031 L		29 Feb			3 to 4.
4. PP/CMO	2405 K					Dwight, Per our telephone conversation, I feel that our Career System should provide for the review of such cases from the point of view of: (a) Bringing someone in at this grade level (b) Whether the person's background & experience indicate that he should be picked up under the jurisdiction of a specialist panel or the CS Panel. It seems to me that such review could be the responsibility of the CS Panel or of the functional Panel concerned. The latter seems to make most sense. Could you review this one in PP form that point of view and let me know how you folks feel on the policy questions?
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

SECRET

11 DEC 1957

MEMORANDUM FOR: Chief, Finance Division

SUBJECT: Equalization Allowance Adjustment  
for ~~XXXXXXXXXX~~

*Harold Phillips*

1. Effective 15 December 1957, subject individual's equalization allowance is decreased from \$950 to \$555 per annum due to a decrease in the cost of living at subject's post as compared with Washington, D. C.

2. All other terms and conditions of the original authorization remain in full force and effect.

SIGNED

Louis W. Armstrong  
Chief, Contract Personnel Division

Distribution:

- Orig. and 1 - Addressee
- 2 - NEA Division
- 2 - CPD

OP/CPD:HSurles:ahw (9 Dec 57)

SECRET

S-E-C-R-E-T  
(When Filled In)

27 JUN 1957

MEMORANDUM FOR: Chief, Contract Personnel Division  
ATTENTION :  
FROM : Deputy Director of Security (Investigations  
and Support)  
SUBJECT : ~~XXXXXXXXXXXXXXXXXXXX~~  
*Special Phillips*

1. Reference is made to the memorandum dated 18 June 1957 in which a covert security clearance was requested to permit the Subject's conversion from an Ops Officer (FP), GS-14, DDP/WH, Branch III, Havana, Cuba, to an Ops Officer (PF), GS-14, DDP/NEA, Egypt and Arab States Branch, Project PECTATE, Beirut, Lebanon.
2. In accordance with the provisions set forth in the Director's Memorandum of 14 February 1949 entitled, "Security and Operational Clearances," a covert security clearance is granted for the use of the Subject, as described in your request as set forth in paragraph 1, above. For administrative purposes only, this clearance is effective as of 15 June 1957.
3. Subjects of covert security clearances are not to represent themselves as, nor are they to be represented as, employees of CIA.
4. Your attention is called to the fact that a covert security clearance does not constitute complete compliance with the provisions of CIA Regulation 10-210. Therefore, if you should desire at a later date to change the status or use of this individual, a request for clearance to cover any proposed change should be submitted to this office.
5. This clearance becomes invalid in the event the Subject's services are not utilized within 60 days of the date of this memorandum.

FOR THE DIRECTOR OF SECURITY:

*Robert H. Cunningham*  
Robert H. Cunningham

S-E-C-R-E-T

S E C R E T

Date: 18 June 1957

MEMORANDUM FOR: Chief, Special Security Division

FROM : Chief, Special Contracting, Allowances & Processing Staff, Wing 2F, Curtis Hall

SUBJECT : David Phillips (P); Your Number 40696

1. In compliance with paragraph four (4), your memorandum dated                     , subject as above, clearance to cover the following proposed change in subject's status and/or use is hereby requested:

Ops Officer(PP)	Position Title	Ops. Off(PP)
GS-14	Grade & Salary	GS-14
DDP/WH Branch III	Orgn Designation	DDP/NEA Egypt & Arab States Branch Project PECTATE
Havana, Cuba	Headquarters	Beirut, Lebanon
( ) Field      ( ) Dept'l	Field or Hqtrs.	( ) Field      ( ) Dept'l

2. Changes other than specified above:

Cover is Commercial

Case Officer: Robert S. Goraliski X3548

3. The proposed effective date of this change is: 16 June 1957 (For Financial

and Administrative reasons.

Please phone verbal concurrence to Det Kreinheder X3585

LOUIS W. ARMSTRONG  
~~XXXXXXXXXXXXXXXXXX~~

*Verbal Concurrence  
Granted by Mr Godar  
21 June 57*

S E C R E T

SECRET

28 FEB 1957

MEMORANDUM FOR: Chief, Finance Division

SUBJECT: Equalization Allowance Adjustment for

~~XXXXXXXXXX~~  
*Phillips, Howard*

1. Effective 13 January 1957, subject individual's equalization allowance is decreased from \$3780 to \$3145 per annum due to a reduced cost of living index for subject's post.

2. All other terms and conditions of the original authorization remain in full force and effect.

SIGNED

RALPH S. POLLOCK  
Chief, Contract Personnel Division

elt-28 Feb 57

Distribution:

Original and 1: FD

2: WH Div

1: Subject File

1: Chrono File

1: Equal Allow File

1: my copy

SECRET

26 April 1957

MEMORANDUM FOR: Deputy Director for Investigations  
& Operational Support

THROUGH : Contract Personnel Division  
*Thomas Lane*

SUBJECT : ~~Thomas Lane~~ - Change of  
Pseudonym

REFERENCE : Memorandum for Deputy Director for Investigations  
& Operational Support, through, Contract Personnel  
Division, from this office, dated 26 April 1957

Due to a compromise, the pseudonym of Paul D. LANGEVIN has been  
changed. Please refer to reference for new pseudonym.

/s/ J. C. KING  
Chief, WHD

Distribution -

See  
Personnel

File

Chrono - Statistics

allowance Staff

Selection .. 00

Res

SECRET

SECRET

26 April 1957

MEMORANDUM FOR: Deputy Director for Investigations  
& Operational Support

THROUGH: Contract Personnel Division

SUBJECT: ~~XXXXXXXXXX~~ *Phillips, Harold*  
New Pseudonym

REFERENCE: Memorandum for Deputy Director for Investigations  
& Operational Support, through, Contract Personnel  
Division, from this office, dated 26 April 1957

The pseudonym of subject of reference has been changed to

~~XXXXXXXXXX~~  
*Harold Phillips*

J. C. KING  
Chief, WMD

SECRET



MEMORANDUM FOR: Chief, Finance Division

SUBJECT: Equalization Allowance Adjustment for

~~██████████~~  
*Phillips, Harold*

1. Effective 7 October 1956, subject individual's equalization allowance is increased from \$3670 to \$3780 per annum.

2. All other terms and conditions of the original authorization remain in full force and effect.

RALPH S. POLLOCK  
Chief, Contract Personnel Division

SECRET

3 JUL 1957

**MEMORANDUM FOR:** Chief, Finance Division

**SUBJECT:** Equalization Allowance for

*Philip David*

1. Subject individual is authorized an equalization allowance at the rate of \$950 per annum upon his arrival at Beirut, Lebanon.

2. All other terms and conditions of the original authorization remain in full force and effect.

10

Louis W. Armstrong  
Chief, Contract Personnel Division

Distribution:

- Orig. and 1 - FD
- 2 - NEA
- ✓ 1 - Subject File
- 1 - Equal Allow File
- 1 - Chrono
- 1 - Extra

aih - 2 July 1957

SECRET

619

CLASSIFIED MESSAGE

ORIG : P. C. BOWERS  
UNIT : WH/PLSS  
CIT : 4457  
DATE : 8 FEBRUARY 1956

19  
**SECRET**

FOOTING	
1	2
2	3
3	4

TO : HAVANA, CUBA  
FROM : DIRECTOR  
CCNF : WH 5  
INFO : FI/ADMIN, FI/RI 2, OP 2, S/C 2

SA

DIR 46833 (OUT 67172) 2146Z 8 FEB 56

FOUNDED  
PRECEDENCE  
CITE: DIR

TO: HAVA  
RE: DIR 30629 (OUT 86720)

*David Phillip*

~~ARR HAVA 1440 HRS 9 FEB PAA 436 WITH FAMILY.~~

END OF MESSAGE

*J. C. King*  
J. C. KING  
RELEASING OFFICER

*H. J. Preston*  
H. J. PRESTON  
COORDINATING OFFICER

**SECRET**

*O. H. Doncklecker*  
O. H. DONCKLECKER  
AUTHENTICATING OFFICER

IT IS FORBIDDEN TO MAKE A COPY OF THIS MESSAGE Copy No.

SECRET

## Office Memorandum • UNITED STATES GOVERNMENT

TO : Chief, Contract Personnel Division DATE: MAR 20 1956

FROM : Deputy Director of Security (Investigations and Support)

SUBJECT: ~~XXXXXXXXXXXXXXXXXXXX~~  
~~XXXXXXXXXXXX~~*Philip Herold*

1. Reference is made to your request dated 20 January 1956 for a Covert Security Clearance to permit appointment of Subject to Staff Agent/operations officer at Havana, Cuba.

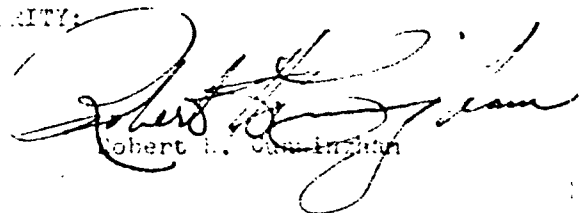
2. In accordance with the provisions set forth in the Director's Memorandum of 14 February 1949 entitled, "Security and Operational Clearances," a covert security clearance is granted for the covert use of the Subject, as described in your request as set forth in paragraph 1, above. This will confirm the Covert Security Clearance granted telephonically to Mr. Ken Wambold, CPD x-3585 on 26 January 1956.

3. Subjects of covert security clearances are not to represent themselves as, nor are they to be represented, as, employees of CIA.

4. Your attention is called to the fact that a covert security clearance does not constitute complete compliance with the provisions of CIA regulation 10-210. Therefore, if you should desire at a later date to change the status or use of this individual, a request for clearance to cover any proposed change should be submitted to this office.

5. This clearance becomes invalid in the event the Subject's services are not utilized within 60 days of the date of this memorandum.

FOR THE DIRECTOR OF SECURITY:



Robert L. Caspary

SECRET

**SECRET**  
(When Filled In)

REQUEST FOR SECURITY CLEARANCE						REQUEST NO. (1-3)
						REQUEST DATE (6 III) 20 Jan 1956
NAME (LAST - FIRST - MIDDLE) <del>XXXXXXXXXXXXXXXXXXXX</del> David Phillips						YEAR OF BIRTH (29-50) 31 Oct 1922
POSITION TITLE Operations Officer (OP)			POSITION #, BRANCH (31 - 36)	OCCUP. CODE (37 - 42)		GRADE (43-44) S-14
LOCATION (CITY, STATE, COUNTRY) Havana, Cuba			ASSIGNMENT (OFFICE, DIVISION, BRANCH) DDP/WP		ORGR. CODE (45-49)	
TYPE OF APPLICANT		REGULAR	CONSULTANT	CONVERSION ACTION	IF OTHER, SPECIFY:	
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	SE to SA		
NAME OF REQUESTER John S. Collock, CPO		TYPE OF ASSIGNMENT AND FUNDS			MOTELS & FUND (50)	
		MOS	USF	FF	V	UV
CLEARANCE REQUIRED		PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP): CONFIDENTIAL SECURITY CLEARANCE				CLEARANCE (51) SECRET FULL
ATTACHMENTS		PERSONAL HISTORY STATEMENT	APPENDIX I	REQUEST FOR WAIVER		RECRUIT. CODE (52-54)
		PHOTOGRAPH(S)	APPENDIX II	REPORT OF INTERVIEW		
VETERANS STATUS		MALE - VETERAN	FEMALE - VETERAN		VET. PREF. & SEX (55)	
		MALE - NON-VETERAN	FEMALE - NON-VETERAN			
REMARKS: Security #40696 Review approval granted by Capt. [unclear] [unclear] 550. [unclear] 56. [unclear]						
SPACE BELOW FOR SO USE ONLY						

CLASSIFIED MESSAGE

DATE : 021 08/11K/A.M  
3 MAY 57

S-E-C-R-E-T

ROUTING	
1	4
2	5
3	6
MAY 3 1231Z 57	
ROUTINE	
IN 39082	

TO : DIRECTOR  
 FROM : BEIRUT  
 ACTION: NEA 6  
 INFO : FI/OPS 2, FI/RI 2, FD 3, OP 2, S/C 2

TO DIR INFO SA CITE BEIR 3537

PECTATE

*Phillips*  
 AND FAMILY ARRIVED 30 APRIL.

END OF MESSAGE

*File  
 K66*

S-E-C-R-E-T

IT IS FORBIDDEN TO MAKE A COPY OF THIS MESSAGE

Copy No.

CLASSIFIED MESSAGE

200 HM/JM/BJ  
DATE 30 APR 57

200

SECRET

ROUTING			
1		4	
2		5	
3		6	
APR 30 10 08 57 REC'D CABLE SECT.			
PRIORITY			
IN 37747			

TO DIRECTOR  
 FROM HAVANA  
 ACTION WH 5  
 INFO FI/OPS 2, FI/RI 2, NEA 4, OP 2, S/C 2

TO PRITY DIR INFO: BEIR CITE HAVA 900  
 ADMIN

*David Phillips*  
~~XXXXXXXXXX~~ AND FAMILY DEPARTED HAVA CUBANA FLIGHT  
 998 0800 HOURS 29 APR ETA BEIRUT 2100 HOURS 30 APR BEIRUT TIME  
 PAA FLIGHT 64.

END OF MESSAGE

*Clara*  
*1160*

SECRET

SECRET

**BIOGRAPHIC PROFILE (PART I)** SCD: 15 Jan 1974

NAME: PHILLIPS, David Algeo

SEX: M DATE OF BIRTH: 31 Oct 1922

MARITAL STATUS: Remarried DEPENDENTS: 7

MEMBERSHIP: Non-Service OTHER STATUS: None

LAST REG. APP. QUAL. FOR: Dns 1969

PROB. PCS: O/S EVAL. FOR: PCS O/S

ASSESSMENT DATE: None PROFESSIONAL TEST DATE: None LANGUAGE ATTITUDE TEST DATE: None

**15. NON-CIA EMPLOYMENT**

1942-43 Self-employed, Actor  
 1943-45 Military Service, USAR, S/Sgt  
 1949-54 "The South Pacific Mail" (News Paper), Santiago, Chile, - Owner-editor, Publisher, Lecturer

**16. NON-CIA EDUCATION**

1940-41 College of William & Mary, Williamsburg, Va - Drama, English  
 1941-42 Texas Christian Univ, Ft Worth, Texas - Drama, English  
 1948 Univ of Chile, Santiago, Chile - Spanish

**17. FOREIGN LANGUAGE ABILITIES**

French-R, Elem; W. Slight (Jun 1961); P, S, U, Slight; T, None - Oct '57 (Sis exp)  
 Spanish, New World - R High; W, P, S, U Inter (Sep 1969) Transl & Interpret  
 Portuguese (Brazilia) - R Inter (Dec 1969)

**18. AGENCY SPONSORED TRAINING**

1955 Reading Improvement 1971 Wpas/ Defensive Driving  
 1965 CDS Seminar  
 1969 Short Range Agt Cont Surv  
 1969 Portuguese  
 1969 CDS Sem

**19. CIA EMPLOYMENT HISTORY SINCE 16 SEPT 1947 (Personnel Actions, Military Orders, and Criminal Convictions)**

EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE/GRADE	ED	ORGANIZATION & ORG. TITLE (If any)	LOCATION
	1952-53 Contract Agent		WH/Santiago, Chile	Santiago
	1954-55 Contract Employee		WH	Guatemala
Apr 1955	Para Mil Off 0136.11 14 D		DDP/PP Ops Stf	Hq
Aug 1955	Ops Officer 0136.31 14 DP		DDP/PP Ops/Info Coord Div	"
Feb 1956	Ops Off (PP) 0136.31 14 EP		DDP/WH TII/Havana Cuba Sta	Havana
Apr 1957	" " " 0136.31 14 EP		DDP/WH/EAS Br/Proj/ECRATE	Esirub
	1956-60 Contract Agent (Independent)		DDP/WH	Havana
Mar 1960	Ops Off 0136.01 14 D		DDP/CS Dev Comp/WH	Hq
Apr 1960	" " " 0136.01 14 D		DDP/WH-4	"
Sep 1961	" " " 0136.01 14 D		DDP/WH-3/Mexico Sta	Mexico City
Oct 1963	" " " 0136.01 15 D		" " " " " " "	"
Jan 1965	Chief of Station 0136.05 15 D		DDP/WH-2/Don Rep Sta/COS	Santo Domingo
Sep 1967	Ops Off 0136.01 15 D		DIP/WH/Cn, Cuban Ops Group	Hq
Dec 1968	" " " 0136.01 16 D		" " " " " " "	"
Jan 1970	Chief of Sta 0136.05 16 D		DIP/WH/Br-5/COS	Rio de Janeiro
Jul 1971	" " " 0136.05 16 D		" " " " " " "	Brazilia
Nov 1971	" " " 0136.05 17 D		" " " " " " "	"
Aug 1972	" " " 0136.05 17 D		DDP/WH-3/Venezuela Sta	Caracas

DATE REVISION: 5 Jun 1974

BY: [Signature]

22 Jun 1970

SECRET

PROFILE



SECRET  
(When Filled In)

PARA. SERIAL NO. 000000 BIOGRAPHIC PROFILE (Continuation Sheet)

NAME (Last-First-Middle) PHILLIPS, David Ailee DATE OF BIRTH 31 Oct 1922

[Large empty rectangular area for biographic profile details]

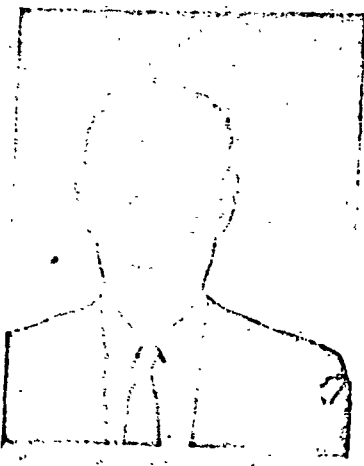
19. CIA EMPLOYMENT HISTORY SINCE 18 SEPT. 1947 (Personal Actions, Military Orders, and Principal Details) (Cont'd.)

EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SE	ORGANIZATION & ORGAN. TITLE (If any)	LOCATION
Jun 1973	Ch. WH Div 0001.10	17	I	DDO/Chief, WH Division	Hq
Dec 1973	" " " 0001.10	18	D	" " " " "	"

DATE REVISOR Jun 1974

PROFILE REVIEWED BY hrs/ul

SECRET  
(When Filled In)

PERSONAL NO. 004549		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) PHILLIPS, David A. Joe		DATE OF BIRTH 31 Oct 1922	
			
24. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL  SEE COVER HISTORY ATTACHED.			
25. ADDITIONAL INFORMATION Award 1958 Intelligence Medal of Merit for his outstanding dedication and devotion to the cause of freedom, during the period Jan - Jul 1954. Commendation 1961 from DCI for loyal and devoted performance while serving with JMATS. Awarded 1960 Intelligence Medal of Merit for outstanding dedication and devotion to the cause of freedom. Appreciation 1962 from US Ambassador, Mexico City conveying President Kennedy's thanks to Embassy Staff who contributed to success of his Mexican visit. Appreciation 1966 from CMBR, USFORDOMREP for outstanding contribution in the accomplishment of USFORDOMREP Intelligence missions 1 May 1965 - 17 Jan 1966. Commendation 1966 from the DCI for especially meritorious service during the past year by members of the Dominican Republic Station. Commendation from DDCI for services rendered during the crisis while TDY in the Dominican Republic Station. Appreciation 1968 from former President of the Dominican Republic, to Deputy Director, Voice of America, USIA, for Subject's able and effective representation of the United States during turbulent events in the country three years ago. Appreciation 1969 from Ch, DOD for briefing the DO Base Chiefs' Conference - 17 Feb 1969.			
26. DATE REVIEWED 5 Jun 1974		27. PROFILE REVIEWED BY hms/cal	

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		27 July 1973	2500
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP	391-24-1032	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	024345	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) WH		
ATTN:	Chief Support Staff	OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> DISCONTINUED
REF:	Form 1322 dated 7 Jun 73		
SUBJECT	PHILLIPS, DAVID A.	UNIT	
<b>KEEP ON TOP OF FILE WHILE COVER IS EFFECTIVE</b>			
<input checked="" type="checkbox"/>	ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE:	
<input checked="" type="checkbox"/>	BASIC COVER PROVIDED EFFECTIVE DATE EOD	SUBMIT FORM 3254 _____ B-2 TO BE ISSUED. (HR 20-11)	
<input type="checkbox"/>	OPERATIONAL COVER PROVIDED FOR _____ TOY _____ OTHER (Specify)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HR 20-7)	
<input checked="" type="checkbox"/>	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HR 20-7)	EAA: CATEGORY I	CATEGORY II
<input checked="" type="checkbox"/>	SUBMIT FORM 3254 _____ B-2 TO BE ISSUED. (HR 20-11)	RETURN ALL OFFICIAL IDENTIFICATION TO CCS	
<input checked="" type="checkbox"/>	SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 20-11)	SUBMIT FORM 2686 FOR _____ HOSPITALIZATION CARD	
<input checked="" type="checkbox"/>	SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-20)	DO NOT WRITE IN THIS BLOCK	
<input checked="" type="checkbox"/>	EAA: CATEGORY I	CATEGORY II	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	SUBMIT FORM 2686 FOR AGE HOSPITALIZATION CARD		
REMARKS AND/OR COVER HISTORY			
JAN 53-54-SANTIAGO/			
MAY 54-FEB 56-NEW YORK/			
FEB 56-APR 57-HAVANNA/			
APR 57-JUL 58-BEIRUT/			
AUG 58-MAR 60-HAVANNA/			
MAR 60-22 AUG 61-HQS/			
23 AUG 61-JUL 65-MEXICO/			
JUL 65-JUN 67-SANTO DOMINGO/			
JUN 67-JUN 70-HQS/			
JUN 70-14 JUN 73-BRAZIL/			
DISTRIBUTION: 15 JUN 73-21 JUL 73-HQS/			
COPY 1 - CD OR CP/			
COPY 2 - OPERATING			
COPY 3 - OS/SRACD 22 JUL 73-HQS/			
COPY 4 - OL/TFB			
COPY 5 - CCS-FILE			
BP:SS		<i>James J. Franklin</i> CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF	

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		7 MAY 1975	FILE NO. 2500
TC: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OF	CS NUMBER 391-24-4032	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OF	EMPLOYEE NUMBER 024345	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) LA	ID CARD NUMBER	
ATTN:	CHIEF SUPPORT STAFF	OFFICIAL COVER	ESTABLISHED
REF:	RETIREMENT		<input checked="" type="checkbox"/> DISCONTINUED
SUBJECT	DAVID ATLEE PHILLIPS	UNIT	

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

<input type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	<input checked="" type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE: EOD
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____	<input checked="" type="checkbox"/> SUBMIT FORM 3254 CIA _____ W-2 TO BE ISSUED: (HNB 20-11)
<input type="checkbox"/> OPERATIONAL COVER PROVIDED. FOR _____ TDY _____ OTHER (Specify)	<input checked="" type="checkbox"/> SUBMIT FORM 612 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)	<input checked="" type="checkbox"/> EAA. CATEGORY I _____ CATEGORY II _____
<input checked="" type="checkbox"/> SUBMIT FORM _____ IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)	<input checked="" type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS
<input checked="" type="checkbox"/> SUBMIT FORM 1122 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-1c)	<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR _____ GEHA
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-1c)	<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-1c)	
EAA. CATEGORY I _____ CATEGORY II _____	
REMARKS AND/OR COVER HISTORY	
SUBJECT WILL BE ACKNOWLEDGED AS CIA FOR ENTIRE PERIOD OF EMPLOYMENT BUT WILL NOT REVEAL SPECIFIC PLACES OR LOCATIONS OF COVER ASSIGNMENTS.	

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

- DISTRIBUTION:
- 1 - CD OR CPD
  - 2 - OPERATING COMPONENT *EP/mlr*
  - 3 - GS/SR&C
  - 4 - OC-03/TFB
  - CCS-FILE

CHIEF, OFFICIAL COVER BRANCH, COVER AND COMMERCIAL STAFF

USE PREVIOUS EDITION

SECRET

E-2 IMPDET CL. BY 037622

113-20-481

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		27 MARCH 1975	FILE NO. 2500
TC: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP	SS NUMBER	391-24-4032
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER	024345
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) LA	ID. CARD NUMBER	
ATTN:	CHIEF SUPPORT STAFF	OFFICIAL COVER	ESTABLISHED
REF:	VERBAL		DISCONTINUED
SUBJECT	DAVID ATLEE PHILLIPS	UNIT	

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	<input checked="" type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNSLOCK RECORDS
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____	EFFECTIVE DATE: 22 JULY 1973
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify)	<input checked="" type="checkbox"/> SUBMIT FORM 3254 _____ CIA _____ W-2 TO BE ISSUED. (HHB 20-11)
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HHB 20-7)	<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HHB 20-7)
	NA EAA: CATEGORY I _____ CATEGORY II _____
	<input checked="" type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS
SUBMIT FORM 3254 _____ TO BE ASSIGNED (HHB 20-11)	<input checked="" type="checkbox"/> SUBMIT FORM 3254 BY _____ GSEA
SUBMIT FORM 1022 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-20)	OR NOTE RE: IN THE _____
SUBMIT FORM 323 FOR TRANSFER OF COVER RESPONSIBILITY. (HR 240-20)	
EAA: CATEGORY I _____ CATEGORY II _____	
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD	
REMARKS AND/OR COVER HISTORY	
15 JAN 53-54-CHILE/SANTIAGO	
MAY 54-FEB 56-NEW YORK/	
FEB 56-APRIL 57-CUBA/HAVANA-	
APRIL 57-JULY 58-LEBANON/BEIRUT/	
AUG 58-MARCH 60-CUBA/HAVANA/	
MARCH 60-22 AUG 61-HQS/	
23 AUG 61-JULY 65-MEXICO/MEXICO CITY/	
JULY 65-JUNE 67-SANTO DOMINGO/	
JUNE 67-JAN 70-HQS-	
JAN 70-JULY 71-BRAZIL/RIO DE JANEIRO	
JULY 71-JULY 72-BRAZIL/BRASILIA/	
DISTRIBUTION	
COPY 1 - CD OR CPD	
COPY 2 - OPERATING COMPONENT	
COPY 3 - OS/SRBCD	
COPY 4 - OC-DO-TFB	
COPY 5 - CCS-FILE	
(TO BE CONTINUED)	
	CHIEF, OFFICIAL COVER BRANCH, COVER AND COMMERCIAL STAFF

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		FILE NO. 2500
TO: (Check)	CHIEF, CONTROL DIVISION, OP	SS NUMBER
	CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER
	CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER
ATTN:		ESTABLISHED
REF:	OFFICIAL COVER	DISCONTINUED
SUBJECT	UNIT	
DAVID ATLEE PHILLIPS		

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE:
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____	SUBMIT FORM 3254 _____ W-2 TO BE ISSUED. (HNB 20-11)
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (HNB 20-7)	EAA: CATEGORY I   CATEGORY II
SUBMIT FORM 3254 _____ W-2 TO BE ISSUED. (HNB 20-11)	RETURN ALL OFFICIAL DOCUMENTATION TO CCS
SUBMIT FORM 1324 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-2)	SUBMIT FORM 2688 FOR HOSPITALIZATION CARD
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-2e)	DO NOT WRITE IN THIS BLOCK
EAA: CATEGORY I   CATEGORY II	
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD	
REMARKS AND/OR COVER HISTORY (CONTINUE)	
AUG 72-14 JUNE 73-VENEZUELA/CARACAS- [redacted]	
15 JUNE 73-21 JULY 73-HQS- [redacted]	
22 JULY 73-24 MARCH 75-HQS- [redacted]	
25 MARCH 75-HQS/ [redacted]	

DISTRIBUTION:  
 COPY 1 - CD 20 CPD  
 COPY 2 - OPERATING COMPONENT  
 COPY 3 - OS SPACE  
 COPY 4 - OC-20 TFS  
 COPY 5 - CCS-FILE

*lp*  
 EF:HLR

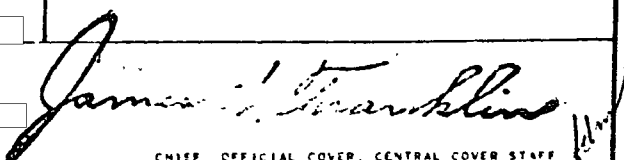
CHIEF, OFFICIAL COVER BRANCH COVER AND COMMERCIAL STAFF

*[Handwritten Signature]*

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		27 July 1973	FILE NO. 2500
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OF	SS NUMBER 391-24-4032	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OF	EMPLOYEE NUMBER 024345	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) <b>WH</b>	IC CARD NUMBER	
ATTN: Chief Support Staff	OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED	
REF: Form 1322 dated 7 Jun 73		<input type="checkbox"/> DISCONTINUED	
SUBJECT: PHILLIPS, DAVID A.	UNIT:		

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE:
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <b>EOD</b>	SUBMIT FORM 3254 TO BE ISSUED. (HR 20-14)
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>  </u> TDY <u>  </u> OTHER (Specify)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>  </u> (HR 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO <u>  </u> (HR 20-7)	EAA: CATEGORY I <u>  </u> CATEGORY II <u>  </u>
<input checked="" type="checkbox"/> SUBMIT FORM 3254 TO BE ISSUED. (HR 20-11)	RETURN ALL OFFICIAL UNBLOCK RECORDS TO CCS
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-20)	SUBMIT FORM 2688 FOR HOSPITALIZATION CARD
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-20)	DO NOT WRITE IN THIS BLOCK
<input checked="" type="checkbox"/> EAA. CATEGORY I <u>  </u> CATEGORY II <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR <u>AGE</u> HOSPITALIZATION CARD	
REMARKS AND/OR COVER HISTORY JAN 53-54-SANTIAGO/ <u>  </u> MAY 54-FEB 56-NEW YORK/ <u>  </u> FEB 56-APR 57-HAVANNA/ <u>  </u> APR 57-JUL 58-BEIRUT/ <u>  </u> AUG 58-MAR 60-HAVANNA/ <u>  </u> MAR 60-22 AUG 61-HQS/ <u>  </u> 23 AUG 61-JUL 65-MEXICO/ <u>  </u> JUL 65-JUN 67-SANTO DOMINGO/ <u>  </u> JUN 67-JUN 70-HQS/ <u>  </u> JUN 70-14 JUN 73-BRAZIL/ <u>  </u>	
DISTRIBUTION: 15 JUN 73-21 JUL 73-HQS/ COPY 1 - CD 84 CPD COPY 2 - OPERATING COMPONENT COPY 3 - OS/BRACD 22 JUL 73-HQS/ <u>  </u> COPY 4 - DL TFB COPY 5 - CCS-FILE EBP:SS	
 CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF	

SECRET

COVER CONTRL JT. RETIREMENT PROCESSING										FILL
TO: Retirement Operations Branch Office of Personnel										DATE 17 April 1975
RETIREE [REDACTED]					CATEGORY OF EMPLOYMENT					
On the basis of a review of the records of the [REDACTED] the following action is to be taken on processing retirement documentation for the person named above.										
TYPE RETIREMENT		CIVIL SERVICE			CIARDS		DATE 14 Apr 1975			
COVER		OVERT ROUTINE		COVERT (OFFICIAL COVER) LOCK-UP		COVERT (NOV) SPECIAL	RETENTION OF AWARDS	YES		NO
CORRESPONDENCE		OVERT			COVERT		THRU CCS			
FINANCES										
ANNUITY PAYMENTS SHOULD BE					U.S. GOV'T. CHECK		OTHER (Payment instructions follow)			
TAX DOCUMENTATION SHOULD BE					CIA	CSC	OTHER (MEMO FOLLOWS)			
REQUEST TRANSFER OF FUNDS FROM CIVIL SERVICE COMMISSION					YES	NO	INTERNAL TRANSFER			
INSURANCE										
FEGLI		OVERT	COVERT			MAINTAIN RECORDS INTERNALLY ONLY				
TYPE OF HOSPITALIZATION CARD:										
AUTHORIZATION TO CONVERT INSURANCE					YES	CONVERSION MUST BE APPROVED BY CCS				
RESERVE										
MEMBER OF CIVILIAN RESERVE					YES	NO	OVERT	COVERT		
REMARKS										
CHIEF, COVER SUPPORT BRANCH COVER & COMMERCIAL STAFF										
THIS SECTION TO BE COMPLETED BY OFFICE OF SECURITY										
NO SECURITY OBJECTIONS TO ABOVE.										
OTHER INSTRUCTIONS AS FOLLOWS:										
CHIEF, EMPLOYEE ACTIVITY BRANCH, OFFICE OF SECURITY										

FORM 3429

SECRET

E2 IMPDET CL BY 007622

7 - OFF. PERS. FILE ROOM



FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,  
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 01 MAY 1974.

PHILLIPS DAVID A

024345

41354523


"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF  
TITLE 5, U.S.C. AND EXECUTIVE ORDER 11811 PURSUANT TO AUTHORITY OF DCI  
AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE  
DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
PHILLIPS DAVID A	024345	51	050	CF GS 18 1	\$36,000

DLM: 12 MAY 75

SECRET  
(When filled in)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
024345		PHILLIPS DAVID A									
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT				
RETIREMENT (VOLUNTARY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM AND CANCELLATION OF NSCA					05 09 75		REGULAR				
6 FUNDS		7 V TO V		7 V TO CF		7 PLAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		5135 4523 0000		PL 88-643 SECT 233			
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION						
DDO/LA DIVISION OFFICE OF THE CHIEF					WASH., D.C.						
11 POSITION TITLE					12 POSITION NUMBER		13 SERVICE DESIGNATION				
CHIEF LA DIVISION					CN51		DYY				
14 CLASSIFICATION SCHEDULE (GS, PB, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE				
GS			0001.10		18 1		36000				
18 REMARKS											
"IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED."											
E BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
22 STATION CODE		23 INTEREST CODE		24 HOURS CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LET	
						10 31 22					
28 MENT DATA		31 SEPARATION DATA CODE		32 Correction/Conciliation Data				33 SECURITY REQ NO		34 SEX	
EOD DATA		EOD DATA		EOD DATA				EOD DATA		EOD DATA	
35 DOW COMP DATE		38 CAREER CATEGORY		39 FECLT / HEALTH INSURANCE				40 SOCIAL SECURITY NO			
CA YR		LAB SERV		CODE		CODE		11 WAIVER		HEALTH INS CODE	
EOD DATA		EOD DATA		EOD DATA		EOD DATA		EOD DATA		EOD DATA	
42 LEAVE CAT CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA							
1 YES		CODE		NO TAX EXEMPTIONS		FORM EXEMPTED		CODE		NO TAX EXEMP	
2 NO		EOD DATA		EOD DATA		EOD DATA		EOD DATA		EOD DATA	
SIGNATURE OF OTHER AUTHENTICATION											
 <p>PHILLIPS DAVID A 040090 1922</p>											
<p>POSTED</p> <p><i>JK 5/13/75</i></p>											

VB

RCS: 28 DEC 73

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF													
1 SERIAL NUMBER		2 NAME (LAST, FIRST, MIDDLE)											
024345		PHILLIPS DAVID A											
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT					
PROMOTION					12   23   73			REGULAR					
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY					
CF TO V		X		CF TO CF		4135 4523 0001		50 USC 403 J					
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION								
DDO/WH DIVISION OFFICE OF THE CHIEF					WASH., D.C.								
11 POSITION TITLE					12 POSITION NUMBER			13 SERVICE DESIGNATION					
CHIEF WH DIVISION					0001			D					
14 CLASSIFICATION SCHEDULE (GS 18-1)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE						
GS			0001.10		18 1		36000						
18 REMARKS													
"IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED."													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE													
20 EMPLOY CODE													
21 OFFICE CODE		22 STATION CODE		23 INGRESS CODE		24 MONTH CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LET	
22		10		51050 WH		75013		1		10   31   22		12   23   73	
28 VET PREFERENCE		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION / CORRECTION DATA		33 SECURITY REG NO		34 SER	
										FOD DATA			
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA				44 STATE TAX DATA			
CODE				CODE		CODE				CODE			
1. NO PREVIOUS SERVICE				1. YES		1. YES				1. YES			
2. NO BREAK IN SERVICE				2. NO		2. NO				2. NO			
3. BREAK IN SERVICE LESS THAN 3 YRS													
4. BREAK IN SERVICE MORE THAN 3 YRS													
SIGNATURE OR OTHER AUTHENTICATION													
FOSTER CORP 1-3-74													

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	GRN.	FUNDS	GR-STEP	NEW SALARY
PHILLIPS DAVID A	024345	51	050	CF GS 17 4	\$36,000

SECRET  
(When Filled In)

LML: 17 JUL 73

NOTIFICATION OF PERSONNEL ACTION												
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)										
024345		PHILLIPS DAVID A										
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT					
CONVERSION FROM FSR STATUS					07 21 73		REGULAR					
6 FUNDS		7 V TO V		7 V TO CF		8 CSC OR OTHER LEGAL AUTHORITY						
CF TO V		X		CF TO CF		4135 4523 (6-0)		50 USC 403 J				
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OR OFFICIAL STATION							
DDO/WH DIVISION OFFICE OF THE CHIEF					WASH., D.C.							
11 POSITION TITLE					12 POSITION NUMBER			13 SERVICE DESIGNATION				
CHIEF, WH DIVISION					0001			D				
14 CLASSIFICATION SCHEDULE (AS IN 5)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE					
GS			0001-10		17 4		36000					
18 REMARKS												
WASH., D.C. " IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED."												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEREST CODE	24 HOURS CODE	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI	
56	10	51050 WH		75013			MO	DA	MO	DA	MO	DA
28 PAY EXPRES		29 SOCIAL PREFERENCE		30 RETIREMENT DATA		31 SAFETY OR DATA CODE		32 CORRECTION CONCERNING CODE		33 SECURITY REQ NO		34 SER
										EOD DATA		
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGU - HEALTH INSURANCE		40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT		43 FEDERAL TAX DATA				44 STATE TAX DATA		
SIGNATURE OF OTHER AUTHENTICATION												
										POSTED		
										17 JUL 73		

UMS: 18 JULY 73

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
1. SER. NUMBER 024345		2. NAME (LAST FIRST MIDDLE) PHILLIPS DAVID A.															
3. NATURE OF PERSONNEL ACTION REASSIGNMENT						4. EFFECTIVE DATE MO DA YR 15 15 73			5. CATEGORY OF EMPLOYMENT REGULAR								
6. FUNDS		V TO V		V TO CF		7. PAN AND NSCA 4135 0620 (XXX)			8. CLK OR OTHER LEGAL AUTHORITY 50 USC 403 J								
CF TO V		X		CF TO CF		9. ORGANIZATIONAL DESIGNATIONS DDO, WH DIVISION OFFICE OF THE CHIEF											
10. LOCATION OF OFFICIAL STATION WASH., D.C.						11. POSITION TITLE 1ST SEC IN REL OFF CHIEF WH DIVISION			12. POSITION NUMBER (0001)		13. SERVICE DESIGNATION D						
14. CLASSIFICATION SCHEDULE (GS 18, etc.) FSR GS			15. OCCUPATIONAL SERIES (XXX) 10			16. GRADE AND STEP 02 3 17 4		17. SALARY OR RATE 33(15) 36(XX)									
18. REMARKS CARACAS, VENEZUELA "IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED"																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE 37		20. EMPLOY CODE 10		21. OFFICE CODING 51500 WH		22. STATION CODE 7501J		23. INTEGRAL CODE S		24. HOURS CODE 1		25. DATE OF BIRTH MO DA YR 10 31 22		26. DATE OF GENDER MO DA YR		27. DATE OF DEATH MO DA YR	
28. NET EXP. RES. XX XX XX		29. SPECIAL REFERENCE		30. RET. BENEFIT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CONVERSION DATA		33. SECURITY REQ. NO.		34. SER.		100 DATA		35. SOCIAL SECURITY NO.	
36. NET PREFERENCE		37. SERV. COMP. DATE		38. LONG COMP. DATE		39. CAREER CATEGORY		40. FEDERAL HEALTH INSURANCE		41. SOCIAL SECURITY NO.		42. SOCIAL SECURITY NO.					
43. PREVIOUS U.S. GOVERNMENT SERVICE				44. LEAVE CAT. CODE		45. FEDERAL TAX DATA				46. STATE TAX DATA							
47. PREVIOUS U.S. GOVERNMENT SERVICE				48. LEAVE CAT. CODE		49. FEDERAL TAX DATA				50. STATE TAX DATA							
SIGNATURE OR OTHER AUTHENTICATION																	

POSTED  
JUL 23 1973

SECRET  
RCS

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
PHILLIPS DAVID A	024345	51	745	CF GS 17 4	\$36,000

654

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
024345		PHILLIPS DAVID A.		51 745		CF			
A OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
		\$30,000	11/26/71	GS 17 4		\$36,000	11/26/72		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>David A. Phillips</i>						DATE 11/19/72			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
(EES) INITIALS						AUDITED BY			
FORM 3608						PAY CHANGE NOTIFICATION			

**SECRET**  
(When Filled In)

BBG: 26 AUG 72

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER <b>024345</b>		2 NAME (LAST FIRST MIDDLE) <b>PHILLIPS DAVID A</b>								
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>					4 EFFECTIVE DATE MO DA YR <b>08 14 72</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>			
6 FUNDS		V TO V		V TO CF		7 Financial Analysts No Chargeable		8 CSC OR OTHER LEGAL AUTHORITY		
		CF TO V		X CF TO CF		<b>3135 1138 0000</b>		<b>50 USC 403 J</b>		
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH DIVISION FOREIGN FIELD BRANCH 3 - CARACAS, VENEZUELA STATION</b>					10 LOCATION OF OFFICIAL STATION <b>CARACAS, VENEZUELA</b>					
11 POSITION TITLE <b>1ST SECRETARY INT REL OFF CHIEF OF STATION</b>				12 POSITION NUMBER <b>0093</b>		13 SERVICE DESIGNATION <b>D</b>				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>FSR GS</b>		15 OCCUPATIONAL SERIES <b>0136.05</b>		16 GRADE AND STEP <b>03 7 17 3</b>		17 SALARY OR RATE <b>28022 36000</b>				
18 REMARKS: <b>BRASILIA, BRAZIL</b> <b>"IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED."</b>										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL:										
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING WHILE OPERATIVE		22 STATION CODE	23 INTERSTATE CODE	24 MAILING CODE	25 DATE OF BIRTH MO DA YR		26 DATE OF GRACE MO DA YR	27 DATE OF LEI MO DA YR
<b>37</b>	<b>10</b>	<b>517451WH</b>		<b>77003</b>	<b>S</b>	<b>3</b>	<b>10 31 22</b>			
28 NTE EXPIRES MO DA YR		29 SPECIAL REFERENCE		30 RESIGNMENT DATA		31 SEPARATION DATA (GDS)		32 OTHER DATA		33 SECURITY (NID No)
<b>10 13 74 82</b>										
34 VET PREFERENCE		35 SERV COMP DATE		36 LONG COMP DATE		37 MASTER CATEGORY		38 FEEL HEALTH INSURANCE		39 SOCIAL SECURITY NO
40 PREVIOUS CIVILIAN GOVERNMENT SERVICE				41 LEAVE DATA		42 GENERAL DATA		43 STATE TAX DATA		
SIGNATURE OF DDP'S ADMINISTRATION										

**POSTED**

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 724740		2. NAME, LAST-FIRST MIDDLE WILLIAM DA...	
3. NATURE OF PERSONNEL ACTION RELATIONSHIP...		4. EFFECTIVE DATE MO DA YR 05 05 74	5. CATEGORY OF EMPLOYMENT
A FUNDS	V TO V	V TO CF	7. Financial Analysis No. Chargeable
CF TO V	CF TO CF	8. CSC OR OTHER LEGAL AUTHORITY	8. CSC OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DUP...		10. LOCATION OF OFFICIAL STATION ...	
11. POSITION TITLE ...	12. POSITION NUMBER ...	13. SERVICE DESIGNATION	
14. CLASSIFICATION SCHEDULE (GS LR etc)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OF RATE
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATUS CODE
23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF 151	26. DATE OF 151
27. INT. EMPLOY	28. SPECIAL REFERENCE	29. SETTLEMENT DATA	30. SEPARATION DATA
31. NET PREFERENCE	32. MEN. COMP. DATA	33. LEGAL HEALTH INSURANCE	34. SOCIAL SECURITY NO.
35. PREVIOUS CIVIL OR GOVERNMENT SERVICE	36. FEDERAL TAX DATA	37. STATE TAX DATA	38. SOCIAL SECURITY NO.
SIGNATURE OR OTHER AUTHENTICATION			

POSTED  
10 15 74

SECRET



"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11937 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR	STEP	NET SALARY
PHILLIPS DAVID A	024345	51 825	CF	GS	17 3	\$36,000

B6G: 30 NOV 71

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																									
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)																							
024345		PHILLIPS DAVID A																							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT																			
PROMOTION				11 28 71		REGULAR																			
6. FUNDS		7. V TO V		8. X TO CF		9. PAY PLAN AND GRADE																			
CF TO V		X		CF TO CF		2135 0694 0000 50 USC 403 J																			
10. ORGANIZATIONAL DESIGNATIONS				11. LOCATION OF OFFICIAL STATION																					
DDP/WH DIVISION FOREIGN FIELD BRANCH 5 BRASILIA, BRAZIL STATION				BRASILIA, BRAZIL																					
12. POSITION TITLE				13. POSITION NUMBER		14. SERVICE DESIGNATION																			
1ST SECRETARY POLITICAL OFFICER CHIEF OF STATION				0186		D																			
15. CLASSIFICATION		16. OCCUPATIONAL SERIES		17. GRADE AND STEP		18. PAY PLAN AND GRADE																			
FSR GS		0136.05		03 7 17 3		26503 34716																			
19. REMARKS																									
RIO DE JANEIRO, BRAZIL																									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																									
<table border="1"> <tr> <td>20. ACTION</td> <td>21. CODE</td> <td>22. DATE</td> <td>23. ACTION</td> <td>24. DATE</td> <td>25. ACTION</td> <td>26. DATE</td> <td>27. ACTION</td> <td>28. DATE</td> </tr> <tr> <td>22</td> <td>10</td> <td>51825 WH</td> <td>09026 S</td> <td>3</td> <td>10 31 22</td> <td>17 28 71</td> <td>11 28 71</td> <td></td> </tr> </table>								20. ACTION	21. CODE	22. DATE	23. ACTION	24. DATE	25. ACTION	26. DATE	27. ACTION	28. DATE	22	10	51825 WH	09026 S	3	10 31 22	17 28 71	11 28 71	
20. ACTION	21. CODE	22. DATE	23. ACTION	24. DATE	25. ACTION	26. DATE	27. ACTION	28. DATE																	
22	10	51825 WH	09026 S	3	10 31 22	17 28 71	11 28 71																		
100 DATA																									

10

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PLUS ANY T<sup>h</sup> AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
PHILLIPS DAVID A	024745	51	730	CF GS 16 4	\$29,202

637

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
024745		PHILLIPS DAVID A		51 730		CF			
6 OLD SALARY RATE				7 NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADI
GS 16	4	\$29,202	12/15/69	GS 16	5	\$30,087	12/13/70		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>Joseph D. [Signature]</i>						1/15			
<input type="checkbox"/> NO EXC <sup>s</sup> LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS						RECORDED BY			
[Handwritten Initials]						[Handwritten Initials]			
FORM 7-68 5604 PAY CHANGE NOTIFICATION (8-71)									

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PLUS ANY T<sup>h</sup> AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

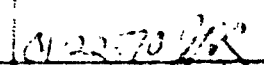
EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
PHILLIPS DAVID A	024745	51	730	CF GS 16 5	\$30,087

SECRET  
(When Filled In)

FORM 1 JAN 7

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 24345		2 NAME (LAST-FIRST MIDDLE) P ILLIPS DAVID A	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE 01 11 73
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V	V TO CF	7 Financial Analysis No Chargeable
	CF TO V	X	CF TO CF
			8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 5 RIO DE JANEIRO, BRAZIL STATION			10 LOCATION OF OFFICIAL STATION RIO DE JANEIRO, BRAZIL
11 POSITION TITLE 1ST SECRETARY POLITICAL OFFICER CHIEF OF STATION		12 POSITION NUMBER 0185	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LB, W-1) FGR GS	15 OCCUPATIONAL SERIES 0136.05	16 GRADE AND STEP 13 7 16 4	17 SALARY OR RATE 23646 27540
18 REMARKS WAS ... O.P.  HOME BASE: WH			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC	22 STATION CODE
37	16	01731 W	09 37
23 GRADE CODE	24 EMPLOY CODE	25 DATE OF BIRTH	26 DATE OF GRADE
3	10	31 22	
28 NET PAYABLE REFERENCE	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE
32 SECURITY REL. NO.	33 SECURITY REL. NO.	34 NET	
35 NET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY
39 FEDERAL HEALTH INSURANCE	40 FEDERAL HEALTH INSURANCE	41 SOCIAL SECURITY NO.	
42 PREVIOUS CIVILIAN GOVERNMENT SERVICE	43 YEARS LASTED	44 FEDERAL TAX DATA	45 STATE TAX DATA
46 NOT PREVIOUS SERVICE	47 NO BREAK IN SERVICE	48 BREAK IN SERVICE LESS THAN 3 YRS	49 BREAK IN SERVICE MORE THAN 3 YRS
SIGNATURE OF OTHER AUTHENTICATION			
			

FORM 1 JAN 7

SECRET

JBC

FORM 1 JAN 7

MONY DOLLARS PAID IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 15 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 15 JULY 1969

NAME	SERIAL	FUNDS	GRADE	STEP	P.F. SALARY
PHILLIPS DAVID A	024745	51 500	GS	16 4	\$27,549

PLW: 13 DEC 69.

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)							
024745		PHILLIPS DAVID A							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
PROMOTION					12 15 69		REGULAR		
6. FUNDS		7. V TO V		8. V TO CF		9. OCCUPATIONAL SERIES		10. PAY GRADE AND STEP	
51 500		X		CF TO CF		0135.01		GS 16 4	
11. ORGANIZATIONAL DESIGNATIONS					12. LOCATION OF OFFICIAL STATION				
DDP/WH WH/COG OFFICE OF THE CHIEF					WASH., D.C.				
13. POSITION TITLE					14. POSITION NUMBER		15. SERVICE DESIGNATION		
ATT POL OFFICER OPS OFFICER CH					1100		D		
16. CLASSIFICATION SCHEDULE (GS, AF, etc.)			17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OF RATE		
FOR GS			0135.01		GS 16 4		20,000 20110		
20. REMARKS									
WASH., D.C.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
21. ACTION CODE	22. EMPLOY CODE	23. OFFICE CODE	24. STATION CODE	25. PAYROLL CODE	26. PAYROLL	27. DATE OF BIRTH	28. DATE OF GRADE	29. DATE OF LET	
22	14	010000	00000	5	1	12 31 69	12 15 69	12 15 69	
30. PAY SERIES		31. PAY RATE	32. PAY GRADE	33. PAY STEP	34. PAY RATE	35. SOCIAL SECURITY NO.			
						IOD DATA			
36. PAY ADJUSTMENT		37. PAY ADJUSTMENT DATE	38. PAY ADJUSTMENT DATE	39. PAY ADJUSTMENT DATE	40. PAY ADJUSTMENT DATE	41. FEDERAL TAX DATA		42. STATE TAX DATA	
43. SIGNATURE OF OFFICER AUTHORIZING									
POSTED									

"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
PHILLIPS DAVID A	024345	51	500	GS 15 5	\$19,978	\$20,856

CR. DUTY

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
PHILLIPS DAVID A	024345	51	500	GS 15 5	\$20,856	\$22,416

EXO

COMPLETION  
A TAX DIVISION

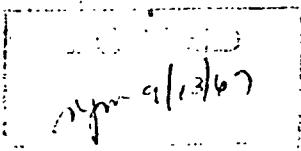
SEP 15 2 01 PM '68

1	SERIAL NO	2	NAME	3	ORGANIZATION	4	FUNDS	5	EWOP HOURS
	024345		PHILLIPS DAVID A		51 500		CF		
6				7		8			
OLD SALARY RATE				NEW SALARY RATE		TYPE ACTION			
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
		22416				23075	09/22/68		
GS-15	5	<del>20856</del>	09/29/66	GS 15	5	<del>21000</del>	09/22/68		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>Donald C. Marcellus</i>						12 July 1968			
<input type="checkbox"/> NO EXCESS PROP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> EWOP STATUS AT END OF WAITING PERIOD									
CLEER'S INITIALS						ACCEPTED BY			
R. J. ...									

1111

SECRET  
(When Filled In)

SEP 12 1967

NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)										
0211345		PHILLIPS DAVID A										
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT						
REASSIGNMENT				09   10   67		REGULAR						
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY				
CF TO V		X		CF TO CF		3135 0620 (XXX)		50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION						
DDP/WH WH/COG OFFICE OF THE CHIEF						WASH., D.C.						
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION				
ATT POL OFFICER OPS OFFICER CH						1105		D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE				
FSR GS			0136.01			03 5 15-5		18041 19978				
18. REMARKS												
SANTO DOMINGO, DOM REP												
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. Hdqtrs Code	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37	10	51500 WH		75013	5	1	10   31   22					
28. NTE EXPIRES			29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	34. SEX
									EOD DATA			
35. VET. PREFERENCE		36. SERV. COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO		
CODE		CODE		CODE		CODE		CODE		CODE		
0 - NONE		MO DA YR		MO DA YR		CAN. MILIT. (U)		CODE		D - WAIVER		HEALTH INS CODE
1 - 5 PT										1 - YES		
2 - 10 PT										2 - NO		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE LAT		43. FEDERAL TAX DATA		44. STATE TAX DATA				
CODE				CODE		CODE		CODE				
0 - NO PREVIOUS SERVICE						FORM EXEMPTED		FORM EXEMPTED				
1 - NO BREAK IN SERVICE						1 - YES		1 - YES				
2 - BREAK IN SERVICE (LESS THAN 1 YR)						2 - NO		2 - NO				
3 - BREAK IN SERVICE (MORE THAN 1 YR)												
SIGNATURE OR OTHER AUTHENTICATION												
												

GS-4

1. Serial No.		2. Name			3. Cost Center Number			4. LWOP Hours		
024345		PHILLIPS DAVID A			01 750 CB					
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 15	4	19371	09/27/64	GS 15	5	19978	09/24/66			
8. Remarks and Authorization										
<p>NO EXCESS LWOP          IN PAY STATUS AT END OF WAITING PERIOD          LWOP STATUS AT END OF WAITING PERIOD          CLERKS INITIALS                      AUDITED BY</p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS          OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: <i>David Phillips</i>                      DATE 15/7/66</p>										
<b>PAY CHANGE NOTIFICATION</b>										



SECRET  
(When Filled In)

BJT, 18 OCT 66

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 024345 2. NAME (LAST FIRST-MIDDLE) PHILLIPS DAVID A

3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM 4. EFFECTIVE DATE 10 | 23 | 66 5. CATEGORY OF EMPLOYMENT REGULAR

6. FUNDS 7. COST CENTER NO CHARGEABLE 7135 0875 0000 8. CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203

9. ORGANIZATIONAL DESIGNATIONS DDP/WH 10. LOCATION OF OFFICIAL STATION SANTO DOMINGO, DOM REP

11. POSITION TITLE 12. POSITION NUMBER 13. SERVICE DESIGNATION D

14. CLASSIFICATION SCHEDULE (GS, LR, etc) 15. OCCUPATIONAL SERIES 16. GRADE AND STEP 15 17. SALARY OR RATE

18. REMARKS  
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

Grid of fields for personnel data including: 19 ACTION CODE, 20 EMPLOY CODE, 21 OFFICE CODING, 22 STATION CODE, 23 INTEGREE CODE, 24 Hdqtrs. 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 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, 43 FEDERAL TAX DATA, 44. STATE TAX DATA.

Handwritten signature box containing the date 10-21-66 and a stamp.

SIGNATURE OR OTHER AUTHENTICATION



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 8 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
PHILLIPS DAVID A	024345	51	750	CF GS 15 4	\$18,825	\$19,371

SECRET

30 June 1966

MEMORANDUM FOR : Chief, TRB

SUBJECT : Record of Contract Service for  
David A. Phillips

1. Per your request we are forwarding record of Subject's contract service:

<u>Date</u>	<u>Action</u>
4 March 1954	Hired as Contract Employee
31 July 1954	Terminated
1 August 1954	Hired as Contract Employee
31 March 1955	Terminated
19 August 1958	Hired as Contract Agent
13 March 1960	Terminated

2. Subject was employed on a full time basis with leave benefits from 4 March 1954 through 31 March 1955. Accordingly, this entire period is "creditable" for establishing his annual leave category. However, the period from 19 August 1958 through 13 March 1960, as an independent contractor, is not creditable for this purpose. Only the period from 4 March 1954 through 31 December 1954 is "creditable for Civil Service Retirement, since Contract Employee's were mandatorily covered by Social Security as of 1 January 1955. 1951-1953 Contract Agent time is not creditable.

3. Attached is OF record of Agency service with salary breakdown.

Rogers C. Brooks

OPTIONAL FORM NO. 10  
MAY 1962 EDITION  
GSA FPMR (41 CFR) 101-11.6  
UNITED STATES GOVERNMENT

# Memorandum

TO : Chief, Contract Personnel Division  
ATTN : Mary Kay Spink

DATE: 16 June 1966

FROM : Compensation and Tax Division  
Office of Finance

SUBJECT: Agency Service of David Atlee PHILLIPS

The records of the Office of Finance show the following Agency service for Subject:

**Contract Agent:**

EOD 1 February 1951 - \$600.00 P/M  
Term 28 February 1951 - \$600.00 P/M

*not creditable  
see memo 6-30-66*

EOD 25 January 1952 - \$600.00 P/A  
Term 31 August 1953 - \$600.00 P/A

*not creditable  
see memo 6-30-66*

**Contract Employee:**

EOD 4 March 1954 - \$7200.00 P/A  
Pay Inc. 1 August 1954 - \$8360.00 P/A  
Term. 31 March 1955 - \$8360.00 P/A

*o.k.*

**Staff Employee:**

Ex. Appt. 1 April 1955 - \$9600.00 P/A  
Res. 6 February 1956 - \$10,320.00 P/A

*o.k.*

**Staff Agent:**

Ex. Appt. 7 February 1956 - \$10,320.00 P/A  
PSI 7 October 1956 - \$10,535.00 P/A  
Pay Raise 12 January 1958 - \$11,595.00 P/A  
PSI 6 April 1958 - \$11,835.00 P/A  
Res. 13 August 1958 - \$11,835.00 P/A

*o.k.*

**Contract Agent:**

EOD 19 August 1958 - \$7,200.00 P/A  
Term. 13 March 1960 - \$7,200.00 P/A

*not creditable per  
memo from CPD  
dated 6-30-66*

**Staff Employee:**

Ex. Appt. 14 March 1960 - \$11,835.00 P/A  
Subject has been a Staff Employee since 14 March 1960.

*o.k.  
as Staff  
Employee*

*Sturgeson*  
JOSEPH H. MURSON  
Chief

Agent Payroll Branch

\*PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301  
 PURSUANT TO AUTHORITY OF ACTS PROVIDED IN THE CIA ACT OF 1949,  
 AS AMENDED, AND A-001 POLICY (EFFECTIVE DATE - OCTOBER 1972.)

EFFECTIVE DATE OF PAY ADJUSTMENT: 11 OCTOBER 1965

NAME: PHILLIPS DAVID A SERIAL: 024345 STATION: 51 650 OF GS 15 - 15 4 OLD SALARY: \$18,170 NEW SALARY: \$18,825

SECRET  
 (When Filled In)

5 AUG 65

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 024345		2. NAME (LAST-FIRST-MIDDLE) PHILLIPS DAVID A	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE MO. DA. YR. 05 05 65
5. CATEGORY OF EMPLOYMENT REGULAR			6. COST CENTER NO. CHARGEABLE 6135 0575 COXX
7. FUNDS		8. CSC OR OTHER LEGAL AUTHORITY	
V TO V		V TO CF	
CF TO V		CF TO CF	
X		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 2 SANTO DOMINGO, DOMINICAN REPUBLIC STATION			10. LOCATION OF OFFICIAL STATION SANTO DOMINGO, DOM REP
11. POSITION TITLE ATT POL OFF CHIEF OF STATION		12. POSITION NUMBER 0274	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LO, etc) FSR GS		15. OCCUPATIONAL SERIES 0136.05	16. GRADE AND STEP GS 5 15 4
		17. SALARY OR RATE 18920 18170	
18. REMARKS MEXICO CITY, MEXICO			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 51650 ALPHABETIC: WH	22. STATION CODE 19039
23. INTEGRITY CODE 1	24. ADAPT CODE 3	25. DATE OF BIRTH MO. DA. YR. 10 31 22	26. DATE OF GRADE MO. DA. YR. 
27. DATE OF LEF MO. DA. YR. 	28. NTE EXPIRES MO. DA. YR. XX   XXXX	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE
31. SEPARATION DATA CODE	32. CORRECTION-CANCELLATION DATA TYPE MO. DA. YR.	33. SECURITY REF NO	
34. VET PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT	35. SERV COMP. DATE MO. DA. YR.	36. LONG COMP. DATE MO. DA. YR.	37. CAREER CATEGORY CODE
38. FEELT / HEALTH INSURANCE CODE 0 - WAIVED 1 - YES	39. SOCIAL SECURITY NO	40. FEDERAL TAX DATA NO. TAX EXEMPTIONS	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 1 YEAR 3 - BREAK IN SERVICE MORE THAN 1 YEAR		42. LEAVE CAT. 43 CODE	44. STATE TAX DATA NO. TAX EXEMP.
SIGNATURE OR OTHER AUTHENTICATION			

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPO-03/31/65

1 SERIAL NUMBER <b>024345</b>		2 NAME (LAST-FIRST-MIDDLE) <b>PHILLIPS DAVID A</b>		3 NATURE OF PERSONNEL ACTION <b>CONV. TO CAREER EMPLOYEE STATUS</b>		4 EFFECTIVE DATE MO   DA   YE <b>04   01   56</b>		5 CATEGORY OF EMPLOYMENT	
6 FUNDS		V TO V	V TO (F)	7 COST CENTER NO (CHARGEABLE)		8 CSC OR OTHER LEGAL AUTHORITY			
		(F TO V)	X (F TO (F)						
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH DIVISION</b>				10 LOCATION OF OFFICIAL STATION					
11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION <b>U</b>			
14 CLASSIFICATION SCHEDULE (GS 18 etc)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
18 REMARKS									

SIGNATURE OR OTHER AUTHENTICATOR:

**POSTED**  
*04/01/65 [Signature]*



IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCP MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 9 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
PHILLIPS DAVID A	024345	DA	700	GS 15 3	\$15,925	\$16,495

SECRET  
(When Filled In)

MHC: 27 SEPT 63

NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)							
024345		PHILLIPS DAVID A							
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT		
PROMOTION					09 29 63		REGULAR		
6 FUNDS		7 COST CENTER NO. CHARGEABLE		8 CSC OR OTHER LEGAL AUTHORITY					
V TO V CF TO V		4135 5700 1000		50 USC 403 J					
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION				
DDP WH BRANCH 3 MEXICO CITY MEXICO STATION					MEXICO CITY, MEXICO				
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION			
ATT POL OFF OPS OFFICER				0340		D			
14 CLASSIFICATION SYMBOL (GS, LR, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE		
FSR GS			0136.01		03 0 15 3		13440 15525		
18 REMARKS									
MEXICO CITY, MEXICO									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE									
20 EMPLOYEE CODE									
21 OFFICE CODING									
22 STATION CODE									
23 INTELLIGENCE CODE									
24 REPORT CODE									
25 DATE OF BIRTH									
26 DATE OF GRADE									
27 DATE OF LEI									
28 DATE EXPIRES									
29 SPECIAL REFERENCE									
30 RETIREMENT DATA									
31 SEPARATION DATA CODE									
32 CORRECTION CANCELLATION DATA									
33 SECURITY REG NO.									
34 SER									
35 NET PRESENTENCE									
36 SERV COMP DATE									
37 LONG COMP DATE									
38 CAREER CATEGORY									
39 FEGLI / HEALTH INSURANCE									
40 SOCIAL SECURITY NO.									
41 PREVIOUS AGREEMENT SERVICE DATA									
42 LEAVE CAT CODE									
43 FEDERAL TAX DATA									
44 STATE TAX DATA									
45 NO. OF DEPENDENTS									
46 NO. OF DEPENDENTS									
47 NO. OF DEPENDENTS									
48 NO. OF DEPENDENTS									
49 NO. OF DEPENDENTS									
50 NO. OF DEPENDENTS									
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97 NO. OF DEPENDENTS									
98 NO. OF DEPENDENTS									
99 NO. OF DEPENDENTS									
100 NO. OF DEPENDENTS									
SIGNATURE OR OTHER AUTHENTICATION									
101 NO. OF DEPENDENTS									
102 NO. OF DEPENDENTS									
103 NO. OF DEPENDENTS									
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105 NO. OF DEPENDENTS									
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109 NO. OF DEPENDENTS									
110 NO. OF DEPENDENTS									

101-105

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 97-231, TITLE I, SECTION 501, EFFECTIVE 18 OCTOBER 1962, SALARY IS ADJUSTED AS FOLLOWS:

NAME	SERIAL	OFFICE	FUNDS	OLD GROSS SALARY	NEW GROSS SALARY
PHILLIPS DAVID A	024345	64700	CF 14 4	\$12,990	14 4 \$14,120

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
024345		PHILLIPS DAVID A		340 64 700 CF 8						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Est. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 14	4	\$14,120	09/17/61	GS 14	5	\$14,545	09/15/63		1	
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: [Signature]										
DATE: 17 July 1963										
PAY CHANGE NOTIFICATION										

Form 961 560

Obsolete Previous Edition

(431)

SECRET  
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
24345		PHILLIPS DAVID A		DDP/WH 07 UV						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Est. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS	14	\$12,730	03/14/60	14	4	\$12,990	09/17/61			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / IN LWOP STATUS AT END OF WAITING PERIOD										





PSC: 23 AUG 1961

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
024345		PHILLIPS DAVID A									
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT					08 15 61		REGULAR				
6. FUND		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
FUTDS		2135 5700 1000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DOP WH BRANCH 3 MEXICO CITY, MEXICO STATION					MEXICO CITY, MEXICO						
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
CPS OFFICER				0340		D					
14. CLASSIFICATION SCHEDULE (GS, WD, etc)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS			0136.01		14 3		12730				
18. REASONS TO BE											
[ ]											
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. REGIONS CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI	
37	10	64700 WH		45075		3	10 21 22				
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION CANCELLATION DATA		33. SECURITY REG NO.	34. SER
								EOD DATA			
35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. MIL. SERV. CREDIT LCD		39. PEGS/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											
FOUNDED 08/29/61 WIK											

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED 1 AUGUST 1966, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1968.

GO	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
0	PHILLIPS DAVID A	524345	46 17	GS-14 3	\$11,835	\$12,730

/S/ EMMETT D. FCHOLS  
DIRECTOR OF PERSONNEL

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION														
1. Serial No.			2. Name (Last-First-Middle)				3. Date Of Birth			4. Vol. Prof		5. Sex	6. CS - ECD	
524345			PHILLIPS DAVID A				10 31 22			Non-0 5 Pt-1 10 Pt-2		M 1	03 14 60	
7. SCD		8. CSC Rmt.		9. CSC Or Other Legal Authority			10. Acct. Auth. Div.			11. FLGLI		12. LCD		13. MD, Sp. Enlist, Leo
02 12 54		Yes-1 No-2		Code 1 50 USCA 403			Mo. Da. Yr.			Yes-1 No-2		Mo. Da. Yr.		Yes-1 No-2

PREVIOUS ASSIGNMENT										
14. Organizational Designations					Code		15. Location Of Official Station			Station Code
CS/CS DEVELOPMENT COMPLEMENT DOP WH DIVISION					3600		WASH., D.C.			75013
16. Dept. - Field		17. Position Title		18. Position No.			19. Serv.		20. Occup. Series	
Dept - 1 USStd - 3 Frgn - 5		Code 1 OPS OFFICER		031460			GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD	24. Date Of Grade		25. PS No.		26. Appropriation Number	
14 3		\$11835		D	03 14 60		02 17 61		0320 1998	

ACTION							
27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee	Code	30. Separation Data
REASSIGNMENT		56	04 17 60		REGULAR	01	

PRESENT ASSIGNMENT										
31. Organizational Designations					Code		32. Location Of Official Station			Station Code
DOP WH BRANCH A					4617		WASH., D. C.			75013
33. Dept. - Field		34. Position Title		35. Position No.			36. Serv.		37. Occup. Series	
Dept - 1 USStd - 3 Frgn - 5		Code 1 OPS OFFICER		0624			GS		0136.01	
38. Grade & Step		39. Salary Or Rate		40. SD	41. Date Of Grade		42. PS No.		43. Appropriation Number	
14 3		\$11835		D	03 14 60		02 17 61		0135 1000 1000	
44. Remarks										

04-26-60-11X

SECRET  
(When Filled In)

PAS: 14 MARCH 1960  
NOTIFICATION OF PERSONNEL ACTION

1. Serial No. 524345		2. Name (Last-First-Middle) DAVID A PHILLIPS PHILLIPS DAVID A			3. Date Of Birth Mo. Da. Yr. 10 31 22			4. Vet. Pref. None-0 5 Pt-1 10 Pt-2 1		5. Sex M I		5. CS - EOD Mo. Da. Yr. 03 14 60		
7. SCD Mo. Da. Yr. 02 12 54		8. CSC Retmt. Yes-1 No-2 1		9. CSC Or Other Legal Authority 50 USCA 403		10. Apmt Affidav Mo. Da. Yr. 03 14 60			11. FEGLI Yes-1 No-2 1		12. LCD Mo. Da. Yr. 04 05 55		13. Enst. Fee Yes-1 No-2 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
16. Dept. - Field Dept - 1 USfld - 3 Frqn - 5		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	

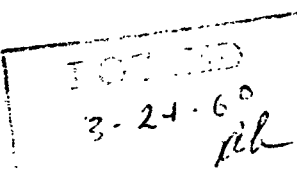
ACTION

27. Nature Of Action EXCEPTED APPOINTMENT		Code 17		28. Eff Date Mo. Da. Yr. 03 14 60		29. Type Of Employee REGULAR		Code 20		30. Separation Data	
--	--	------------	--	---	--	---------------------------------	--	------------	--	---------------------	--

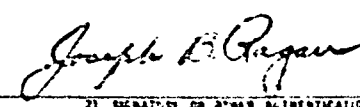
PRESENT ASSIGNMENT

31. Organizational Designations CS/CS DEVELOPMENT COMPLEMENT DOP WH DIVISION				Code 4688		32. Location Of Official Station WASH., D.C.				Station Code 75013	
33. Dept. - Field Dept - 1 USfld - 3 Frqn - 5		34. Position Title 1 OPS OFFICER				35. Position No. 031460		36. Serv. GS		37. Occup. Series 0136.01	
38. Grade & Step 14 3		39. Salary Or Rate \$ 11835		40. SD 0		41. Date Of Grade Mo. Da. Yr. 03 14 60		42. PSI Due Mo. Da. Yr. 09 17 61		43. Appropriation Number 0320 1998	

44. Remarks  
APPOINTEE.

  
 SECRET

**NOTIFICATION OF PERSONNEL ACTION**

1. NAME (Last, first, middle initial, and surname) <i>Philip A. Phillips</i>		2. DATE OF BIRTH <i>10/31/22</i>	3. JOURNAL OR ACTION NO.	4. DATE <i>18 Aug 58</i>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (Use Standard Terminology) <b>RESIGNATION (STAFF AGENT)</b>		6. EFFECTIVE DATE <i>19 Aug 58</i>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>60 (SCA 6031)</b>	
FROM <b>Ops Officer (PP) 6127</b>		TO		
<b>GS-0156-31-14 \$11,835.00 p/a</b>  <b>DDP/NRA</b> <b>Project Annex</b> <b>Egypt &amp; Arab States Branch</b> <b>Project PECTATE</b>  <b>Beirut, Lebanon</b>		8. POSITION TITLE	9. SERVICE SERVICE GRADE, SALARY	
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS		
12. FIELD OR DEPT. <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT. <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L. A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>SD:DP</b>		
15. SEX <b>M</b>	16. APPROPRIATION FROM: <b>9-3381-91-216</b> TO:	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>YES</b>	18. DATE OF APPOINTMENT BEST AS AVAILABLE (EXCLUSIONS APPLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
20. REMARKS:  <b>Subj debriefed by Security (Prague)</b> <b>Subj debriefed by Finance (Shipley)</b> <b>Subj debriefed by Personnel (Kreinholder)</b>				
FOR DIRECTOR OF PERSONNEL				
 21. SIGNATURE OR OTHER AUTHENTICATION				
ENTRANCE PERFORMANCE RATING:				

**POSTED ON**  
*15 Aug 58*

**SECRET**  
WHEN FILLED IN

**NOTIFICATION OF PERSONNEL ACTION**

1. NAME (Last - First - Middle - Initials - and Surname) <i>David P. Phillips</i>		2. DATE OF BIRTH 31 Oct 1922	3. JOURNAL OR ACTION NO.	4. DATE 16 Aug 57
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) REASSIGNMENT (CORRECTION) STAFF ASSIGN		6. EFFECTIVE DATE 30 Apr 1957	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 53 USC 4031	
FROM		TO		
Ops. Off (PP) BAF-126  GS-0136.31-14 \$10,535.00 p/a  DDP/VII Branch III Havana Cuba Station  Havana, Cuba		8. POSITION TITLE	Ops. Officer (PP) PSP-8127	
		9. SERVICE, SERIES, GRADE, SALARY	GS-0136.31-14 \$10,535.00 p/a	
		10. ORGANIZATIONAL DESIGNATIONS	DDP/SEA Project Annex Egypt and Arab States Branch Project FECTATE	
		11. HEADQUARTERS	Beirut, Lebanon	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT.	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REA. <input type="checkbox"/>		
15. SEX M		SD:DP		
16. APPROPRIATION FROM: 6-3545-55-055 TO: 7-3361-01-216		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT APPROVALS (YEAR-MONTH-DAY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
20. REMARKS:  *Subject arrived PCS Beirut 30 Apr 57. Project FECTATE was approved 15 Mar 57  <div style="text-align: right;"><b>POSTED ON</b> 05-30 P. L. King</div>				
FOR DIRECTOR OF PERSONNEL  <i>Louis W. Armstrong</i>				
ENTRANCE PERFORMANCE RATING:				
21. SIGNATURE OR OTHER AUTHENTICATION				

**SECRET**

1. ~~REPRODUCTION~~ COPY

*No*

**NOTIFICATION OF PERSONNEL ACTION**

1. NAME (OR PRINTED NAME, INITIALS AND SURNAME) <i>Donald P. [unclear]</i>		2. DATE OF BIRTH 31 Oct 1922	3. JOURNAL OR ACTION NO.	4. DATE 11 July 1957
THIS IS TO NOTIFY YOU OF THE FOLLOWING ACTION AFFECTING YOUR EMPLOYMENT:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) REASSIGNMENT (STAFF AGENT)		6. EFFECTIVE DATE 18 June 57	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403j	
FROM Ops Off (PP) BAF-125 GS-0136.31-14 \$10,535.00 p/a DDP/WK BRANCH III Havana Cuba Station Havana, Cuba		8. POSITION TITLE Ops Officer (PP) BEP-8127	9. SERVICE SERIES, GRADE, SALARY CS-0136.31-14 \$10,535.00 p/a	
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS DDP/NEA Project Annex Egypt and Arab States Branch Project FEETATE Beirut, Lebanon		
<input checked="" type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPT'L	<input checked="" type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT <input type="checkbox"/> 10 POINT <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> SD:DP		
15. SEX M	16. APPROPRIATION FROM: 6-3546-56-055 TO: 7-3381-91-215	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
20. REMARKS:  <div style="text-align: right; border: 1px solid black; padding: 5px; display: inline-block;">POSTED ON 07-29 <i>[Signature]</i></div>				
FOR DIRECTOR OF PERSONNEL				
<i>Louis W. Armstrong</i>				
21. SIGNATURE OR OTHER AUTHENTICATION				

ENTRANCE PERFORMANCE RATING:

1. ~~XXXXXX~~ COPY

*File*

**SECRET**

U. S. GOVERNMENT PRINTING OFFICE 1954 O 2020

1. Payroll  2. Pay  3. Block No.  4. Slip No.

5. Grade and salary  
GS-14 \$10,320.00

**PAYROLL CHANGE DATA**

BASE PAY	OVERTIME	GROSS PAY	RET.	FEDERAL TAX	BOND	F. I. C. A.	STATE TAX	GROUP LIFE INS.	NET PAY

11. Appropriation(s) \_\_\_\_\_

12. Prepared by  
dak 1 Aug 58

13. Audited by \_\_\_\_\_

14. Remarks: \_\_\_\_\_

15. Date last equivalent increase  
1 APR 58

16. Old salary rate  
\$10,320.00

17. New salary rate  
\$10,535.00

18. Performance rating or satisfactory or below  
Satisfactory

19. Leave and conduct  
Satisfactory

20. Data (fill in appropriate spaces covering LWOP following periods):  
 In pay status at end of waiting period.  
 In LWOP status at end of waiting period.

21. Initials of Clerk \_\_\_\_\_

22. Standard Form No. 1126d—Revised  
Prescribed by Comp. Gen., U. S.  
Mar 26, 1954, General Regulations No. 107

**CONFIDENTIAL PAYROLL CHANGE SLIP — PERSONNEL COPY**

POSTED ON  
OFF-40  
AUG 10 1958

U. S. GOVERNMENT PRINTING OFFICE 1955-227105

1. Payroll  2. Pay  3. Block No.  4. Slip No.

5. Grade and salary  
GS-14 \$10,535.00

**PAYROLL CHANGE DATA**

BASE PAY	OVERTIME	GROSS PAY	RET.	FEDERAL TAX	BOND	F. I. C. A.	STATE TAX	GROUP LIFE INS.	NET PAY

11. Appropriation(s) \_\_\_\_\_

12. Prepared by  
dak 3 Feb 58

13. Audited by \_\_\_\_\_

14. Remarks:  
PURSUANT TO OGI DIRECTIVE  
EFFECTIVE 12 JAN 1955  
SALARY ADJUSTED TO: \$11,835

15. Date last equivalent increase  
7 Oct 58

16. Old salary rate  
\$10,535.00

17. New salary rate  
\$10,780.00

18. Performance rating or satisfactory or below  
Satisfactory

19. Leave and conduct  
Satisfactory

20. Data (fill in appropriate spaces covering LWOP following periods):  
 In pay status at end of waiting period.  
 In LWOP status at end of waiting period.

21. Initials of Clerk \_\_\_\_\_

22. Standard Form No. 1126d—Revised  
Prescribed by Comp. Gen., U. S.  
Mar 26, 1954, General Regulations No. 107

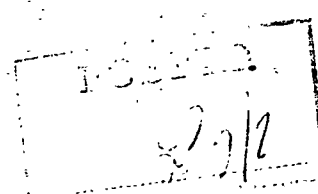
**CONFIDENTIAL PAYROLL CHANGE SLIP — PERSONNEL COPY**

POSTED ON  
OFF-40  
FEB 10 1958

CENTRAL INTELLIGENCE AGENCY

17-

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., OR MISS, LAST, FIRST, INITIALS), AND SURNAME: <b>Mr. David A. Phillips</b>		2. DATE OF BIRTH <b>21 Oct 1922</b>	3. JOURNAL OR ACTION NO.	4. DATE <b>7 Feb 1956</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Resignation*</b>		6. EFFECTIVE DATE <b>6 Feb 1956</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
FROM		TO		
<b>Ops Officer BW-229</b>  <b>GS-0136.31-14 \$10,320.00 per annum</b>  <b>DOP/PP Operations Staff</b> <b>Information Coordination Division</b> <b>Office of the Chief</b>  <b>Washington, D. C.</b>		8. POSITION TITLE		
		9. SERVICE, SERIES, GRADE, SALARY		
		10. ORGANIZATIONAL DESIGNATIONS		
		11. HEADQUARTERS		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE WWII OTHER S-PT. 10 POINT <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		NEW VICE I. A. REAL <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
15. SEX <b>M</b>		16. APPROPRIATION FROM: <b>6-2105-20</b> TO:		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>
		18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Texas</b>
20. REMARKS.				
				
<p><b>*to seek other employment.</b></p> <p><b>Statement of accrued annual leave to your credit will be forwarded with your final salary check.</b></p> <p style="text-align: right;"><b>57,---,---,---</b></p>				
ENTRANCE PERFORMANCE RATING		Director of Personnel <input type="checkbox"/> SIGNATURE OR OTHER AUTHENTICATION		

4. PERSONNEL FOLDER COPY

117-217/56





STANDARD FORM 50 (B PART)  
REV. APRIL 1955  
PROMULGATED BY  
U. S. CIVIL SERVICE COMMISSION  
CHAPTER XI, FEDERAL PERSONNEL MANUAL

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR-MISS-MRS-OR) GIVEN NAME (INITIALS), AND SURNAME		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE																											
MR. DAVID A. WELLS IPS		31 Oct 1922		4 Aug 1955																											
This is to notify you of the following action affecting your employment:																															
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY																												
Reassignment		14 Aug 1955	50 U.S.C. 1033																												
FROM		TO																													
Paramilitary Off. D-156		Ops Officer BW-229																													
GS-0136.11-14 \$10,320.00 per annum		GS-0136.31-14 \$10,320.00 per annum																													
DDP/PP Operations Staff Office of the Chief		DDP/PP Operations Staff Information Coordination Div. Office of the Chief																													
		Washington D. C.																													
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL																													
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION																													
<table border="1"> <tr> <td>POST</td> <td>WAR</td> <td>OTHER</td> <td>5-PP</td> <td>10-POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		POST	WAR	OTHER	5-PP	10-POINT											<table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>S. A.</td> <td>REAL.</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>			NEW	VICE	S. A.	REAL.								
POST	WAR	OTHER	5-PP	10-POINT																											
NEW	VICE	S. A.	REAL.																												
		SDSIP																													
15. SEX (M-F)	17. APPROPRIATION	18. SUBJECT TO U.S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS SHEET)	20. FEDERAL RESIDENCE (CLAIMED PROVED)																											
M	5-2101-20 6-2101-20	Yes		STATE: Texas																											
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.																															
<p style="text-align: center;">10,320</p> <p style="text-align: right;"><i>David A. Wells</i></p>																															
Director of Personnel																															
ENTRANCE PERFORMANCE RATING																															
OTHER AUTHENTICATION																															

7/8 8/11/55

STANDARD FORM 50 (PART)  
REV. APRIL 1951  
PROMULGATED BY  
U.S. CIVIL SERVICE COMMISSION  
CHAPTER 51, FEDERAL PERSONNEL MANUAL

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION **PC 26 April 1955**  
**SR 4033** **oop**

1. NAME (MR., MISS, MRS., OR MISSIVE NAME INITIALS, AND SURNAME) <b>Mr. David A. Phillips</b>		2. DATE OF BIRTH <b>31 October 1922</b>	3. JOURNAL OR ACTION NO. <b>SR 4033</b>	4. DATE <b>1 April 1955</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Excepted Appointment</b>		6. EFFECTIVE DATE <b>1 April 1955</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 j</b>	
FROM		TO		
8. POSITION TITLE <b>Paramilitary Off. PM BW-156-14</b>		9. SERVICE SERIES GRADE, SALARY <b>GS-0136.11-14 \$9,000.00 P/a</b>		
10. ORGANIZATIONAL DESIGNATIONS <b>DDP/P&amp;P Operations Staff Office of the Chief</b>		11. HEADQUARTERS <b>Washington, D. C.</b>		
12. FIELD <input type="checkbox"/> DEPARTMENTAL <input type="checkbox"/>		12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/>		
13. VETERAN'S PREFERENCE 10-POINT <input checked="" type="checkbox"/> DISAB OTHER		14. POSITION CLASSIFICATION ACTION NEW VICE T.A. SPECIAL		
15. RACE <b>W</b>		16. FROM <b>5-2101-20</b>	17. DATE OF APPOINTMENT AFFIDAVIT'S (EXCEPTIONS 1047) <b>28 April 1955</b>	18. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVEN <b>Staff Texas</b>
19. REMARKS. This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements. <b>Subject to a satisfactory physical examination.</b>				
RC 06 DUG 04-01-55 CSEED 04-01-55 LGD 04-01-55				
ENTRANCE PERFORMANCE RATING: <b>3</b>				
Director of Personnel				

TAD  
5/2/55

SECRET

12 May 1966

MEMORANDUM FOR: Chief, Contract Personnel Division

ATTENTION : Mary Kay Spink

SUBJECT : Verification of Contract Service  
PHILLIPS, David A.

In order to establish the salary, LCD and to compute the SCD for both leave and retirement purposes, it is necessary to verify the contract service and salary of David A. PHILLIPS, DOB 31 October 1922, who claims employment with this Agency in a contract status from 27 March 1952 to 1 April 1955 and from 19 August 1958 to 13 March 1960.

Signed

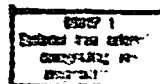
Lovell P. Moore

Deputy Chief, Transactions & Records Branch

Distribution:

- 0 & 1 - Addressee
- 1 - OPF - PHILLIPS
- 1 - TRR - Chrono

SECRET



4 February 1971

David A. Phillips

30 June 1966

31 March 1955

4 March 1954

WH/Personnel

30 June 1966

MEMORANDUM FOR : Chief, TRB

SUBJECT : Record of Contract Service for  
David A. Phillips

1. Per your request we are forwarding record of Subject's contract service:

<u>Date</u>	<u>Action</u>
4 March 1954	Hired as Contract Employee
31 July 1954	Terminated
1 August 1954	Hired as Contract Employee
31 March 1955	Terminated
19 August 1953	Hired as Contract Agent
13 March 1950	Terminated

2. Subject was employed on a full time basis with leave benefits from 4 March 1954 through 31 March 1955. Accordingly, this entire period is "creditable" for establishing his annual leave category. However, the period from 19 August 1953 through 13 March 1950, as an independent contractor, is not creditable for this purpose. Only the period from 4 March 1954 through 31 December 1954 is "creditable for Civil Service Retirement, since Contract Employee's were mandatorily covered by Social Security as of 1 January 1955. 1951-1953 Contract Agent time is not creditable

3. Attached is OF record of Agency service with salary breakdown.

Rogers C. Brooks  
Acting Chief, Contract Personnel Division

Distribution:  
Orig - Addressee  
2 - CPD

16 June 1966

Chief, Contract Personnel Division  
ATTN: Mary Kay Slink

Compensation and Tax Division  
Office of Finance

Agency Service of David Atlee PHILLIPS

The records of the Office of Finance show the following Agency service for Subjects:

**Contract Agents:**

EOD 1 February 1951 @ \$600.00 P/M  
Term 28 February 1951 @ \$600.00 P/M

EOD 25 January 1952 @ \$6000.00 P/A  
Term 31 August 1953 @ \$6000.00 P/A

EOD 4 March 1954 @ \$7200.00 P/A  
Pay Inc. 1 August 1954 @ \$8360.00 P/A  
Term. 31 March 1955 @ \$8360.00 P/A

**Staff Employees:**

Ex. Appt. 1 April 1955 @ \$9600.00 P/A  
Res. 6 February 1956 @ \$10,320.00 P/A

**Staff Agents:**

Ex. Appt. 7 February 1956 @ \$10,320.00 P/A  
PSI 7 October 1956 @ \$10,535.00 P/A  
Pay Paise 12 January 1958 @ \$11,595.00 P/A  
PSI 6 April 1958 @ \$11,835.00 P/A  
Res. 13 August 1958 @ \$11,835.00 P/A

**Contract Agents:**

EOD 19 August 1958 @ \$7,200.00 P/A  
Term. 13 March 1960 @ \$7,200.00 P/A

**Staff Employees:**

Ex. Appt. 14 March 1960 @ \$11,835.00 P/A  
Subject has been a Staff Employee since 14 March 1960.

JOSEPH H. HUDSON  
Chief

CLASSIFICATION

**FITNESS REPORT**

**SECTION A**

**GENERAL INFORMATION**

1. EMPLOYEE NUMBER <b>024345</b>	2. NAME (Last, first, middle) <b>Phillips, David A.</b>	3. DATE OF BIRTH & SEX <b>10/31/22 M</b>	4. GRADE & SD <b>GS-18 D</b>
7. OFFICIAL POSITION TITLE <b>Chief, WE Division</b>	8. OFF. DIV./BR OF ASSIGNMENT <b>DDO/WH/O-CH</b>	9. CURRENT STATION <b>Headquarters</b>	10. CODE (if any) <b>S</b> <b>DP</b>
11. TYPE OF APPOINTMENT <b>C</b> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> CONTRACT <input type="checkbox"/> OTHER (Spec.) <input type="checkbox"/> TEMPORARY <input type="checkbox"/>		12. TYPE OF REPORT <b>E</b> ANNUAL <input type="checkbox"/> REASSIGNMENT <input type="checkbox"/> SPECIAL <input type="checkbox"/>	
13. REPORTING PERIOD (7/09-20-) <b>1 May 1973 - 31 March 1974</b>		14. DATE REPORT DUE IN O.P. <b>30 April 1974</b>	

**SECTION B**

**QUALIFICATIONS UPDATE**

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

**SECTION C**

**PERFORMANCE EVALUATION**

**U - Unsatisfactory** Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

**M - Marginal** Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

**P - Proficient** Performance is satisfactory. Desired results are being produced in the manner expected.

**S - Strong** Performance is characterized by exceptional proficiency.

**O - Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

**SPECIFIC DUTIES**

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO.	RATING LETTER
1 <b>Plans, organizes and implements the programs of the Operations Directorate in the Western Hemisphere area.</b>	<b>S</b>
2 <b>Supervises approximately 255 staff employees in Headquarters and 310 in 26 Stations and Bases abroad.</b>	<b>S</b>
3 <b>Represents the Agency in contacts with senior representatives of liaison services.</b>	<b>O</b>
4 <b>Represents the Directorate and/or the Agency in official contacts with other components of our government.</b>	<b>S</b>
5 <b>Implements the EEO policy of the Agency.</b>	<b>S</b>
6	

**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**

45

CLASSIFICATION

**SECRET**

054581

E2, IMPDET CL BY



CLASSIFICATION

SECTION D 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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

This report covers Mr. Phillips' initial period as a Division Chief. It coincided with a period of unusually high stress and strain in the Western Hemisphere Division, particularly in relationships with the State Department and in the problems left over from our drastic measures designed to protect ourselves against a potential counterintelligence disaster. The most important fact to be recorded about Mr. Phillips' direction of his Division during this period is that he kept operations at the top of his priority list, and that as a result our operational achievements in the area during the past year have been on the whole better than in the year before.

Mr. Phillips is developing into a very competent manager, and has handled well the problems involved in adjusting to decreasing manpower ceilings. He is prudent in the use of official funds. He is a good supervisor and is providing excellent leadership to his subordinates, who have responded with a clear improvement in morale during the period since Mr. Phillips assumed charge.

(continued next page)

SECTION E CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 9. IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION.

DATE: 22 April 1974. OFFICIAL TITLE OF SUPERVISOR: Associate Deputy Director for Operations. TYPED OR PRINTED NAME AND SIGNATURE: David H. Blee

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE: HAVE ATTACHED / HAVE NOT ATTACHED. DATE: 23 April 1974. SIGNATURE OF EMPLOYEE: [Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL: Concur. An excellent operational leader who is learning rapidly the nuances of a Division Chief's job in Washington. He is an inspirational leader whose management techniques and abilities are still developing. All in all a first rate performance.

DATE: 11 June 1974. OFFICIAL TITLE OF REVIEWING OFFICIAL: Deputy Director for Operations. TYPED OR PRINTED NAME AND SIGNATURE: William E. Nelson

4. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT. DATE: 6/21/74. SIGNATURE OF EMPLOYEE: [Signature]

CLASSIFICATION

SECRET

SECRET

Fitness Report - David A. Phillips

Section D., Continued:

The most dramatic challenge to the capabilities of the WH Division in the past year flowed from the overthrow of the Allende government in Chile. Overall, the intelligence reporting was timely and accurate, the adjustments to our political action programs skillfully made, and the responses to Congressional inquiry well handled.

It is as a senior operations officer that Mr. Phillips has had the greatest experience, and it is not surprising that he has made an excellent input into the improvement of operational matters throughout the many areas of this hemisphere for which he is responsible. He has also consistently handled the many and important senior liaison contacts which he has made during this year, both at Headquarters and during field visits, with great effectiveness.

CLASSIFICATION

FITNESS REPORT

<b>SECTION A GENERAL INFORMATION</b>					
1. EMPLOYEE NUMBER 024345	2. NAME (Last, first, middle) Phillips, David A.	3. DATE OF BIRTH 10/31/22	4. SEX M	5. GRADE GS-18	6. SD D
7. OFFICIAL POSITION TITLE Chief, WH Division		8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/O-CH	9. CURRENT STATION Headquarters	10. CODE (if any) INQR	DP
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> C CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL
<input type="checkbox"/> REASSIGNMENT			<input type="checkbox"/> SPECIAL		
13. REPORTING PERIOD (from-to) 1 May 1973 - 31 March 1974			14. DATE REPORT DUE IN O.P. 30 April 1974		

**SECTION B QUALIFICATIONS UPDATE**

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

**SECTION C PERFORMANCE EVALUATION**

**U- Unsatisfactory** Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

**M- Marginal** Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

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**S- Strong** Performance is characterized by exceptional proficiency.

**O- Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

**SPECIFIC DUTIES**

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

<b>SPECIFIC DUTY NO. 1</b> Plans, organizes and implements the programs of the Operations Directorate in the Western Hemisphere area.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 2</b> Supervises approximately 255 staff employees in Headquarters and 310 in 26 Stations and Bases abroad.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 3</b> Represents the Agency in contacts with senior representatives of liaison services.	<b>RATING LETTER</b> O
<b>SPECIFIC DUTY NO. 4</b> Represents the Directorate and/or the Agency in official contacts with other components of our government.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 5</b> Implements the EEO policy of the Agency.	<b>RATING LETTER</b> S
<b>SPECIFIC DUTY NO. 6</b>	<b>RATING LETTER</b>

**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

11 JUL 1974

*[Signature]*

CLASSIFICATION

SECTION D

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

This report covers Mr. Phillips' initial period as a Division Chief. It coincided with a period of unusually high stress and strain in the Western Hemisphere Division, particularly in relationships with the State Department and in the problems left over from our drastic measures designed to protect ourselves against a potential counterintelligence disaster. The most important fact to be recorded about Mr. Phillips' direction of his Division during this period is that he kept operations at the top of his priority list, and that as a result our operational achievements in the area during the past year have been on the whole better than in the year before.

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(continued next page)

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

9

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

DATE

22 April 1974

OFFICIAL TITLE OF SUPERVISOR

Associate Deputy Director for Operations

TYPED OR PRINTED NAME AND SIGNATURE

David F. Blee

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE

HAVE ATTACHED

HAVE NOT ATTACHED

DATE

23 APRIL 1974

SIGNATURE OF EMPLOYEE

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur. An excellent operational leader who is learning rapidly the nuances of a Division Chief's job in Washington. He is an inspirational leader whose management techniques and abilities are still developing. All in all a first rate performance.

DATE

11 June 1974

OFFICIAL TITLE OF REVIEWING OFFICIAL

Deputy Director for Operations

TYPED OR PRINTED NAME AND SIGNATURE

William E. Nelson

4. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT

DATE

June 21, 1974

SIGNATURE

EMPLOYEE

CLASSIFICATION

Fitness Report - David A. Phillips

**Section D., Continued:**

The most dramatic challenge to the capabilities of the WH Division in the past year flowed from the overthrow of the Allende government in Chile. Overall, the intelligence reporting was timely and accurate, the adjustments to our political action programs skillfully made, and the responses to Congressional inquiry well handled.

It is as a senior operations officer that Mr. Phillips has had the greatest experience, and it is not surprising that he has made an excellent input into the improvement of operational matters throughout the many areas of this hemisphere for which he is responsible. He has also consistently handled the many and important senior liaison contacts which he has made during this year, both at Headquarters and during field visits, with great effectiveness.

SECRET

CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER 024345	2. NAME (Last, first, middle) Phillips, David A.	3. DATE OF BIRTH 31 Oct 22	4. SEX M	5. GRADE GS-17	6. SD D
7. OFFICIAL POSITION TITLE Chief of Station		8. OFF/DIV/BR OF ASSIGNMENT DDP/WII/3-Caracas	9. CURRENT STATION Venezuela		10. NO CD 3
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL
<input type="checkbox"/> REASSIGNMENT			<input type="checkbox"/> SPECIAL		
13. REPORTING PERIOD (from-to) 1 February 1972 - 31 March 1973			14. DATE REPORT DUE IN O.P. 31 May 1973		

**SECTION B QUALIFICATIONS UPDATE**

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**SECTION C PERFORMANCE EVALUATION**

U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S-Strong Performance is characterized by exceptional proficiency.

O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

**SPECIFIC DUTIES**

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	RATING LETTER
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
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

221014

SECRET  
CLASSIFICATION

SECTION D

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

JAN 11 10 44 AM '74

SEE ATTACHED

SECTION E

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, C AND D OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
	<i>[Signature]</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
7 January 1974	Chief of Station	<i>Theodore G. Shackley</i> Theodore G. Shackley
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Mr. Phillips is a highly experienced senior operations officer with outstanding leadership ability. In both the Chief of Station positions covered by this report his performance was superior in every important respect.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
8 Jan 1974	ADD/O	<i>David H. Blee</i> David H. Blee

CLASSIFICATION  
SECRET

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SECTION D      NARRATIVE COMMENTS

1. In the period covered by this report Mr. Phillips was the Chief of Station Brasilia during the time frame February to August 1972. After that Mr. Phillips became the Chief of Station, Caracas and served in Venezuela during the period August 1972 to April 1973. At both of these posts Mr. Phillips was responsible for managing an average of [ ] Agency employees. Additionally, Mr. Phillips supervised in this period an average FY budget of [ ] which was spent on FI, CA, CI, anti-narcotics and protected economic intelligence operations. American policy interests in Brazil and Venezuela are high in terms of the United States scale of values for Latin America. This means that Mr. Phillips was assigned to two prestige posts during a fifteen month time span.

2. As a manager Mr. Phillips is operations oriented. In view of this he places his time, attention and command emphasis on programs that are designed to acquire intelligence and agents. This approach has consistently produced results in terms of FI and CA operations which are targeted against the host country.

3. Mr. Phillips was also active at both posts as an operations manager who focused Station resources on the Soviet target, protected economic intelligence and the anti-narcotics effort. Unfortunately, as these programs moved into gear Mr. Phillips was also in motion between Stations, or had just been in place at his second Station for less than a year. As a result one can only say that Mr. Phillips made all the right moves in his managerial duties against these priority targets. The brevity of his program implementation at each of the two posts did not provide a solid basis, however, for measuring tangible success. In short Mr. Phillips deserves high marks for initiative, drive and imagination on programs that were receiving increased attention at Headquarters.

4. The myriad problems that are faced when a Station moves its location from one city to another were still challenging Mr. Phillips when he left Brasilia. In overview terms, however, the move from Rio de Janeiro to Brasilia was well done. This does not mean that Mr. Phillips' successor at Brasilia did not have some gaps to fill or adjustments to make in the administrative field. The scope of these actions, however, was in the realm of the reasonable and attests to the fact that while his basic interests are in

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-2-

operations, administration per se is not a totally alien field to Mr. Phillips.

5. In representational terms Mr. Phillips did a sound job in winning and maintaining the respect of the American Ambassadors in Brazil and Venezuela. This is due in large measure to Mr. Phillips' native charm, area knowledge, and language skills in Spanish and Portuguese. In addition, Mr. Phillips is people oriented, and this makes it possible for him to sell himself and CIA to senior American officials at the Ambassador level.

6. In personal terms Mr. Phillips is a hard-working, dedicated officer who is a good team player. This officer has the intent, capability and desire to fulfill the needs of the Organization. He is particularly well versed in CA skills and is politically oriented. As a result he likes the challenge of election operations and is well qualified in this area.

7. Mr. Phillips' total performance during the period covered by this report merits an evaluation of Strong.

8. In terms of future assignments Mr. Phillips is likely to be at his professional best in field activities. This officer is highly specialized in Latin American affairs, but he is perfectly capable of being a Station Chief at most Agency posts in Europe or Asia.

9. Mr. Phillips' activities come to the attention of the Rating Officer on a daily basis.

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				024345			
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Phillips, David A.			31 Oct 1922	M.	GS-17	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/RR OF ASSIGNMENT		8. CURRENT STATION	
Chief of Station				DDP/WH/5		Brasilia	
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 checked="" type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR		<input type="checkbox"/> REASSIGNMENT EMPLOYEE
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 July 1971 - 31 January 1972			
<b>SECTION B</b>				<b>PERFORMANCE EVALUATION</b>			
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
SPECIFIC DUTY NO. 2						RATING LETTER	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	

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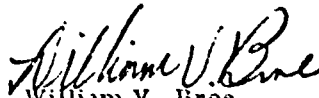
(When Filled In)

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 and cost consciousness in the use of personnel, space, equipment and funds, may be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>					
MEMORANDUM					
Please see attached MEMORANDUM IN LIEU OF FITNESS REPORT.					
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			
27 January 1972		/s/ David A. Phillips			
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	
10 January 1972		Chief, WH Division		William V. Broe	
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
Please see attached.					
DATE		OFFICIAL TITLE OF REVIEWING OFFICIAL		TYPED OR PRINTED NAME AND SIGNATURE	
		ADDP		Cord Meyer, Jr.	

SECRET

Mr. Phillips continues to show excellent growth potential and his breadth of capabilities qualifies him for advancement to senior echelons.

I rate Mr. Phillips as very Strong as Chief of Station, Brasilia.



William V. Broe

Chief

Western Hemisphere Division

I certify that I have seen this memorandum:

/s/ David A. Phillips  
David A. Phillips

This fitness report is being sent to David A. Phillips in Brasilia for his signature and to be returned to Headquarters for file.

27 January 1972

Date

Comments of Reviewing Official:

I completely agree with this high rating and should add that subject has handled a continuing Congressional interest in Brazil with a rare combination of diplomatic tact and sound judgment.

15 Jan '72

Date



Cord Meyer Jr.

Assistant Deputy Director for Plans

10 January 1972

**MEMORANDUM IN LIEU OF FITNESS REPORT**

**SUBJECT: David A. Phillips  
1 July - 31 December 1971**

This memorandum is in lieu of a fitness report to cover Mr. Phillips' performance during the period 1 July to 31 December 1971. This rating is being prepared in view of the rater's imminent departure from the Division.

Last month Mr. Phillips was promoted from GS-16 to GS-17. There is no better evidence of the high esteem in which he is held by his superiors in the Agency.

During this rating period Mr. Phillips transferred the station from Rio de Janeiro to Brasilia. This move, however, divorces the Chief of Station from the main area of operations, Rio de Janeiro. In spite of this Mr. Phillips, through much extra effort and time on his part, has been able to maintain a high operational tempo in the station.

Station relations with key people in the Brazilian government, especially the security agencies, have been highly productive but through recent efforts, these relations have been placed on a much higher plane with the decision [redacted] to give the station copies of the briefings especially prepared for [redacted]  
[redacted]

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				024345			
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle) <b>Phillips, David A.</b>			2. DATE OF BIRTH <b>31 Oct 1922</b>	3. SEX <b>M</b>	4. GRADE <b>GS-16</b>	5. SO <b>D</b>	
6. OFFICIAL POSITION TITLE <b>Chief of Station</b>			7. OFF. DIV./BR OF ASSIGNMENT <b>DDP/WH/5</b>		8. CURRENT STATION <b>Rio de Janeiro</b>		
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 checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT SUPERVISOR	<input type="checkbox"/>	
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. <b>30 April 1971</b>				12. REPORTING PERIOD (From - to) <b>1 April 1970 - 30 June 1971</b>			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
See attached memorandum.							
SPECIFIC DUTY NO. 2						RATING LETTER	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						<b>S</b>	

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses in the current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p>			
AUG 5		AUG 5 11 05 AM '71	
MAIL ROOM			
See attached memorandum.			

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				
11 August 1971	/s/ David A. Phillips				
2. BY SUPERVISOR					
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION				
	Copy of report has been sent to Mr. Phillips for acknowledgment.				
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE			
30 June 1971	Chief, WH Division	/signed/ William V. Broe			
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
See attached.					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE			
	Assistant Deputy Director for Plans	/signed/ Cord Meyer, Jr.			

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30 June 1971

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Mr. David A. Phillips  
1 April 1970 - 30 June 1971

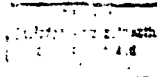
This memorandum is in lieu of the fitness report on Mr. Phillips as Chief of Station, Rio de Janeiro, during the period 1 April 1970 to 30 June 1971.

Mr. Phillips is a highly capable, versatile and imaginative Operations Officer and manager who makes a substantial contribution to the Clandestine Service.

The above statement is borne out by the fact that faced with a highly difficult, sensitive operational problem of the utmost priority in the fall of 1970, the Rater immediately thought of Mr. Phillips as the man to head the Task Force and received immediate and enthusiastic endorsement from the Deputy Director for Plans and the Director for Mr. Phillips' assignment. He was recalled from Brazil, took over the Task Force, and handled it in an outstanding manner.

My first statement is further borne out by the fact that Ambassador Rountree, on a recent visit to Washington, made a special effort to express to the Rater his appreciation for Mr. Phillips' support to him and the Embassy and to express further his appreciation to the Agency for furnishing him a man of Mr. Phillips' caliber.

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- 2 -

Mr. Phillips has a large, widely spread operation with Bases in Brasilia, [redacted] and Sao Paulo. However, he has succeeded in keeping them well coordinated and dead on the target.

I rate Mr. Phillips as Strong as Chief of Station, Rio de Janeiro.

*William V. Broe*  
William V. Broe

Chief  
Western Hemisphere Division

I certify that I have seen  
this memorandum:

\_\_\_\_\_  
David A. Phillips

\_\_\_\_\_  
Date

Comments of Reviewing Official: I would have rated this performance as "very strong". Excellent political judgment and the ability to handle the most delicate situations with tact and discretion characterize this performance.

*Cord Meyer Jr.*  
Cord Meyer Jr.

Assistant Deputy Director for Plans

22 July 71  
Date

SECRET

S-E-C-R-E-T

TRAINING REPORT

Course # 3/71

Specialized Training in Weapons for  
Self-Defense and Countermeasures Against  
Vehicular Kidnapping

Date: 2-5 February 1971

Trainee: PHILLIPS, David A.

Office: WH

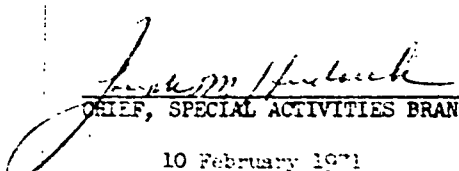
Purpose and Scope of the Course:

The course provides basic proficiency training in the use of weapons for self-defense and in the techniques of evasive driving to counter vehicular kidnapping for Agency officers being assigned to hostile or unstable political and operational environments abroad.

Achievement Record:

This is to certify that Mr. Phillips has satisfactorily completed the prescribed course of instruction.

FOR THE DIRECTOR OF TRAINING:

  
CHIEF, SPECIAL ACTIVITIES BRANCH

10 February 1971

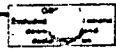
DATE

S-E-C-R-E-T

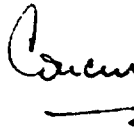

SECRET  
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						024345	
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Phillips, David A			10/31/22	M	16	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
COS			DDP/WH/Br. 5		Rio de Janeiro		
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 checked="" type="checkbox"/>	ANNUAL	<input checked="" type="checkbox"/>	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify):			<input type="checkbox"/>	SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 April 1969 - 31 March 70			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
See attached memorandum.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	

5 AUG 1970  
DC



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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 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.</p> <p style="text-align: center;">AUG 4 3 49 PM '70</p> <p style="text-align: center;">See Attached Memorandum in Lieu of Fitness Report.</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		
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	
15 July 1970	Chief, WH Division	/signed/ William V. Broe	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
21 JUL 1970	Assistant Deputy Director for Plans	 Cord Meyer, Jr.	

SECRET

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15 July 1970

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Mr. David A. Phillips  
1 April 1969 - 31 March 1970

This memorandum is in lieu of the fitness report on Mr. David A. Phillips as Chief of Station, Rio de Janeiro, during the period 1 April 1969 to 31 March 1970.

During this period Mr. Phillips took over command of the Rio Station. It is typical of Mr. Phillips that he made excellent preparation for this assignment, including a full-time course in the Portuguese language.


Mr. Phillips has brought to his new position the operational zeal and enthusiasm that has characterized all of his previous positions. Brazil, by the very nature of its size but, more importantly, the type of "strait jacket" government in power, is a difficult place to operate on a broad plain. Mr. Phillips has the station moving and real effort and progress is seen on the more difficult targets, such as the Soviets.

He has excellent relations within the embassy and is recognized for his contribution to the Country Team. He, of course, handles his liaison contacts with mature style and is very actively developing a number of contacts in the local community.

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Mr. Phillips is a good supervisor of men and the present high morale of the Rio de Janeiro Station and its Bases is a living proof of this. He furnishes good operational planning and guidance and exhibits a high degree of cost consciousness.

I rate Mr. Phillips as Strong as Chief of Station, Rio de Janeiro.



William V. Broe  
Chief

Western Hemisphere Division

I certify that I have seen this memorandum:

  
\_\_\_\_\_  
David A. Phillips

26 Sept. 1970  
Date

Date of Report  
15 January 1970

LANGUAGE TRAINING REPORT

Student Name:  
PHILLIPS, DAVID A.

Office:  
WH

Courses:  
PORTUGUESE FULL-TIME

Inclusive Dates:  
11/03/69-12/18/69

Proficiency Level before and After Training		
	Before	After
Speaking	--	3 *
Aural Comp	--	3 *
Read Comp	--	3 *
* Instructors Estimate vice Official Test		

Hours of Instruction  
Scheduled 244 Actual 108  
Absences 28

LANGUAGE TRAINING AIMS AND EVALUATION CRITERIA

The general aim of this course of study was to provide the student with a command of a foreign language in a skill and at the level set by the sponsoring office. Speaking, aural comprehension and reading comprehension, as required, were emphasized. Fluency and accuracy were given equal importance in training and in evaluation of the student. Cultural matters were covered only incidentally.

This student evaluation is based on (1) Instructor and linguist observations; (2) regularly administered oral and written achievement tests; (3) a final comprehensive achievement examination. The achievement rating reflects only performance and achievement in the course and is conditioned by the length of time the student spent in training, achievement potential based upon his or her aptitude for language study and upon motivation. This rating should not be confused with the Proficiency Rating which is submitted separately on form 1273, Certification of Language Proficiency.

PROGRESS IN ACHIEVING COURSE AIMS

(Overall progress in the course is shown as unsatisfactory, marginal, satisfactory, above average, superior when compared against established standards for such training).

Speaking	Aural Comprehension	Reading Comprehension
SUPERIOR	SUPERIOR	N.A.

PERFORMANCE EVALUATION

In six weeks the student covered the entire DLI course of 75 lessons which usually takes 4 to 6 months to complete. His study habits and approach to language learning were excellent and he made maximum use of the time available.

The joint decision by instructor and student to rush through 75 lessons was based on:  
(1) the student's determination to make as much of a conversion from Spanish to Portuguese as possible and  
(2) on the instructor's faith and confidence in the student's ability to do so.

In cases where the principal objective is to convert a student's command of Spanish to an equivalent level in Portuguese, the point is often reached where the student is able to understand and make himself understood most adequately without,  
See reverse side for additional comment

For the Director of Trainings

*Renee T. ...*  
Instructor  
*J. R. Williams*  
Department Chief  
Language School/WH

however, his having achieved a corresponding tested level because of the remaining influence of Spanish.

In the case of this student, I judge his command of the language to be already adequate for all situations he may encounter in the field. So that while he may not test quite elementary, in reality, and as far as ability to communicate effectively is concerned, he would have to be rated intermediate.



SECRET

TECHNICAL SERVICES DIVISION -- TECHNICAL SCHOOL

SHORT RANGE AGENT CONTACT SURVEY (A-106)

Training Report

Name : PHILLIPS, David A.  
Office: WH/COG  
Date : 6 June 1969

1. OBJECTIVES:

To provide a general knowledge in:

- a. Selected gear used for clandestine short range agent contacts. Included are representative samples of:

One way RF radio devices; two way RF radio devices; two way carrier current devices; optical communicators; and special telephone devices used for establishing agent contact.

- b. The philosophy, purpose, considerations and manageability of short range agent contact systems; including message security, link security, reliability and feasibility of agent contact systems.

*Lawrence H. Thomas*

INSTRUCTOR  
TSD/TECHNICAL SCHOOL

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
				024345		
<b>SECTION A GENERAL</b>						
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Phillips, David A.		10/31/22	M	GS-16	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION		
Ops Officer			DDP/WH/COG	Hqs.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From- to-)			
04/69			1 April 68 - 31 March 68			
<b>SECTION B PERFORMANCE EVALUATION</b>						
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
<b>SPECIFIC DUTIES</b>						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).						RATING LETTER
SPECIFIC DUTY NO. 1						RATING LETTER
SPECIFIC DUTY NO. 2						RATING LETTER
SPECIFIC DUTY NO. 3						RATING LETTER
SPECIFIC DUTY NO. 4						RATING LETTER
SPECIFIC DUTY NO. 5						RATING LETTER
SPECIFIC DUTY NO. 6						RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>						RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						S

SECRET  
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties 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.</p>			
<p>See attached Memorandum in Lieu of Fitness Report.</p>			
<p>MAIL ROOM JUN 2 11 17 AM '69 OFFICE OF PERSONNEL</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 June 1969	/signed/ David A. Phillips		
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	
6 June 1969	Deputy Chief, WH Division	/signed/ John R. Horton	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>See attached.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
27 June 1969	Chief, WH Division	/signed/ William V. Broe	

SECRET

6 June 1969

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Mr. David A. Phillips  
1 April 1968 to 31 March 1969

Mr. Phillips continues to head the Division's program against the high-priority Cuban target, although he has also been selected to fill an unusually responsible job overseas in the coming year, both of which jobs testify to the high regard in which he is held by his superiors in the Agency. Mr. Phillips has had the difficult task of presiding over a show which is being cut back, in terms of money and people, and in which task he has played a major role. At the same time as doing a pruning job, he has had to try to maintain a vigorous program and to keep up enthusiasm. His own qualities of personal leadership and of magnetism have done a great deal to keep up enthusiasm among his people. He has a positive attitude toward operations and is determined; his day-to-day concern is for developing new operations, and he has put all of his own notable vigor and drive into operational directions.

Mr. Phillips knows his target and knows Latin America well and he brings a good feel and insight into his work, which is never pedestrian or unimaginative. He speaks well and convincingly and makes a very good impression both within the Agency and outside, where he serves the Agency well in his relations with other government elements. He also writes notably well.

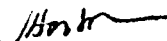
His task this year has not been easy for he has had to deal with an experimental situation, to a considerable extent, with the new Miami station which he is responsible for supporting and guiding. He has had to exercise a good deal of tact and diplomacy in the doing of it and he has done a good job of reconciling often conflicting views. He has shown a good head for costs in all of this.

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Mr. Phillips is a notably good supervisor, especially with younger officers, for whom he is an object of admiration and emulation. Mr. Phillips is a fast-moving, energetic person and he has some of the faults that often go with this virtue: he is impatient with details and "paper" with the consequence that if someone else does not do it for him, his work is sometimes marred by inaccuracies and imprecisions.

Without going into it, it should be noted that Mr. Phillips has had a very trying year personally and it is a proof of his strength of character that he has not only come through it but has hardly broken his stride in carrying out a demanding job, or being any less than his usual cheerful and charming self.

His performance has been very Strong.

  
John R. Horton  
Deputy Chief  
Western Hemisphere Division

I certify that I have seen  
this memorandum:

  
David A. Phillips

1 June 1969  
Date

Comments of Reviewing Official:

I concur in the above rating of Mr. Phillips. Dave Phillips is an operator in the solid professional sense of the word. I have great hopes for the Rio Station which he takes over early in 1970.

  
William W. Brice  
Chief

27 June 1969  
Date

Western Hemisphere Division

10/5/72



### CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency, retains one copy.)

OFFICER BEING RATED <b>DAVID A</b>		POST	
CHIEF, CAS		American Embassy, Caracas	
POSITION		GRADE	AGENCY
CHIEF, CAS			CAS
RATING PERIOD		DATE OF REPORT	
August 13, 1972 - October 31, 1972		December 8, 1972	
SIGNATURE OF REPORTING OFFICER		TITLE	
<i>Robert McClintock</i> Robert McClintock		AMBASSADOR	
SIGNATURE OF REVIEWING OFFICER		TITLE	

#### EVALUATION OF PERFORMANCE

Outstanding     Satisfactory     Unsatisfactory

- II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives?  Yes     No (If no, explain in detail below.)
- Has he seen this report?  Yes     No

#### NARRATIVE COMMENTS

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

The CAS Station Chief has been at the post only since August 13, 1972. Although this period may seem unusually short for the preparation of a performance evaluation, I would like to say that I have been enormously and favorably impressed by his performance during this initial period.

The CAS Station Chief comes to Venezuela from a series of highly responsible positions in which, I understand, he performed outstandingly. He has taken hold of his new position in a commanding manner and gives every indication of being thoroughly on top of his job. He is understanding of the Embassy's needs, professionally competent in his approach to his work, and highly articulate in explaining those facts and factors which are of importance to me and to other officers of the Embassy.

- III. I am very favorably impressed by the initial performance of the CAS Station Chief and I consider myself fortunate to have him with me at this post.



CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency, retains one copy.)

OFFICER BEING RATED <b>Chief CAS</b>		POST <b>American Embassy - BRASILIA</b>	
POSITION <b>Chief of Station</b>		GRADE <b>FSR-2</b>	AGENCY <b>DIA</b>
RATING PERIOD <b>11/1/71 - 6/29/72</b>		DATE OF REPORT <b>October 16, 1972</b>	
SIGNATURE OF REPORTING OFFICER <i>William M. Rountree</i> <b>William M. Rountree</b>		TITLE <b>Ambassador</b>	
SIGNATURE OF REVIEWING OFFICER		TITLE	

**EVALUATION OF PERFORMANCE**

Outstanding     Satisfactory     Unsatisfactory

II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives?     Yes     No    (If no, explain in detail below.)

Has he seen this report?     Yes     No

**NARRATIVE COMMENTS**

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

The previous incumbent completed his assignment at this post and departed on June 29, 1972. During the period under review he continued to perform in a highly creditable manner, working well with other members of the Embassy staff and handling the affairs of his agency in a most professional, efficient and effective manner.

In my last evaluation I stated that both the Agency and the Embassy were fortunate to have a man of the rated officer's abilities and qualities as CAS Chief at this important post. I am happy to say that his performance throughout his assignment here reinforced that view.



**CHIEF OF MISSION'S EVALUATION OF PERFORMANCE**

(Mission submits original and one copy directly to appropriate agency, retains one copy.)

OFFICER BEING RATED <b>Chief CAS</b>	POST <b>American Embassy BRASILIA</b>	
POSITION <b>Chief of Station</b>	GRADE <b>FSR-2</b>	AGENCY <b>DIA</b>
RATING PERIOD <b>11/1/70 - 10/31/71</b>	DATE OF REPORT <b>November 1, 1971</b>	
SIGNATURE OF REPORTING OFFICER <i>William M. Rountree</i> <b>William M. Rountree</b>	TITLE <b>Ambassador</b>	
SIGNATURE OF REVIEWING OFFICER	TITLE	

**EVALUATION OF PERFORMANCE**

Outstanding    
  Satisfactory    
  Unsatisfactory

II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives?     Yes     No    (If no, explain in detail below.)

Has he seen this report?     Yes     No

**NARRATIVE COMMENTS**

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

Mr. Phillips is an able officer and a highly cooperative member of the Country Team. I have been impressed and pleased with the degree of cooperation which exists between him and other members of the Embassy staff. He has, to the extent that is possible considering the nature of his work, cooperated in our efforts to bring about maximum coordination of reporting. With rare exceptions he has, I believe, kept me appropriately advised on all matters relating to his functions, and the material which he provides on a regular basis has been extremely useful in the discharge of my mission.

Mr. Phillips works quietly and discreetly and is alert to any situation which might create problems for the Embassy and the United States. I fully share the view of the DCM, expressed in a previous evaluation, that both Mr. Phillips and his wife conduct themselves in a quiet, friendly and wholly creditable manner.

I feel that both the Agency and the Embassy are fortunate in having a man of Mr. Phillips' abilities and qualities as CAS Chief at this important post.



LIMITED OFFICIAL USE (When Completed)



### CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency; retains one copy.)

OFFICER BEING RATED		POST	
David A. PHILLIPS		American Embassy, Rio de Janeiro	
POSITION	GRADE	AGENCY	
Chief CAS, Chief of Station	FSR-02	DIA	
RATING PERIOD	DATE OF REPORT		
7/1/70 - 10/31/70	November 1, 1970		
SIGNATURE OF REPORTING OFFICER	TITLE		
<i>[Signature]</i> A. BOONSTRA	Chargé d'Affaires a.i.		
SIGNATURE OF REVIEWING OFFICER	TITLE		

**EVALUATION OF PERFORMANCE**

Outstanding    
 Satisfactory    
 Unsatisfactory

II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives?     Yes     No    (If no, explain in detail below.)

Has he seen this report?     Yes     No

**NARRATIVE COMMENTS**

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

III. Mr. Phillips' performance during the four months covered by this evaluation has been highly satisfactory. For some years previous to my arrival here, in June 1970, I had been acquainted with him, and from this I already had a favorable impression of his qualities. This impression has continued and has improved further. He has worked quietly and discreetly, has kept me informed of all important developments, and has coordinated as necessary with other offices in the Embassy. His interest in his work, and his dedication to the job, have been outstanding. His relations with others are very good. Because of wide previous experience in this hemisphere, he frequently is helpful to Embassy officers in areas outside his own specialization. He appears to manage his personnel well. In functions outside the Embassy, both he and his wife conduct themselves in a quiet, friendly, and wholly creditable manner.

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### CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency, retains one copy.)

OFFICER BEING RATED <b>David A. PHILLIPS</b>		POST <b>American Embassy Rio de Janeiro</b>	
POSITION <b>Chief CAS, Chief of Station</b>		GRADE <b>FSR-03</b>	AGENCY <b>DIA</b>
RATING PERIOD <b>January 30 - June 30, 1970</b>		DATE OF REPORT <b>April 24, 1970</b>	
SIGNATURE OF REPORTING OFFICER <i>William Belton</i> <b>William Belton</b>		TITLE <b>Deputy Chief of Mission</b>	
SIGNATURE OF REVIEWING OFFICER <i>C. A. Boonstra</i> <b>C. A. BOONSTRA</b>		TITLE <b>CM, Chargé d'Affaires, a.i.</b>	

**EVALUATION OF PERFORMANCE**

Outstanding   
  Satisfactory   
  Unsatisfactory

II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives?   
  Yes   
  No   
 (If no, explain in detail below.)

Has he seen this report?   
  Yes   
  No

**NARRATIVE COMMENTS**

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

Phillips has been here too short a time and there has been too little opportunity for us to work together for me to be able to discuss his performance in detail. I am able to say, however, that he has impressed me and other Embassy officers with whom he works, including Ambassador Elbrick, very favorably, indeed. He is a cool-headed, straightforward, intelligent man who seems professionally very capable. He has a clear understanding of the appropriate role for himself and his organization within the Embassy and is working to achieve a genuinely low profile. He has already demonstrated his interest in the best possible relations with the rest of the U.S. Government organization and he knows how to act in order to achieve such a relationship. He has come to me a number of times to volunteer detailed information which he did not feel important enough to bother the Ambassador about, but he has kept the Ambassador fully informed about all those subjects which were of sufficient interest to him. I see every reason to assume that he will be a positive, constructive and very dependable and reliable factor in the Embassy.

Mrs. Phillips is an attractive and personable young lady who has particularly impressed my wife and me with her attitude and intellect.

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CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency, retains one copy.)

OFFICER BEING RATED <b>Chief CAS David A. Phillips</b>		POST <b>Santo Domingo</b>	
POSITION <b>Station Chief</b>		GRADE	AGENCY
RATING PERIOD <b>January 1966 to July 1967</b>		DATE OF REPORT <b>July 15, 1967</b>	
SIGNATURE OF REPORTING OFFICER <i>John Hugh Crimmins</i> <b>John Hugh Crimmins</b>		TITLE <b>Ambassador</b>	
SIGNATURE OF REVIEWING OFFICER		TITLE	

EVALUATION OF PERFORMANCE

Outstanding     Satisfactory     Unsatisfactory

II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives?  Yes     No (If no, explain in detail below.)

Has he seen this report?  Yes     No

NARRATIVE COMMENTS

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

I have been associated with the CAS Station Chief since my arrival at this post on January 11, 1966. Inasmuch as I have kept in very close daily touch with him, I believe that I am in position to evaluate his performance.

Let me say at the outset that the Rated Officer has had to work under the most varied and difficult circumstances. His service at this post began, for example, in a revolutionary situation marked by great and continuing violence. The attention of a good part of the world was focused upon this situation, and some of the highest national interests of the United States were involved. The presence of the Inter-American Peace Force, of its major U.S. component, and of Ambassador Ellsworth Bunker in his unusual and unprecedented role added greatly to the dimensions of the work done by the Rated Officer. In the aftermath of revolution, he had unusual, delicate and complicated tasks to perform in connection with the establishment and maintenance in power of a most fragile Provisional Government. As the latter carried the nation toward the all-important election scheduled for June 1, 1966, the CAS Station Chief faced a changing and constantly challenging set of requirements. Finally, his tour of duty at this post has encompassed the transition from the Provisional Government to a constitutional government emerging from those elections and the gradual firming up of the position and institutions of the present democratically elected administration.

To this intricate complex of circumstances, the CAS Station Chief has brought a background knowledge of the Latin American area and its

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- 2 -

people as well as a proficiency in Spanish which has enabled him to deal readily and effectively with a heterogeneous range of contacts.

His performance can only be described as outstanding. He has provided a completely professional response to a most difficult and varied challenge. He has mounted an organization and provided a mechanism fully up to the tasks confronting it and the high-level requirements levied upon it. With the advantages afforded by hindsight, I suggest that the success which has been achieved speaks for itself.

It is pertinent to mention that the Rated Officer invariably places business ahead of pleasure and personal interests. He works long and irregular hours and is continuously available in time of need. He has evidenced the highest degree of cooperation with representatives of State, DOD, Legal Attaché, AID (in the Public Safety sector) and all other members of the Country Team. His quiet and professional approach inspires their confidence, and on innumerable occasions he has proven that he is an excellent team player who genuinely wants to be of assistance to all members of the official community. The harmonious, close relations among all the intelligence components of the Country Team are due in great part to the tactful, skillful and thoughtful leadership of the Station Chief.

There is probably little need for me to comment upon the Rated Officer's technical achievements at this post. Under his guidance, specialized security agencies of the Dominican Government have been brought to a state of high readiness. Penetration of subversive groups has reached impressive proportions. Subversive document seizures have been abundant. Counter-espionage work has been impressively successful.

no

The CAS Station Chief is in/sense a narrow technician or specialist. He keeps his eye on the broad picture, understands what he sees there and intelligently relates it to his own work. He is imaginative in his approach and does not hesitate to suggest innovations of various kinds. To mention only one of these, it was as a result of his initiative that "electoral police" appeared upon the scene during the Presidential election campaign in mid-1966 with a salutary calming effect upon the potential for political violence at the moment.

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- 3 -

I wish to make special mention of, first, the scrupulousness with which the Rated Officer has consulted me and kept me informed about his activities, and, second, his strict adherence to the guidance I have given him. At no time have I had any doubts concerning the care and fidelity with which he has followed my instructions.

I have developed the highest personal and professional regard for the Rated Officer. I have valued greatly his advice and his support not only upon matters within his own special field of competence, but also over a considerably broader spectrum of U.S. Mission activities. I could not have asked for a better Chief of Station than the one whom I have had at this post. I very much regret his departure but am comforted by the knowledge that his successor, as his deputy, has been trained by him.

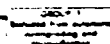
I earnestly hope that these comments of mine -- based on a very close and continuous working relationship -- will be given full consideration and will contribute significantly to his career advancement.

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*(When Filled In)*

<b>FITNESS REPORT</b>					EMPLOYEE SERIAL NUMBER <b>024345</b>	
<b>SECTION A GENERAL</b>						
1. NAME (Last) (First) (Middle) <b>Phillips, David A.</b>			2. DATE OF BIRTH <b>10/31/22</b>	3. SEX <b>M</b>	4. GRADE <b>15</b>	5. SD <b>D</b>
6. OFFICIAL POSITION TITLE <b>Ops Officer Ch</b>			7. OFF/DIV BR OF ASSIGNMENT <b>WH/COG</b>	8. CURRENT STATION <b>Hqts.</b>		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/>	CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/>	CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. <b>04/68</b>			12. REPORTING PERIOD (From - to) <b>1 April 1967 - 31 March 1968</b>			
<b>SECTION B PERFORMANCE EVALUATION</b>						
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
<b>SPECIFIC DUTIES</b>						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1 <b>Responsibility for overall management of Headquarters Branch activities.</b>						RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 <b>Support and guidance of field operations.</b>						RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 3 <b>Reporting to higher authority; implementing of policy level decisions.</b>						RATING LETTER <b>O</b>
SPECIFIC DUTY NO. 4 <b>Supervision and management of personnel.</b>						RATING LETTER <b>O</b>
SPECIFIC DUTY NO. 5 <b>Liaison with State Department and other agencies.</b>						RATING LETTER <b>O</b>
SPECIFIC DUTY NO. 6						RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>						
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance. <b>Reviewed by OP/PD/EAB</b>						RATING LETTER <b>O</b>



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(Use Filled In)

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

JUN 1 8 53 AM '68

The Rating Officer's last fitness report on Mr. Phillips dealt with his terminating an outstandingly successful and very complicated assignment as Chief of Station, Dominican Republic. This report deals with a completely different situation, i. e. coming into Headquarters as Chief, Cuban Operations Group at the time that drastic reduction had just become the order of the day. The same energy, imagination and zeal which has characterized Mr. Phillips over the years has characterized his performance in this difficult task since his assumption of the new responsibility. He has been a prime mover in reducing the Headquarters WH/COG component to realistic and manageable proportions. By the same token he has been a prime mover, guider, cajoler and sometimes "patron saint" to JMWAVE management in its massive job of bringing JMWAVE down from its ponderous proportions to a viable Clandestine Services "instrument" compatible and consistent with the present day needs of Cuban operations. In this endeavor Mr. Phillips' accomplishments have been of the first order.

(See attached sheet)

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE 13 MAY 1968 SIGNATURE OF EMPLOYEE [Signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 32 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE 10 May 1968 OFFICIAL TITLE OF SUPERVISOR Deputy Chief, WHD TYPED OR PRINTED NAME AND SIGNATURE Jacob D. Esterline [Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

This is a very fine officer with one of the best potentials in WH Division. I believe the rater is somewhat carried away in his views. Mr. Phillips' career advancement has been closely observed in this Division and I do not believe he is falling behind in the promotion timetable. It is definitely expected he will be recommended next year (which is within the proper time frame,) if his current excellent performance continues.

DATE 20 May 1968 OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH Division TYPED OR PRINTED NAME AND SIGNATURE William V. Broe [Signature]

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Fitness Report - David A. Phillips

SECTION C (Continued)

Most important however, and this is one of Mr. Phillips unique qualities, he has been able to bring about this drastic reduction and at the same time instill enthusiasm in his staff for new approaches to the ever more difficult Cuban target. His own infectious enthusiasm and his fine manner with co-workers and subordinates has made this possible. In short the Rating Officer believes he is the right man at the right time for the job he is in.

Mr. Phillips' relations with the Department of State and other agencies where it really counts are outstandingly good. He has in his short time back re-established his fine relationship with the manager of the Voice of America. This relationship will undoubtedly be of inestimable value in getting WH Division's new radio effort through the 303 Committee and into operation.

It is probably obvious to one reading this fitness report that the Rating Officer is well disposed towards Mr. Phillips. This is quite true. It in no way, however, affects the Rating Officer's opinion that Mr. Phillips is a man of considerable talent who for one reason or another has fallen at least one grade behind in the promotion timetable. The Rating Officer, therefore, trusts that this will be corrected in the near future. Mr. Phillips is a gentleman of breadth, drive, imagination and dedication. The Rating Officer considers Mr. Phillips to be one of the very best of the many fine officers he has known in his career in the Clandestine Services. In some ways he is unique in that he knows the business from the ground up, having started in unofficial cover (several assignments) and now having moved into the managerial area where he can speak with authority based on valid experience.

SECRET

Reviewed by OP/PD/EAB



S-E-C-R-E-T

TRAINING REPORT

Chiefs of Station Seminar No. 1-70  
80 hours, full time 6 - 17 October 1969

Participant : Phillips, David A. Office : WH  
Year of Birth: 1922 Service Designation: D  
Grade : 16 No. of Students : 8  
EOD Date : Apr '55

COURSE OBJECTIVES, CONTENT AND METHODS


The COS Seminar is aimed to prepare prospective Chiefs and Deputy Chiefs of Station and Chiefs of Base for field assignments. Emphasis was upon the difficulties confronting Chiefs of small or medium-sized installations, since they must handle a peculiarly wide range of problems. Included were case studies serving to remind outgoing chiefs of various operational approaches and techniques, but more time was devoted to policy, coordination, management, reporting, and administrative responsibilities of the Chief of Station, both within CIA and in the government at large, at home and abroad.

The bulk of the course is given in lectures and question periods conducted by officials responsible for the missions, functions, programs, and services discussed. A few key items of suggested reading are included, and bibliographies of suggested reading tailored to the individual's assignment are offered for those who want them.

ACHIEVEMENT RECORD

This is a certificate of attendance. No further assessment of individual capacity or performance is made in this course.

FOR THE DIRECTOR OF TRAINING:

  
Anthony D. Holland      20 OCT 1969  
Date

S-E-C-R-E-T

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					024345	
SECTION A			GENERAL			
1. NAME (Last) <b>Phillips</b> (First) <b>David</b> (Middle) <b>A.</b>	2. DATE OF BIRTH <b>10/31/22</b>	3. SEX <b>M</b>	4. GRADE <b>GS-15</b>	5. SO <b>D</b>		
6. OFFICIAL POSITION TITLE <b>Chief of Station</b>			7. OFF. DIV. OR ASSIGNMENT <b>DDP/WH/7</b>	8. CURRENT STATION <b>Santo Domingo</b>		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER			<input type="checkbox"/> INITIAL			
<input type="checkbox"/> RESERVE			<input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> ANNUAL			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. <b>May 1967</b>			12. REPORTING PERIOD (From - to) <b>1 April 1966 to 31 March 1967</b>			
SECTION B			PERFORMANCE EVALUATION			
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1					RATING LETTER	
Station management.					S	
SPECIFIC DUTY NO. 2					RATING LETTER	
Direction of the operational program.					O	
SPECIFIC DUTY NO. 3					RATING LETTER	
Liaison with other U. S. agencies.					S	
SPECIFIC DUTY NO. 4					RATING LETTER	
SPECIFIC DUTY NO. 5					RATING LETTER	
SPECIFIC DUTY NO. 6					RATING LETTER	
<p>12 MAY 1967 LLC</p>					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, professional 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	
					O	

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

MAY 8 3 39 PM '67

Mr. Phillips is nearing completion of his tour of duty as Chief of Station, Santo Domingo. During the past several months he has had the difficult task of reorganizing his Station and redirecting its manpower following a major election operation. His task has been made more difficult by a series of almost weekly political or security crises which not only required intensive intelligence coverage but also frequently involved Station assets.

Mr. Phillips has done remarkably well in this difficult reorganizing process. It has in no way affected the volume or quality of Station reporting which remains very high. His critical analysis and in-depth interpretation of the rapidly changing political scene have been timely and useful.

The Station under his direction has aggressively undertaken the development of new FI and CI assets without losing momentum in existing operations. Also in a relatively short period of time effective security and countersubversion units within the host government internal security apparatus have been established. (Cont'd)

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	
20	Subject in the field.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
5 April 1967	Deputy Chief, WHD	<i>Jacob D. Esterline</i> Jacob D. Esterline
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I concur with the rating and statements made concerning Mr. Phillips. He is one of the best. He will take over as Chief, Cuban Operations Group this summer and we can expect new impetus in this difficult denied area program. We are carefully observing his promotional progress and are making every effort that he advance in accordance with his excellent capabilities and potential.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 April 1967	Chief, WHD	<i>William V. Broe</i> William V. Broe

SECRET

~~SECRET~~

Fitness Report -- David A. Phillips

**SECTION C - (Cont'd)**

His relationships with the Ambassador and with representatives of other agencies are excellent and the high regard they accord him are reflected in the great confidence placed in him and his staff.

The overall management of the Station reflects careful consideration of manpower and money commitments. Mr. Phillips has taken the initiative in effecting savings wherever possible. In short he has turned in an aggressively outstanding performance under the most difficult imaginable conditions during the period under review.

~~SECRET~~

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER:		
					024345		
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
PHILLIPS, David A.			31 Oct 22	M	GS-15	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer/Chief of Station			DDP/WH/DR		Santo Domingo		
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"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):				<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 April 65 - 31 March 66			
SECTION B PERFORMANCE EVALUATION							
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1							RATING LETTER
Direction of Station CA program. DDP							O
SPECIFIC DUTY NO. 2							RATING LETTER
Direction of Station FI/CI efforts. DDP							S
SPECIFIC DUTY NO. 3							RATING LETTER
Liaison responsibilities with Embassy and other U.S. Government representatives. DDP							O
SPECIFIC DUTY NO. 4							RATING LETTER
Managerial responsibilities as Chief of Station.							S
SPECIFIC DUTY NO. 5							RATING LETTER
Cost consciousness.							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
16 JUN 1966							S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space needed to complete Section C, attach a separate sheet of paper.</p>			
<p>Mr. Phillips brings to this assignment (his first as Chief of Station) a wealth of CA experience gained through many years of operating in the Western Hemisphere and other areas. As a propagandist and general CA operator he must rank high among all Agency personnel. Consequently, it was indeed fortunate that his assignment to the Dominican Republic came at a time when a person of his talent was badly needed. Arriving shortly after the American intervention he has had the difficult task of ferreting out information in great detail about an entirely new government, diplomatically handling the delicate coordinations with other U.S. Government agencies in a crisis and highly emotional situation, while administering a rapidly expanding station composed in large degree of young men long on initiative and intelligence but somewhat lacking in depth of experience. At present he is engaged in a fairly large and vastly important election operation which is of concern to the highest authorities of our government.</p>			
<p>(Continued - See attached sheet)</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		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
9 months	Employee will see report upon his return to Headquarters		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
3 May 1966	Deputy Chief, WHD	<i>Jacob D. Esterline</i> Jacob D. Esterline	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
I heartily endorse the rater's comments. The Santo Domingo Station, under the excellent leadership of Mr. Phillips, recently completed a most successful and significantly important political action operation. It was a well-done Station operation but great credit has to go to Mr. Phillips personally.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
14 June 1966	Chief, WHD	<i>William V. Broc</i> William V. Broc	

SECRET

Fitness Report - David A. Phillips

SECTION C - Continued:

Perhaps the outstanding quality which Mr. Phillips has demonstrated is his ability to "fire up" his people to produce at their maximum capacity. Another outstanding characteristic is his diplomatic manner of dealing with other officials. Of particular note is the fact that Subject's relationship with Ambassador Bunker of the OAS (who, in effect, has been the President's principal representative in the Dominican Republic) are closer and more fruitful than the relationship of the Embassy with Ambassador Bunker. This has in no way damaged the close relationship Subject has with the Embassy and other government officials.

Subject had little managerial experience of the scope required by his present position prior to his arrival in the DR, nor had he had much experience in FI matters. He has adapted readily however, and he continued to broaden in these respects with the passage of time.

Cost consciousness is, of course, a relative thing. Mr. Phillips as a CA operator "thinks big." However, it is clear that he weighs heavily costs against anticipated results and expects to get a dollar return for each one spent. Overall Subject can be described as a very able person. His ability to maintain Station morale at a high level while producing at a very gruelling pace under difficult conditions is in itself an outstanding accomplishment. Mr. Phillips has been recommended for an Agency Award.

S E C R E T

TRAINING REPORT

Chiefs of Station Seminar No. 3  
60 hours, half days

19 April - 7 May 1965

Participant : PHILLIPS, David A. Office : MI  
Year of Birth : 1922 Service Designation : D  
Grade : GS-15 No. of Students : 15  
EOD Date : April 1955

COURSE OBJECTIVES, CONTENT AND METHODS

The COS Seminar aimed to prepare prospective Chiefs and Deputy Chiefs of Station, Chiefs of Base, and senior Chiefs of Support for field assignments. Emphasis was upon the difficulties confronting Chiefs of small or medium-sized installations, since they must handle a peculiarly wide range of problems. Included were case studies serving to remind outgoing chiefs of various operational approaches and techniques, but more time was devoted to policy, coordination, management, reporting, and administrative responsibilities of the Chief of Station, both within CIA and in the government at large, at home and abroad. Special attention was given to counterinsurgency.

The bulk of the course is given in lectures and question periods conducted by officials responsible for the missions, functions, programs, and services discussed, most of them being from within the Agency but several also from outside. A few key items of suggested reading are included, and bibliographies of suggested reading tailored to the individual's assignment are offered for those who want them.

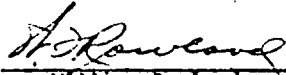
ACHIEVEMENT RECORD

This is a certificate of attendance.

Mr. Phillips attended the first half of the seminar being withdrawn at that point due to an operational emergency.

No further assessment of individual capacity or performance is made in this course.

FOR THE DIRECTOR OF TRAINING:

  
William Rowland  
Acting Chief Instructor

5/13/65  
Date

S E C R E T



SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report. FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials.

SECTION A. GENERAL. 1. NAME: Phillips, Howard. 2. DATE OF BIRTH: 31 Oct. 1922. 3. SEX: Male. 4. SERVICE DESIGNATION: DP. 5. OFFICIAL POSITION TITLE: Staff agent. 6. PERIOD COVERED BY THIS REPORT: 9 February 1956 - 14 September 1956. 7. GRADE: GS-14. 8. DATE REPORT MADE IN OF: August 9, 1956. 10. TYPE OF REPORT: X INITIAL, ANNUAL.

SECTION B. CERTIFICATION. 1. FOR THE RATER: THIS REPORT X HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. 2. CHECK (X) APPROPRIATE STATEMENTS: THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.

3. THIS DATE: 19 Sept. 1956. C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR: Caldwell, William. D. SUPERVISOR'S OFFICIAL TITLE: Chief of Station. 2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

TESTED BY [Signature] 10/13/56

BY DATE: Posted Post Control [Signature] 9/27/56. Reviewed by PUC [Signature]

I certify that any substantial difference of opinion with the supervisor is reflected in the above section. A. THIS DATE: 25 Sept '56. B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL: [Signature]. C. OFFICIAL TITLE OF REVIEWING OFFICIAL: [Signature]

SECTION C. JOB PERFORMANCE EVALUATION. 1. RATING ON GENERAL PERFORMANCE OF DUTIES: 5. DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. 1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT. 2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.

SECRET

(When Filled In)

OFFICE OF GENERAL INVESTIGATION  
CONFIDENTIAL  
SEP 27 3:10 PM '56  
MAIL ROOM

**2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES**

**DIRECTIONS:**

- State in the spaces below up to six of the more important SPECIFIC duties performed during the rating period. Place the most important first.
- Rate performance on each specific duty in terms of effectiveness in performance of this specific duty.
- For supervisors' ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:
 

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA

For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

DESCRIPTIVE RATING NUMBER	1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY 3 - PERFORMS THIS DUTY ACCEPTABLY 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS 7 - EXCELLED ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY
---------------------------	--	--

SPECIFIC DUTY NO. 1 Supervises KUCAGE projects	RATING NUMBER 4	SPECIFIC DUTY NO. 4 Supervises staff agents	RATING NUMBER 4
SPECIFIC DUTY NO. 2 Develops new KUCAGE programs	RATING NUMBER 4	SPECIFIC DUTY NO. 5 Spots and develops contacts	RATING NUMBER 4
SPECIFIC DUTY NO. 3 Has and uses Area Knowledge	RATING NUMBER 5	SPECIFIC DUTY NO. 6 Prepares progress reports	RATING NUMBER 4

**3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

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

This officer has ability, talent, area knowledge, understanding of the people and experience in his field. In the initial six months covered by this report he has adjusted remarkably well to a difficult cover situation with a minimum of station support and guidance.

**SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION**

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

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

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

SECRET

SECRET  
(When Filled In)

### FITNESS REPORT (Part II) POTENTIAL

#### INSTRUCTIONS

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

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

<b>SECTION E. General</b>			
1. NAME (Last, First, Middle) <i>Howard Phillips</i>	2. DATE OF BIRTH 31 Oct. 1922	3. SEX Male	4. SERVICE DESIGNATION DP
5. OFFICE (Location, Division, or Assignment) DDP/Int/Human	6. OFFICIAL POSITION TITLE Staff agent - Ops Off (PP)		
7. GRADE GS-14	8. DATE REPORT DUE IN OP 9 August 1956	9. PERIOD COVERED BY THIS REPORT (Inclusive Dates) 9 February 1956 - 14 September 1956	
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	<input type="checkbox"/> SPECIAL (Specify)
<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE		

#### SECTION F. CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED

A. THIS DATE 19 Sept. 1956	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Caldwell	C. SUPERVISOR'S OFFICIAL TITLE Chief of Station
-------------------------------	--	--

2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.

A. THIS DATE 25 Sept '56	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL J. King	C. OFFICIAL TITLE OF REVIEWING OFFICIAL C. King
-----------------------------	---	--

#### SECTION G. ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

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

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

#### 2. SUPERVISORY POTENTIAL

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

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	

ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
	2	A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)
	3	A GROUP OF SUPERVISORS WHO DO THE BASIC JOB (Second line supervisors)
	3	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
2		WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
2		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		OTHER (Specify)

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION  
 Six months

4. COMMENTS CONCERNING POTENTIAL  
 This officer is a natural CONTROLLER DIV. He is qualified for future unofficial or staff assignment with more responsibility.

OFFICE OF PERSONNEL  
 OCT 27 3 16 PM '56  
 MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL  
 None at present.

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

As senior KUCAGE officer, better knowledge of Station procedures and practices would be helpful.

SECTION I. DESCRIPTION OF INDIVIDUAL

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

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

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

SECRET

SECRET

(When Filled In)

FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It seeks to provide:
1. The agency selection board with information of value when considering the application of an individual for membership in the career service; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

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

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

Handwritten note: 5, 1st due date Apr 57 H

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I (To be filled in by Administrative Officer)

Form section I containing fields for Name (Last: PHILLIPS, First: David, Middle: A.), Date of Birth (Oct 22), Sex (M), Career Designation (DP), Date of Entrant on Duty (1 April 1955), Office Assigned (PP), Division (Information Coordination), Branch, Nature of Assignment (Departmental), Station (GS-14), and Period Covered (1 April 1955 - 1 January 1956).

SECTION II (To be filled in by Supervisor)

Form section II containing Current Position (Radio & Television Officer, PP/ICD) and Date Assumed Responsibility (1 April 1955).

3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS (List in order of frequency):
Advising and assisting operating divisions in development, effective management and supervision of radio broadcasting facilities.
Maintaining liaison with Department of State and USIA on radio matters.
Collaboration with the Office of Communications in development of unconventional techniques for broadcasting and jamming evasion.
Preparation of staff study on proposed use of the television medium.

Stamp: Period For... BY... DATE 18 JAN 1956

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report [X] has [ ] has not been shown to the individual rated.

Form section III containing dates (6 January 1956, 19 Jan 56) and signatures of the rater (John G. Shaffer) and reviewing official.

SECRET  
(When Filled In)

SECTION IV

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

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

OFFICE  
JAN 16 9 50 AM '50  
MAIL ROOM

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



SECRET  
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS:  
 Strengths indicated above easily outweigh the few characteristics of which the subject is average. **OFFICE OF PERSONNEL**

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION?  NO  YES. **JAN 16 3 47 PM '56**

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL? **MAIL ROOM**  
 Operations Familiarization course.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):  
 None

SECTION VI

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

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

1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.

2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.

3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.

4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.

5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.

6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA?  NO  YES. IF YES, WHAT?  
 Better qualified for field assignment in WA area only because such assignment can utilize his language and area experience in addition to utilizing the characteristics that have made him a successful staff officer.

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

1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.

2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY... IRKED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.

3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.

4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.

5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY... THINKS IN TERMS OF A CAREER IN THE AGENCY.

6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE AGENCY.

7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

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

1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.

2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.

3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.

4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.

5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.

6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

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

1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.

2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.

3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.

4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.

5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.

6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.

7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET



Jack  
04  
2/5/56  
7/24/56

MEMORANDUM FOR:

PP/C/100

ATTENTION : Training Officer

SUBJECT : Attendance at PPS In-Service-Training Series  
10 January to 20 March 1956

REFERENCE : Memorandum for Chiefs, Senior Staffs and Area  
Divisions, and Chief, 10 Division from CPP,  
subject: "Seminar on Preparation and Processing  
of PP/PM Projects" dated 19 December 1955.

1. David Phillips attended the lectures in the subject series which commenced from 10:00 to 12:00 hours, 1 February 1956. During this period, instruction in "Preparation and Processing of PP/PM Projects" was given as follows:

- a. INTRODUCTION
- b. PROJECT DOCUMENTATION  
Step-by-step explanation of items in project outline format.
- c. PROJECT REVIEW AND DISCUSSION  
Steps each officer should take in determining extent of coordination of projects. Importance of discussion with Senior Staff in draft stage.
- d. PROJECT APPROVAL SYSTEM
- e. PROJECT REPORTING
- f. PROJECT AND C. COORDINATION
- g. PROJECT FINISH

2. Officers were required to study the following references, prior to attending the lectures:

- a. PP/PM Project  
MEMORANDUM TO THE CHIEFS OF THE PROGRAM  
MANAGEMENT COMMITTEE, dated 1 April 1955
- b. PP/PM Project  
MEMORANDUM ON THE CHIEFS OF THE PROGRAM  
MANAGEMENT COMMITTEE, dated 1 April 1955

(j) OSM 230-72 THE CLASSIFIED SERVICES REPORTING SYSTEM-AREA DIVISIONS, CHAPTER II, THE SERVICE REPORTING STATUS REPORT, dated 8 June 1957.

b. RECORDS ARE AS FOLLOWS:

- (1) OSM 230-108 GENERAL ACTIVITIES REPORTING SYSTEM, dated 13 March 1955.
- (2) OSM 230-111 REPORTING SYSTEM-GENERAL, dated 13 March 1955.
- (3) OSM 230-112 GENERAL ACTIVITIES REPORTING SYSTEM TO THE SERVICE REPORTING STATUS REPORT, dated 13 March 1955.
- (4) OSM 230-113 THE SERVICE REPORTING STATUS REPORT, dated 13 March 1955.
- (5) OSM 230-114 GENERAL ACTIVITIES REPORTING SYSTEM-GENERAL, dated 13 March 1955.
- (6) OSM 230-115 OPERATIONAL INSTRUCTIONS AND REGULATIONS, dated 7 December 1957.

The information is provided to permit appropriate reference to the information received by the employees named in paragraph 1, above.

John A. [Name]  
SIC  
[Title]  
[Address]



S E C R E T

TRAINING EVALUATION

READING IMPROVEMENT COURSE # 26

SECTION I: IDENTIFYING INFORMATION

Name	Sex	Dates of Course	No. of Students
Phillips, David A.	M	24 October-9 December 1955	23
Date of Birth	DOB Date	Grade or Rank	Office
31 October 1922	2 April 1935	GS-14	ICB/PP

Projected assignment or Present Position

PP Officer

SECTION II: OBJECTIVES OF THE COURSE

The Reading Improvement Course is designed to increase the reading efficiency of agency employees by developing their speed and level of comprehension through (1) extending the range of reading techniques, (2) adjusting rate of reading to comprehension requirements and (3) improving perceptual habits.

SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE

The course consists of 30 class hours, one hour a day, 5 days a week. 9 hours are devoted to lectures and practice exercises, 12 hours to speed reading practice and 9 hours to specific perception techniques.

Each student's reading skills are analyzed at the beginning of the course and the student then concentrates on the development of those skills in which he is deficient or those which are most frequently demanded by the nature of his office reading.

SECTION IV: METHOD OF EVALUATION

Student achievement is measured by an initial and final test battery and class exercises. Two sets of norms have been developed on the test battery. Group I represents the scores of 400 agency employees, 84% of whom had four or more years of college. Group II represents the scores of 94 agency employees with two years or less of college training. Section V contains a description of the tests and exercises. Section VI indicates the student's skill level and Section VII includes the student's over-all achievement and the instructor's comments.

S E C R E T



Standard Form No. 54  
January 1967  
U.S. Civil Service Commission  
FPM Supplement 990-1  
54-104

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

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

**INFORMATION CONCERNING THE INSURED:**

NAME (Last) (First) (Middle) DATE OF BIRTH (Month, day, year)  
Phillips, David A.

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

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

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

(CSA, CSL, A, or X number)

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

Central Intelligence Agency

Langley, Va.

(Department or agency)

(Bureau)

(Division)

(Location—City, State, and ZIP Code)

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

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

Type or print first name, middle initial, and last name of each beneficiary	Type or print address (including ZIP Code) of each beneficiary	Relationship	Share to be paid to each beneficiary
VIRGINIA S. PHILLIPS FOR DISTRIBUTION ACCORDING TO MY WILL. <u>DL</u>	8124 FRONT TRAIL DR. BETHESDA, MD. 20034	WIFE	All

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

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

(Date of execution—month, day, year)

(Signature of insured)

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

Gladys S. Nevers 1218 Crownes St. Alex, Va. 22314  
(Signature of witness) (Number and street) (City, State, and ZIP Code)  
Nancy B. Johnson 401 7th St. N. Vienna, Va. 22180  
(Signature of witness) (Number and street) (City, State, and ZIP Code)

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

THIS SPACE IS RESERVED FOR RECEIVING AGENCY

PERSONNEL  
OFFICE OF  
MAY 6 4 28 PM '75  
BRANCH  
PERSONAL AFFAIRS

(Indicate date and by whom received)

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

ADMINISTRATIVE  
Internal Use Only

*S/E*  
**FILE  
PUNCHED  
BY**

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
024345	PHILLIPS	DAVID	A

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (OR only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
11	03	74	11	15	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		EUR	801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. \_\_\_\_\_ DOCUMENT DATE/PERIOD \_\_\_\_\_

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 2/15/75	SIGNATURE Donald W Black
<input checked="" type="checkbox"/> C & L DIVISION, CTBR.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE  
Internal Use Only

REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
BY: *[Signature]*

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
024345	(Prefix) Phillips	7-24 D'Alto	

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION. REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 929 929.

PCS DATES OF SERVICE										
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	COUNTRY		
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38	39
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38	39	40-42

TDY DATES OF SERVICE										
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	AREA(S)		
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38	39
1-3	1-3	74	1-2	1-5	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		29 AREA	311

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION	
<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. \_\_\_\_\_ DOCUMENT DATE/PERIOD *13-15 Dec 74*

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT - YES
<input checked="" type="checkbox"/> DCO	DATE <i>6 FEB 75</i>	SIGNATURE <i>[Signature]</i>
<input checked="" type="checkbox"/> C & L DIVISION, CYBR		
<input type="checkbox"/> C & Y DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**FILE COPY OF STANDARD FORM 56**  
**“AGENCY CERTIFICATION OF INSURANCE STATUS—**  
**FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM”**

**on file with the Retirement Operations Branch,**  
**Office of Personnel (x3257).**



**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.

**2**

**FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):**

NAME (last)	(first)	(initial)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER		
Phillips	David	Atlas	October 31 1922	150	28	3930
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, Zip Code)			
HAVE YOU EVER BEFORE FILED AN "ELECTION, DECLINATION OR WAIVER OF LIFE INSURANCE COVERAGE"? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If "YES" your last such form remains in effect and you should not file this new form unless you want to change the old one. (See Instructions for Employees on page 4) <i>Not to be kept by agency, but I cannot remember positively.</i>						

**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**

**DATE AND SIGN. RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)  
*David Atlas*

DATE  
20 March 1970

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

Received March 20, 1970

*Mary E. Murphy*  
Mary E. Murphy  
Personnel Officer

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

STANDARD FORM No. 178  
April 1968  
FPM Supplement 870-1  
170-102

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		
Phillips	David	Atlee	31 Oct 1922	460	28	3930
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)  
*David Atlee Phillips*

DATE  
13 February 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

RECEIVED  
PERSONNEL  
FEB 19 2 31 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-2  
JANUARY 1964  
(For use only until April 14, 1968)  
176-101

REPORT OF HONOR AND MERIT AWARDS BOARD				LEO NO.	DATE
				25-540	11 March 1975
The Honor and Merit Awards Board having considered a recommendation that:					
SERIAL OR ID NO.	NAME (Last-First-Middle)	BIRTHYEAR	SEX	TYPE EMPLOYEE	
024345	PHILLIPS, David A.	1922	M	Staff	
OFFICE OF ASSIGNMENT	SD	SCHEDULE	GRADE	STATION	
DDO/LA	D	GS	18		
TO BE AWARDED					
Distinguished Intelligence Medal					
<input type="checkbox"/> FOR HEROIC ACTION ON					
<input checked="" type="checkbox"/> FOR MERITORIOUS SERVICE OR ACHIEVEMENT DURING THE PERIOD: 1953 - Present					
<input checked="" type="checkbox"/> RECOMMENDS APPROVAL			<input type="checkbox"/> DOES NOT RECOMMEND APPROVAL		
<input type="checkbox"/> RECOMMENDS AWARD OF					
UNCLASSIFIED CITATION					
<p>Mr. David A. Phillips is hereby awarded the Distinguished Intelligence Medal in recognition of his outstanding service to the Central Intelligence Agency for more than 22 years. Throughout his career Mr. Phillips has held a series of highly important positions in Headquarters and overseas, including four assignments as Chief of Station. In each instance his superior accomplishments were marked by his broad area knowledge, initiative, drive and imagination. His most recent assignment as Chief of a major division is further evidence of his exceptional capability. Mr. Phillips' efforts during his career constitute a major contribution to the mission of the Agency, reflecting great credit on him and the Federal service.</p>					
REMARKS					
(Recommendation approved by DD/O on 5 March 1975)					
APPROVED			SIGNATURE		
<i>H. Vernon A. Whitford</i> DEPUTY DIRECTOR OF CENTRAL INTELLIGENCE 31 MARCH 1975 DATE			<i>(Signature) F. W. M. Janney</i> TYPED NAME OF CHAIRMAN, HONOR AND MERIT AWARDS BOARD F. W. M. Janney SIGNATURE TYPED NAME OF RECORDER R. L. Austin, Jr.		

SECRET  
CLASSIFICATION

OPF

RECOMMENDATION FOR HONOR OR MERIT AWARD <i>(Submit in triplicate - see HR 10-37)</i>			
<b>SECTION A</b>			
1. EMPLOYEE NO. <b>024345</b>	2. NAME OF PERSON RECOMMENDED (Last, First, Middle) <b>Phillips, David A.</b>		3. POSITION TITLE <b>Division Chief</b>
4. GRADE <b>GS-18</b>	5. SS <b>B</b>	6. OFFICE OF ASSIGNMENT <b>DDO/LA</b>	7. RECOMMENDED AWARD <b>Distinguished Intelligence Medal</b>
8. INCLUSIVE DATES FOR WHICH RECOMMENDED <b>1953 - May 1975</b>		9. IF RETIRING, DATE OF RETIREMENT <b>9 May 1975</b>	10. POSTHUMOUS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
11. HOME ADDRESS <b>8224 Stone Trail Drive Bethesda, Maryland</b>			12. HOME PHONE <b>365-0527</b>
<b>SECTION B</b>			
LIST ANY PERSONNEL GIVEN AN AWARD OR RECOMMENDED FOR AWARD WHO ASSISTED IN THE ACT OR PARTICIPATED IN THE PERFORMANCE.			
13. FULL NAME		14. TYPE OF AWARD	
<b>SECTION C</b>			
ATTACH NARRATIVE DESCRIPTION OF PERFORMANCE OR SERVICE WARRANTING AWARD, ANY SUPPORTING DOCUMENTS AND A PROPOSED, UNCLASSIFIED CITATION.			
<b>SECTION D</b>			
15. TITLE AND SIGNATURE OF EMPLOYEE MAKING RECOMMENDATION <b>William E. Nelson Deputy Director for Operations</b>			DATE
16. HEAD OF <u>  D  </u> CAREER SERVICE <i>(Career service of nominee)</i>	TITLE AND SIGNATURE <b>See Item #18</b>	DATE	
17. DEPUTY DIRECTOR OF CAREER SERVICE	TITLE AND SIGNATURE <b>See Item #18</b>	DATE	
18. DEPUTY DIRECTOR OF OPERATING COMPONENT	TITLE AND SIGNATURE <b>Deputy Director for Operations</b>	DATE	

SECRET

OFF

Mr. David A. Phillips is retiring after a distinguished career with the Agency. He has been an employee of the Agency since 1951 when he initially joined as a Contract employee. He served with distinction in Santiago, Guatamala City, Havana, Beirut, Mexico City, Rio de Janeiro, Brasilia, and Caracas. His excellent command of both Spanish and Portuguese has enhanced each of his assignments in Latin America. A true DDOer, fifteen years of this glorious and active career were spent overseas. His outstanding dedication and devotion to the cause of freedom won for him in 1956, the Intelligence Medal of Merit. His file is replete with letters of commendation and appreciation from the DCI, DDCI, the former President of the Dominican Republic, Ambassadors, and military commanders, all of whom recognized the uniqueness of his outstanding service. Mr. Phillips has been highly effective as a senior member of the Latin American Division which has been under his immediate command since 1973. An excerpt from a late fitness report nicely characterizes the caliber of his work. "It is as a senior operations officer that Mr. Phillips has had the greatest experience, and it is not surprising that he has made an excellent input into the improvement of operational matters throughout the many areas of this hemisphere for which he is responsible." Mr. Phillips will be remembered for his initiative, drive and imagination, and for the excellence of his representational responsibilities which in large part is attributable to his native charm, area knowledgeability and superb language skills. He will be remembered for his intent capability and desire to fulfill the needs of the Organization. It is fitting and proper that upon his retirement, Mr. Phillips be recognized with the award of the Distinguished Intelligence Medal.

SECRET

CONFIDENTIAL

David A. Phillips

5 JUN 1974

Dear Dave,

You have just finished an important albeit grueling GS-16 Evaluation Exercise at my direction. The recommendations for promotion and executive development you gave me were a major factor in my recommendations to the Director for the upward movement of officers who will be the top management cadre of the Directorate in the near future.

I believe you will find that the last several weeks will have sharpened your focus on one of our most important management responsibilities, our personnel. Many thanks for a job well done.



William E. Nelson  
Deputy Director for Operations

E2 IMPDET CL BY 056788

CONFIDENTIAL

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

FILE  
PUNCHED  
BY *[Signature]*

SERIAL NO. 024345  
LAST (Print) Philipps  
FIRST 7-24 DAVID  
MIDDLE

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	37 38 39	WESTERN Hemisphere	40-42
1	1	1	7	3	7	2			8 11

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA  
E-2 IMPDET CL BY *[Signature]*

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. WOH 870 1/74  
DOCUMENT DATE/PERIOD 11/1 - 12/4/73

REMARKS

PREPARED BY DCO  
C & L DIVISION, CTDR.  
C & T DIVISION  
REPORT ANNOTATED ON CONTROL DOCUMENT   
DATE 1/23/74  
SIGNATURE *[Signature]*  
ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Transactions and Records Branch, Status Section

**FILE**  
**PUNCHED**  
**BY** *[Signature]*

**SERIAL NO.** **NAME**

*024345* *Phillips David*

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36		37	38 39		

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
11	29	73	12	04	73		2		WESTERN Hemisphere	8111

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

*2* IMPROVED CL BY *[Signature]*

**SOURCE DOCUMENT AND CERTIFICATION**

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

**DOCUMENT IDENTIFICATION NO.** *WH BTO #1/74* **DOCUMENT DATE/PERIOD.** *11/1 - 12/4/73*

**REMARKS**

<b>PREPARED BY</b>	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	<b>ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED</b>
<i>DCO</i>	<b>DATE</b> <i>1/23/74</i>	<b>SIGNATURE</b> <i>[Signature]</i>
<input checked="" type="checkbox"/> C & L DIVISION, CYRR.		
<input type="checkbox"/> C & T DIVISION		

**THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER**



SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

FILE  
PUNCHED  
BY [Signature]

SERIAL NO. 1-6	NAME		
	LAST	FIRST	MIDDLE
034345	(Print) PHILLIPS	7:24 DAVID	A.

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				

FILE  
PUNCHED  
BY [Signature]

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)		
MONTH	DAY	YEAR	MONTH	DAY	YEAR				37	38	39
02	11	74	03	09	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2			South America	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

IMPDET CL BY [Signature]

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. WH 1-74	DOCUMENT DATE PERIOD 11 Feb - 9 March 74
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REMARKS

PREPARED BY DCO	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & L DIVISION, CTBR.	DATE 1 May 74	SIGNATURE Tom Zacharia

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET  
(When Filled In)

PUNCHED BY

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. <i>027345</i>	NAME		
	LAST <i>(Prime) PHILLIPS</i>	FIRST <i>DAVID</i>	MIDDLE <i>A</i>

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 39, REVISED.

PCS DATES OF SERVICE											
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY		
MONTH	DAY	YEAR	MONTH	DAY	YEAR				37	38	39
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38	39	BRAZIL 090	
			<i>06</i>	<i>39</i>	<i>72</i>		<i>1</i>				

TDY DATES OF SERVICE											
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREAS		
MONTH	DAY	YEAR	MONTH	DAY	YEAR				37	38	39
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39		

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION	
TRAVEL VOUCHER	<input checked="" type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. <i>646685</i>	DOCUMENT DATE/PERIOD <i>27 JUNE 1972</i>
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REMARKS

PREPARED BY DCO C & L DIVISION, CTDR. <input checked="" type="checkbox"/> C & T DIVISION	REPORT ANNOTATED ON CONTROL DOCUMENT DATE <i>25 SEPT 72</i>	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE <i>[Signature]</i>
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET  
(When Filled In)

### SERVICE ABROAD AGREEMENT

#### I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTEMPLATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE <b>David A. Phillips</b>	SO <b>D</b>
--	----------------

#### II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT <b>Caracas, Venezuela</b>	
2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW	
A. STANDARD TOUR OF DUTY OF 24 MONTHS <input checked="" type="checkbox"/> <b>X</b>	C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT. (See HR 20-18)
REQUESTED (Memo attached)	
OPERATING OFFICIAL	
CONCUR	
B. NONSTANDARD TOUR OF DUTY OF _____ MONTHS PREVIOUSLY APPROVED PER HR 20-18.	CAREER SERVICE DEPUTY DIRECTOR
APPROVED	
OPERATING OFFICIAL <b>Henry L. Bertold, C/WH/Pers</b>	DIRECTOR OF PERSONNEL

#### III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. ITS DESIGNATION WILL BE KEPT IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE REVERSE SIDE OF THIS AGREEMENT (HR 22-3) NORMALLY INDICATE THE PLACE WHERE YOU PHYSICALLY DWELL IN THE UNITED STATES, ITS POSSESSIONS OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PCS TRANSFER TO A POST ABROAD. YOU MAY REQUEST IN ITEM 5 THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU CAN ESTABLISH THAT YOUR PHYSICAL DWELLING PLACE IS (OF WAR) TRANSITORY AND THAT SUCH OTHER PLACE IS YOUR DOMICILE OR HAS PREVIOUSLY BEEN USED BY YOU AS A PHYSICAL DWELLING. INFORMATION THAT CAN BE PRESENTED IN AN ATTACHED STATEMENT AS EVIDENCE INCLUDES BUT IS NOT LIMITED TO, STATE VOTING REGISTRATION, PROPERTY OWNERSHIP AND PLACE WHERE INCOME OR PERSONAL PROPERTY TAXES HAVE BEEN PAID.

CLASSIFIED BY *1042*  
 EXCLUDED FROM AUTOMATIC  
 DOWNGRADING AND  
 DECLASSIFICATION  
 DATE *11/21/01*

WARNING NOTICE  
 THIS IS A CONTROLLED DOCUMENT  
 (2-56) AND METHOD OF HANDLING

SECRET

(When Filled In)

4. PHYSICAL DOLLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS <p style="text-align: center;">8224 Stone Trail Drive Bates 71, MO.</p>		5. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 4) FULL ADDRESS 	
APPROVED		CONCUR	
DEPUTY DIRECTOR	DATE	DEPUTY DIRECTOR	DATE
<i>Jay R. Newman</i>	7 Aug 1972		
APPROVED		APPROVED	
DEPUTY DIRECTOR	DATE	DIRECTOR OF PERSONNEL	DATE
<i>Jay R. Newman</i>	7 Aug 1972		
IV. HOME LEAVE POINT			
7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE; YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.			
8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-308(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.			
9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS <p style="text-align: center;">SAME AS 5 ABOVE</p>		10. DESIGNATION PER ITEM 8 ABOVE. FULL ADDRESS 	
APPROVED		CONCUR	
DEPUTY DIRECTOR	DATE	DEPUTY DIRECTOR	DATE
<i>Jay R. Newman</i>	7 Aug 1972		
APPROVED		APPROVED	
DEPUTY DIRECTOR	DATE	DIRECTOR OF PERSONNEL	DATE
<i>Jay R. Newman</i>	7 Aug 1972		
EMPLOYEE CERTIFICATION			
I have read and understand my service obligations and travel entitlements as described in this agreement.			
SIGNATURE OF EMPLOYEE			DATE
<i>[Signature]</i>			7/28/72

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Transactions and Records Branch, Status Section											<div style="border: 2px solid black; padding: 5px; width: fit-content; margin: auto;"> <b>FILE</b>  <b>PUNCHED</b>  <b>BY</b> </div>	
SERIAL NO.			NAME									
1-6 024345			LAST (Print) Phillips			FIRST David			MIDDLE A			
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 88, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE				CODE	
25-26	27-28	29-30	31-32	13-34	35-36	2 - CORRECTION	37	38	39		40-42	
						3 - CANCELLATION						
	2	7	1	6	7		3			Brizil	070	
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE				CODE	
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION	37	38	39		40-42	
						6 - CANCELLATION						
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
TRAVEL VOUCHER						DISPATCH						
<input checked="" type="checkbox"/> CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO. 14177						DOCUMENT DATE/PERIOD 13 July 1971						
REMARKS Correction BANSILIA - KATRRAK												
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED						
BCO			DATE 7/19/71			SIGNATURE Marilyn Burleson						
C & L DIVISION, C-89												
C & T DIVISION												
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE  
PUNCHED  
Status Section

TO: Office of Personnel, Transactions and Records Branch

SERIAL NO. 1-6 *024345* NAME (Print) LAST *Phillips* FIRST *David* MIDDLE *A*

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 92, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37			40-42
<i>01</i>	<i>11</i>	<i>70</i>	<i>07</i>	<i>09</i>	<i>71</i>		<i>1</i>		<i>Senegal</i>	<i>090</i>

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37			40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

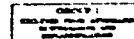
TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *13872* DOCUMENT DATE/PERIOD *8 July 1971*

REMARKS *Rio de Janeiro - Federal*  
*NO Record - date claimed*

PREPARED BY	REPORT ANNOTATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE <i>7/15/71</i>	SIGNATURE <i>M. Burleson</i>
C & L DIVISION, CYRR.		
C & Y DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



TO: Chief, WHD	FROM: SAC, SANTO DOMINGO	
SUBJECT: Chief of Station, Santo Domingo	CLASSIFICATION	
General - Administrative		
Specific - Performance of TDY Personnel During Recent DR Crisis		
<p>ACTION REQUIRED - PE 100215</p> <p>1. As Headquarters is well aware, a constant flow of TDY personnel was provided the Station by Headquarters during the crisis period of the recent revolution. Obviously, the Station would have found it most difficult, if not impossible, to perform in the fashion it did without this assistance. What deserves special comment, however, is the generally high quality of their performance under quite demanding, fluid, and, often, dangerous conditions. With few exceptions, already known to Headquarters, the TDY personnel did a magnificent job both collectively and as individuals. Considering the grade and experience of most of these officers, it can probably be assumed that this was to be expected. But, what clearly was not predictable was their willingness to accept any type of assignment regardless of grade or circumstances, their quick adaptability and initiative in an unfamiliar and confused situation, and their stamina under the stress of long and irregular work days seven days a week. Furthermore, in spite of the close working quarters, constant association, and strain inherent in this type of situation, "personality clashes" or other signs of incompatibility were very few indeed.</p> <p>2. Undoubtedly, Headquarters has sensed the foregoing from returnees. The purpose of sending this dispatch is to make it a matter of record and to suggest to Headquarters that their standard of performance under these conditions may merit consideration of some special recognition in the personnel files of the personnel concerned.</p> <p style="text-align: right;">Continued...</p> <p>Distribution: 3 - WHD</p> <p>Attachment: As stated - h/w</p>		
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE
	HDCT-1221	17 July 1965
	CLASSIFICATION	HQS FILE NUMBER
	S-E-C-R-E-T	

DISPATCH

S-E-C-R-E-T

NDCT-1721

3. Without detracting one whit from the performance of any of the other officers on TDY assignment, the present COS would like to single out ~~James M. [unclear]~~ and ~~James F. [unclear]~~ as deserving special comment. Their performance has been exceptional. A special note is attached for ~~James M. [unclear]~~ and ~~James F. [unclear]~~. Therefore, it is recommended that the attached memoranda be inserted into each of their personnel files.

4. Also, the COS would like to register the fact that the foregoing note only speaks highly of the TDY personnel assigned, but Headquarters as well in providing this type of support.

5. As a final comment, Headquarters may care to check this memorandum with ~~James M. [unclear]~~, the COS for a good part of this period, to obtain any special comments he might wish to make in this regard -- either with respect to content or individuals whom he considered exceptional and who are not known to the present COS.

*David Phillips*



S-E-C-R-E-T

17 July 1965

MEMORANDUM FOR THE RECORD

SUBJECT:

*Richard W. Pastetter*  
TDY in Santo Domingo

1. *Pastetter* was assigned to Station Santo Domingo on a TDY basis for the period 2 June to 16 July 1965. During this assignment, *Pastetter* was placed in charge of the Station CIA program with special emphasis on exploiting targets of opportunity in the very fluid crisis situation then prevalent and, simultaneously, generating new assets and new approaches to lay the groundwork for the altered situation which would be confronting the Station in the post-crisis era. In addition to supervising the CIA program, he handled a number of existing agents, developed some new assets, and conducted numerous special CIA operations, including some quite effective black activities. On this assignment, *Pastetter* worked some fourteen to sixteen hours a day throughout the entire period.

2. The undersigned is aware that CIA would expect a quite professional and dedicated performance from an officer of *Pastetter's* seniority, experience, and caliber; however, even taking this into consideration, his performance in every respect was exceptional, and should merit special recognition.

3. It is recommended that a copy of this memorandum be placed in *Pastetter's* personnel folder.

*Frank Phillips*  
S-E-C-R-E-T

SECRET

CO: 94209

6 AUG 1969

**MEMORANDUM FOR: Director of Central Intelligence**

**THROUGH : Deputy Director for Plans**

**SUBJECT : Appointment of Mr. David A. Phillips as  
Chief of Station, Rio de Janeiro, Brazil**

1. The appointment of Mr. David A. Phillips, GS-16, as Chief of Station, Rio de Janeiro, effective on or about 15 January 1970 is recommended. Mr. Phillips would replace Mr. Robert D. Gahagen.

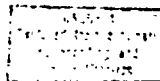
2. Mr. Phillips has been an employee of the Agency since 1951 initially in a contract capacity. He has served in Santiago, Guatemala City, Havana, Beirut, Mexico City and most recently as Chief, Cuban Operations Group. Mr. Phillips is fluent in the Spanish language and is scheduled for two months of full-time Portuguese training immediately prior to his departure. A biographic profile including information regarding his Agency experience and training is attached.

*William V. Broe*  
William V. Broe  
Chief

Western Hemisphere Division

Attachment  
Biographic Profile (Parts 1 and 2)

SECRET





**CONFIDENTIAL**

*(When Filled In)*

Complete in original. 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 residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) (First) (Middle) SOCIAL SECURITY NUMBER  
**Phillips David Alton 460-28-3930**

1. RESIDENCE DATA  
 PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY: **Santiago, Chile**  
 LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad): **Washington, D.C.**  
 PLACE OF RESIDENCE DESIGNATED AS PERMANENT RESIDENCE: **Fort Worth, Texas**  
 HOME LEAVE RESIDENCE: **Bethesda, Md. (Please note this is a change)**

2. MARITAL STATUS (Check one)  
 SINGLE  
 MARRIED  
 SEPARATED  
 DIVORCED  
 WIDOWED  
 ANNULLED  
 IF MARRIED, PLACE OF MARRIAGE: **Potomac, Maryland** DATE OF MARRIAGE: **28 March 1969**  
 IF DIVORCED, PLACE OF DIVORCE DECREE: \_\_\_\_\_ DATE OF DECREE: \_\_\_\_\_  
 IF WIDOWED, PLACE SPOUSE DIED: \_\_\_\_\_ DATE SPOUSE DIED: \_\_\_\_\_  
 IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S):  
**Joan Hildebrant, incompatibility, circa September 1941**  
**Helen Haasch, incompatibility, XX 22 November 1967.**

3. MEMBERS OF FAMILY  
 NAME OF SPOUSE: **Virginia S. Phillips** ADDRESS (No. Street, City, State, Zip Code): **8224 Stone Trail Drive, Bethesda Md 20034** TELEPHONE NO.: **469-6753**  
 NAMES OF CHILDREN: **Maria, David Jr, Christopher (See Continuation)**  
 ADDRESS: **Same as above** SEX: **F, M, M** DATE OF BIRTH: **1949, 1951, 1956**  
 NAME OF YOUR FATHER (Or male guardian): **Deceased** ADDRESS: \_\_\_\_\_ TELEPHONE NO.: \_\_\_\_\_  
 NAME OF YOUR MOTHER (Or female guardian): **Deceased** ADDRESS: \_\_\_\_\_ TELEPHONE NO.: \_\_\_\_\_  
 WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY:  
**My brother, Edwin T. Phillips, Jr.**

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY  
 NAME (Mr., Mrs., Miss) (Last-First-Middle): **Mr. Phillips, Edwin Thomas** RELATIONSHIP: **Brother**  
 HOME ADDRESS (No. Street, City, State, Zip Code): **Fort Worth National Bank, Bldg., Fort Worth, Texas** HOME TELEPHONE NUMBER: **Unknown**  
 BUSINESS ADDRESS (No. Street, City, State, Zip Code) (If applicable): **Same as above.** BUSINESS TELEPHONE & EXTENSION: **Unknown**

IS THE INDIVIDUAL NAMED ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)  
 YES  NO   
 IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)  
 YES  NO   
 DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 5.)  
 YES  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 6 ON THE REVERSE SIDE OF THIS FORM.

CONTINUED ON REVERSE SIDE

**CURRENT RESIDENCE AND DEPENDENCY REPORT**

CONFIDENTIAL

(When Filled In)

9. VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

Fort Worth National Bank, Fort Worth, Texas. Checking and Saving.  
Potomac National Bank, Potomac, Md. Checking.  
Columbia Federal (House mortgage).

All in name David A. Phillips

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?  YES  NO

IF YES, DO YOU HAVE A JOINT ACCOUNT?  YES  NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. (If "Yes" where is document located?)

In possession of my brother and attorney, Edwin T. Phillips, Jr. (See above).

HAVE YOU PRE-PLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  YES  NO. (If "Yes" give name(s) and address)

But, My children would go their mother; my step-children to their father.

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. (If "Yes", who possess the power of attorney?)

My brother, Edwin T. Phillips, Jr.

10. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

Continuation of children:

The following are my step children, who live with/and/or receive more than half their support from me: (All have common address of 8224 Stone Trail Drive):

Deborah Anne Ahern (f)  
Bryan Moss Ahern (m)  
Wynne Aughterton Ahern



SIGNED AT Washington Dc	DATE 19 November 1969	SIGNATURE 
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SECRET  
(When Filled In)

FILE  
PUNCHED  
List

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST	MIDDLE
024365	Phillips,	David A.	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 38, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-29	27-29	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 9 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
08	05	69	08	06	69	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		WH	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. Wh 71-70	DOCUMENT DATE/PERIOD 5 - 8 Aug 69
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REMARKS

PREPARED BY JACO	REPORT ANNOTATED OR CONTROL DOCUMENT <input checked="" type="checkbox"/>	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C & L DIVISION, CYBR.	DATE 21 Nov 69	SIGNATURE AC Staley

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

PUNCHED  
CYR

**TO:** Office of Personnel, Transactions and Records Branch, Status Section

**SERIAL NO.** 1-0  
**NAME** LAST FIRST MIDDLE

024345 (Print) P. H. H. P. D. C. L. O. A

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 90, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				40-42

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION			SOUTH ADIRACOR	40-42
07	08	69	07	12	69		2			66 3

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

**DOCUMENT IDENTIFICATION NO.** 10H 48-70      **DOCUMENT DATE/PERIOD** 7-8-71/2/69

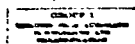
**REMARKS**

**PREPARED BY** DCO      **REPORT ANNOTATED OR CONTROL DOCUMENT**      **ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED**

**C & L DIVISION, CTR.**      **DATE** 7/10/69      **SIGNATURE** [Signature]

**C & Y DIVISION**

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



**SECRET**  
(When Filled In)

REPORT OF SERVICE ABROAD												FILE PUNCHED BY <i>ret</i>					
TO: Office of Personnel, Transactions and Records Branch, Status Section																	
SERIAL NO.			NAME														
1-6 024345			(Print) LAST PHILLIPS			7-24 FIRST DAVID			MIDDLE A.								
INSTRUCTIONS																	
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.																	
PCS DATES OF SERVICE																	
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA				O/P USE ONLY		COUNTRY					
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	CODE	37	38	39			CODE				
25-26	27-28	29-30	31-32	33-34	35-36												
TDY DATES OF SERVICE																	
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA				O/P USE ONLY		AREA(S)					
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE	37	38	39	WH		CODE				
25-26	27-28	29-30	31-32	33-34	35-36												
0	5	1	9	6	9	0	5	2	1	6	9	2			1	2	0
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA																	
SOURCE DOCUMENT AND CERTIFICATION																	
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH											
<input type="checkbox"/> CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT											
OTHER (Specify)																	
DOCUMENT IDENTIFICATION NO.							DOCUMENT DATE/PERIOD										
							5 thru 21 May 1969										
REMARKS																	
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT				ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED										
DCO																	
<input checked="" type="checkbox"/> C & L DIVISION, CYBR.			DATE				SIGNATURE										
C & Y DIVISION			28 May 1969				<i>[Signature]</i>										
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER																	



SECRET  
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO: Office of Personnel, Statistical Reporting Branch, ROOM 5 E-2506 Headquarters

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE			OFFICE/COMPONENT
	LAST	FIRST	MIDDLE	
1-6  021345	(Print)  Phillips	7-24  David	  A.	25-26  WH Division

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	ARRIVAL				DEPARTURE			COUNTRY	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42

TDY DATES OF SERVICE

TYPE OF DATA	DEPARTURE				RETURN			AREA(S)	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2	5	22	68	5	25	68	Mexico	450

SOURCE OF RECORD DOCUMENT

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.  WH-703-68	DOCUMENT DATE/PERIOD  22-25 May 1968
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REMARKS

PREPARED BY OSY	REPORT ANNOTATED ON SOURCE DOCUMENT	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & L DIVISION C & T DIVISION	DATE 5 August 1968	SIGNATURE <i>[Signature]</i>

Creditable Service —

Military 45-10-31<sup>32</sup>  
43-02-13  
02-08-19

Contract Employee — 54-03-04  
55-03-31 } CON-  
Staff Employee — 55-04-01 } TINUOUS  
56-02-06 } SERVICE  
STAFF AGENT — 56-02-07  
58-08-13

INDEPENDENT CONTRACTOR 58-08-19 } NOT  
TO } CREDITABLE  
60-03-13 } SERVICE

STAFF EMPLOYEE — 03-14-60  
TO  
PRESENT

02-08-19 MILITARY 58-08-13  
04-05-10 54-03-04  
06-13-29 04-05-10  
07-01-29  
44  
~~60-03-13~~  
07-01-29

S.C.D. 53-01-15 } d.m. 7-01-66  
L.C.D. 55-10-04 }

**DESIGNATION OF BENEFICIARY**  
 UNPAID COMPENSATION OF  
 DECEASED CIVILIAN EMPLOYEE

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

**INFORMATION CONCERNING THE EMPLOYEE:**

NAME— (Last)	(First)	(Middle)	DATE OF BIRTH (Month, day, year)
Phillips	David	Atlee	October 31, 1922

**DEPARTMENT OR AGENCY IN WHICH EMPLOYED**

(Department or agency) (Bureau) (Division)

I, the employee identified above, canceling any and all previous Designations of Beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any UNPAID COMPENSATION due and payable under existing law after my death. I understand that this Designation of Beneficiary relates solely to Unpaid Compensation as defined in section 2 of the act of August 3, 1950, Public Law 528, and in no wise will affect the disposition of any benefit which may become payable under the Retirement Act applicable to my Government service. I further understand that this Designation of Beneficiary will remain in full force and effect, unless or until rescinded by me in writing, so long as I am continuously employed in the above department or agency.

**INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:**

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Maria I. Phillips	8224 Stone Trail Drive Bethesda, Maryland 20034	daughter	one-fourth
David A. Phillips, Jr.	8224 Stone Trail Drive Bethesda, Maryland 20034	son	one-fourth
Atlee Y. Phillips	8224 Stone Trail Drive Bethesda, Maryland 20034	daughter	one-fourth
Christopher C. Phillips	8224 Stone Trail Drive Bethesda, Maryland 20034	son	one-fourth

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

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

1 December 1967

(Date of execution—month, day, year)

*David A. Phillips*  
 (Signature of employee)

**WITNESSES TO SIGNATURE:**

<i>Margaret Joyce</i> (Signature of witness)	2400 So. Glebe Rd (Number and street)	Arlington, Va 22206 (City, zone number, and State)
<i>Elizabeth Ann Kelly</i> (Signature of witness)	8137 Prescott Dr (Number and street)	Vienna, Va 22180 (City, zone number, and State)

**PRINT OR TYPE NAME AND ADDRESS OF EMPLOYEE**

David A. Phillips  
 8224 Stone Trail Drive  
 Bethesda, Maryland 20034

**THIS SPACE RESERVED FOR RECEIVING DATA OF EMPLOYING AGENCY**

05 DEC 1967

*Eric J.P.*  
 (Indicate date and by whom received) *J.P.*

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

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-5	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
024345	Phillips	David	A.

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 59, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR						37
26-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION	37	38	39	Dominican Republic	190
			08	02	67		1			Dominican Republic	

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR						37
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 8 - CANCELLATION	37	38	39		

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

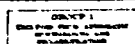
<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. IN 24359	DOCUMENT DATE/PERIOD August 2, 1967
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REMARKS

PREPARED BY DCO	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C & L DIVISION, CTBR.	DATE	SIGNATURE
C & T DIVISION	August 2, 1967	David Phillips

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



<b>DISPATCH</b>		CLASSIFICATION <b>S E C R E T</b>	PROCESSING ACTION
TO	Chief, Western Hemisphere Division		MARKED FOR INDEXING
INFO.			NO INDEXING REQUIRED
FROM	Chief of Station, Santo Domingo <i>NCE</i>		ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT	Letter of Appreciation from General Bruce Palmer, Jr.		
ACTION REQUIRED - REFERENCES			
<p>Action: See para two</p> <p>1. Attached find an original and two copies of a letter of appreciation from Gen. Bruce Palmer, until 18 January, Commander of USFORDOMREP.</p> <p>2. It is requested that the original be placed in the personnel file of Michael C. CHOADEN. The first copy, marked "A" should be placed in the personnel file of Stewart R. PATAKER. The second copy, marked "B", should be passed to Franklyn D. MALLEK for his information and disposition.</p> <p><i>James E. Hickey</i></p> <p><i>Stewart R. Pataker</i></p> <p><i>Michael C. Choaden</i> Michael C. CHOADEN</p> <p><i>1966</i></p>			
Attachment: Letter			
Distribution: 3 - Chief, WHD w/att h/w			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE	
	HDCT 1359	18 January 1966	
	CLASSIFICATION	HQ5 FILE NUMBER	
	S E C R E T		

HEADQUARTERS  
UNITED STATES FORCES DOMINICAN REPUBLIC  
APO New York 09478

*h. (CHERRY)  
Compliments with  
this is a typical of  
your excellent  
performance WTS*

USFDR-CG

17 January 1966

SUBJECT: Letter of Appreciation

THRU: The Honorable W. Tapley Bennett  
American Ambassador  
Santo Domingo, Dominican Republic

TO: *6-*  
DAVID A PHILLIPS  
American Embassy  
Santo Domingo, Dominican Republic

1. I wish to express my sincere appreciation for the outstanding contributions you and your staff have made in the accomplishment of USFORDOMREP Intelligence missions from 1 May 1965 through 17 January 1966. The first intelligence contact upon our arrival at San Isidro Air Base on 1 May was a representative from your office. From that day on a mutual respect, cordial relationship and a unity of effort prevailed throughout the many trying days in the Dominican Republic crisis. Without your assistance we would have realized a serious gap in the intelligence picture, a gap which would have made intelligence evaluations and the development of tactical estimates most difficult.


2. My J2 has frequently mentioned the close association and coordination he has had with you and the members of your organization and repeatedly expressed the high esteem and respect he has for the professionalism and competence displayed by you and your subordinates.

3. The intelligence unity of effort in the Dominican Republic has been exemplary and a prototype for future operations. This cohesive atmosphere is directly attributable to your efforts.

USFDR-CG  
SUBJECT: Letter of Appreciation

17 January 1966

4. Again I wish to express my appreciation and congratulations on a job well done.

  
BRUCE PALMER, JR.  
Lieutenant General, USA  
Commander

FORM 1451 RECORD OF OVERSEAS SERVICE	NAME OF EMPLOYEE <b>PHILLIPS, DAVID A.</b>	EMPLOYEE SERIAL NO. <b>24345</b>	COMPLETED BY EMPLOYEE		TELEPHONE EXT.	<b>SECRET</b> (WHEN FILLED IN)			
			YES	NO					
DO NOT FOLD, STAPLE, SPINDLE, OR MUTILATE									
INSTRUCTIONS  THIS FORM MUST BE RETURNED WHETHER YOU HAVE HAD OVER- SEAS SERVICE OR NOT.  PLEASE READ CAREFULLY IN- STRUCTIONS ON ACCOMPANYING CARD; THEN FILL OUT THIS FORM AS ACCURATELY AS POSSIBLE.	DO NOT WRITE IN COLUMN	WHERE SERVICE WAS PERFORMED	PCS - 1 TOY 2 ENTER NO.	DATES FROM TO MO YR MO YR		SERVICE AS CIVILIAN - 1 MILITARY - 2 ENTER NO.	RESPONSIBLE US GOVT DEPT OR AGENCY	DO NOT WRITE IN COLUMN	
				31 32 33 34 35 36	37 38 39 40	41			
		176 HAWAII, C-22	1	04	156	157	1	CIA	100
		400 BEIRUT, LEBANON	1	07	157	158	1	CIA	100
	861 AFRICA STAIT <del>GERMANY</del>	1	04	43	45	2	USAAF	100	

IF ADDITIONAL SPACE IS NEEDED, CHECK HERE  AND ASS YOUR ADMINISTRATIVE OFFICER FOR SUPPLEMENTAL CARDS **SECRET**



CONFIDENTIAL  
(When Filled In)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents  
of Handbook 20-4, Employee Conduct, dated 29 August 1961.

*David A. Phillips*  
Signature

2 October 1963  
Date

DAVID A. PHILLIPS

CONFIDENTIAL

---

**REPORT OF HONOR AWARDS BOARD**  
(CONVENED PURSUANT TO REGULATIONS R 20-635 AND AFR 20-635)

3 DEC 1954

The Honor Awards Board having considered a recommendation that:

NAME:	(Last) PHILIP	(First) David	(Middle) Atlee	POSITION TITLE Cover Associate
PRESENT GRADE	OFFICE ASSIGNED TO		STATION	
7200.00 p.a.	Division		PR 50225	

TO BE AWARDED:

Distinguished Intelligence Medal

FOR HEROIC ACTION, ON

FOR MERITORIOUS ACHIEVEMENT OR SERVICE DURING THE PERIOD  
January - July 1954

APPROVES THE RECOMMENDATION       DISAPPROVES THE RECOMMENDATION

APPROVES, BUT IN LIEU THEREOF, RECOMMENDS THE AWARD OF: **Intelligence Medal of Merit**

CITATION

DAVID ATLEE PHILIP is hereby awarded the Intelligence Medal of Merit for his outstanding dedication and devotion to the cause of freedom.

While assigned a position of responsibility in creating a psychological medium to further the efforts of removing a serious threat to the security and welfare of his government, he, personally, with superior talent and concentration of energy proceeded to develop a program which greatly contributed to the ultimate elimination of the threat which concurrently brought historical relief to the oppressed people of an entire population.

The psychological medium developed and sustained by Mr. PHILIP was directed and operated with such ingenuity, resourcefulness and forceful imagination that he was able to create and maintain a completely notional situation for an extended period thereby making it possible to achieve the objectives of his government. This achievement has no parallel in the history of psychological warfare.

REASONS FOR DISAPPROVAL OF RECOMMENDED AWARD

<p>APPROVED</p> <p style="text-align: center;"><b>SIGNED</b></p> <p><i>Carney</i> DIRECTOR OF CENTRAL INTELLIGENCE 8 SEP 1954</p> <p style="text-align: center;">DATE</p>	<p>SIGNATURE <b>SIGNED</b></p> <p>TYPED NAME OF CHAIRMAN, HONOR AWARDS BOARD ROBERT W. GILSON</p> <p>SIGNATURE <b>SIGNED</b></p> <p>TYPED NAME OF RECORDER J. W. GILSON</p>
---	---

SECRET  
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE									
TO: Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall									
EMPLOYEE SERIAL NO.  1-6	NAME OF EMPLOYEE						OFFICE/COMPONENT  25-26		
	LAST  (Print)	FIRST  7-24			MIDDLE				
24345	Phillips	David				A	35- 64		
INSTRUCTIONS									
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.									
PCS DATES OF SERVICE									
TYPE OF DATA  1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT  40-42
	27	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
	1	09	25	61				Mexico	450
TDY DATES OF SERVICE									
TYPE OF DATA  2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE	DEPARTURE			RETURN			AREA(S)	OMIT  40-42
	27	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
								WH	
SOURCE OF RECORD DOCUMENT									
<input type="checkbox"/> TRAVEL VOUCHER					<input checked="" type="checkbox"/> DISPATCH				
<input checked="" type="checkbox"/> CABLE					DUTY STATUS OR TIME AND ATTENDANCE REPORT				
OTHER (Specify)									
DOCUMENT IDENTIFICATION NO.  HMMT-2316					DOCUMENT DATE PERIOD  13 October 1961				
REMARKS									
PREPARED BY			REPORT ANNOTATED ON SOURCE DOCUMENT			ABOVE DATA VERIFIED CORRECT. BASED UPON SOURCE DOCUMENT CITED			
FISCAL DIVISION			DATE 11/20/61			SIGNATURE <i>[Signature]</i>			
FINANCE DIVISION 42									

SECRET

CONFIDENTIAL

29 June 1961

MEMORANDUM FOR THE RECORD

SUBJECT: David A. Phillips

On 14 June 1961 the undersigned reviewed with Mr. David A. Phillips his career development prospects for the next five year period. We agreed that the following represented a desirable and fairly firm goal in this respect:

- a. In general his future training and field experience should place sufficient stress on the CI and FI fields to avoid the career confinement of strict CA specialization.
- b. His next assignment would be a normal field tour in Mexico City. Upon return from that assignment, he would receive up to six months training to be followed by an assignment to the CA Staff (or the organizational successor thereof). One of his primary undertakings in the CA Staff would be to develop what might best be termed "ideological warfare" (e.g., a search for basic ideas and concepts with wide appeal) as opposed to the normal propaganda approach (e.g., a running debate on current events).

*Richard M. Bissell, Jr.*  
RICHARD M. BISSELL, JR.  
Deputy Director  
(Plans)

cc: ASJA (Pers)  
Attn Panel A  
Mr. Phillips  
Thru C/WH  
OP/RSD

SECRET

**CONFIDENTIAL**  
(When Filled In)

TR

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave of government expense, overseas duty, return to residence upon separation, and for providing current residence 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 (Last) <u>PHILLIPS</u> (First) <u>DAVID</u> (Middle) <u>ATLEE</u>		SOCIAL SECURITY NUMBER	
<b>1. RESIDENCE DATA</b>			
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED <u>FOOT WORTH, TEXAS</u>		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <u>FOOT WORTH, TEXAS</u>		HOME LEAVE RESIDENCE <u>FOOT WORTH, TEXAS</u>	
<b>2. MARITAL STATUS (Check one)</b>			
<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, PLACE OF MARRIAGE <u>FOOT WORTH, TEXAS</u>			DATE OF MARRIAGE
IF DIVORCED, PLACE OF DIVORCE DECREE			DATE OF DECREE
IF WIDOWED, PLACE SPOUSE DIED			DATE SPOUSE DIED
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S) <u>JAN NINDSKAUF PHILLIPS INCAPABILITY SEP 15, 1941</u>			
<b>3. MEMBERS OF FAMILY</b>			
NAME OF SPOUSE <u>HELEN N PHILLIPS</u>		ADDRESS (No., Street, City, Zone, State) <u>6307 DANFORTH RD. WASH 16, DC</u>	
TELEPHONE NO. <u>OL-2-8134</u>			
NAMES OF CHILDREN <u>MARIA DAVID, JR ATLEE CHRISTOPHER</u>		ADDRESS	SEX F M F M
DATE OF BIRTH			
NAME OF FATHER (Or male guardian) <u>DECEASED</u>		ADDRESS	
TELEPHONE NO.			
NAME OF MOTHER (Or female guardian) <u>DECEASED</u>		ADDRESS	
TELEPHONE NO.			
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY. <u>WIFE - BRISTOL EDWIN T. PHILLIPS (A)</u>			
<b>4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY</b>			
NAME (Mr., Mrs., Miss) (Last-First-Middle) <u>PHILLIPS, EDWIN T.</u>		RELATIONSHIP <u>BROTHER</u>	
HOME ADDRESS (No., Street, City, Zone, State) <u>4408 WASHINGTON ST. FOOT WORTH, TEX</u>		HOME TELEPHONE NUMBER <u>?</u>	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE <u>FOOT WORTH NATIONAL BANK BLDG.</u>		BUSINESS TELEPHONE & EXTENSION <u>?</u>	
IS THE INDIVIDUAL NAMED ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)			YES <input checked="" type="checkbox"/>
			NO <input type="checkbox"/>
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)			YES <input checked="" type="checkbox"/>
			NO <input type="checkbox"/>
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 5.)			YES <input checked="" type="checkbox"/>
			NO <input type="checkbox"/>
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 6 on the reverse side of this form.			
CONTINUED ON REVERSE SIDE			
<b>CURRENT RESIDENCE AND DEPENDENCY REPORT</b>			

SECRET

Supplement to Staff Employee Personnel

Action for [redacted] David A. Phillips

Effective 23 August 1961

The purpose of this memorandum is to call your attention to existing policies which are particularly material to you while you are [redacted] and to set forth certain rights and obligations which are incident to your status [redacted]. It is hereby agreed and understood that:

1. As an employee of this organization, at the present grade and salary of GS-3 \$12,700 per annum, you will accept cover employment with [redacted] (hereinafter referred to as "your cover facility") effective as of 23 August 1961. You will, insofar as consistent with your basic responsibility to this organization, abide by all the rules, regulations, practices and policies of your cover facility, in order to appear as a conventional member of that establishment. Your appointment to your cover facility is being effected at FSR-3 and salary of \$12,535 per annum. You are prohibited, except as specifically authorized herein, from retaining emoluments paid by your cover facility.

2. It is understood and agreed that the minimum period of your overseas tour of duty is governed by and coincident with the prescribed tour of duty of your cover organization. Currently, your prescribed tour consists of a period of twenty-four months from the date of your arrival at your overseas post of duty. Your assignment may be terminated earlier for the convenience of this organization and the length of your tour of duty, as currently specified, may be unilaterally changed by this organization in order to conform with subsequent changes in the prescribed tour of your cover facility. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed the minimum period of service prescribed above from the date of arrival at your overseas post of duty, you will not be entitled to return travel or transportation for yourself or your dependents to the United States at Government expense. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed one (1) year of service from the date of your arrival at your overseas post of duty, you will be required to reimburse the Government for all of its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.



SECRET

e. All annual and sick leave which is accrued to your credit at the time of integration will be transferred to your cover facility. While integrated you will be permitted annual leave, sick leave, home leave, and leave without pay in accordance with the regulations of your cover facility in lieu of the leave benefits of this organization. Upon completion of your integration your accrued annual and sick leave will be transferred to your credit with this organization. If security conditions require that your cover facility make a lump-sum payment for accrued annual leave, you will be required to pay the gross amount thereof to this organization including any income taxes withheld by your cover facility.

6. You will be required to keep forever secret this agreement and all other information which you may obtain by reason hereof, unless you are released in writing by this organization from this obligation. Violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1948, as amended, and other applicable laws and regulations. The termination of your employment with this organization will not release you from the obligation of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY *Walter P. Davis*  
Personnel Office

ACCEPTED:

*Doris A. H. [unclear]*



S E C R E T

11 January 1961

TO : Director of Personnel

FROM : Chief, WHD

SUBJECT: Additional Compensation in Lieu of Overtime Payment

REF: Memo dated 11 January 1961 from SSA/DPS to DD/S, approved by DD/S, Subject: "Employee Benefits for JFATS Personnel"; and memo dated 22 December 1960 from ADD(P) to Deputy Director (Plans), Subject: "Employee Benefits for Personnel Assigned to JFATS".

In accordance with referenced memoranda, it is requested that the personnel listed below be authorized to receive additional compensation effective 8 January 1961, at the rate of 15% of their respective rates of basic annual compensation (but not to exceed the ~~regular~~ rate for a *Minimum* GS-9) in lieu of payment of the regular overtime rates for irregular, unscheduled and frequent overtime.

<u>NAME</u>	<u>EMPLOYEE Serial No.</u>	<u>TITLE</u>	<u>SALARY</u>
ESTERLINE, Jacob D.	56798	OPS Officer	\$14,055
WHEBBS, Robert B.	509360	Ops Officer	12,990
DOUGLAS, Jesse S.	229360	Ops Officer	14,055
EMILIAS, David A.	654500	OPS Officer	12,730
MAOHI, Louis F.	012515	OPS Officer	12,210
YUZZUK, Walter P.	064738	OPS Officer	12,730
PETERS, John D.	56093	OPS Officer	11,575
WARMER, Thomas D.	59794	Instructor (OPS)	8,955
HIGGS, Calvin W.	56351	Guerrilla Warfare Officer	9,475
RILEY, James	50471	OPS Officer	8,810
WILSO, Anthony L.	559127	OPS Officer	7,820
BHAIR, William E.	60218	Instructor (OPS)	8,955
VEEDALL, Sidney B.	059517	OPS Officer	11,155
REYNOLDS, Robert	55407	OPS Officer	12,470
SPACER, Ernest W.	52285	Instructor (OPS)	12,470
BROWN, Pravel S.	61901	Ops Officer	9,475
CANTWRIGHT, Cecil J.	57840	OPS Officer	9,215
ORILLINO, Samuel J.	55622	Adm. Officer	7,820
MORALLES, David S.	53385	OPS Officer	12,210
KANT, William H.	559198	Ops Officer	9,215

All the above employees are on Allotment #535-5000-3021.

APPROVED  
*Emmett J. Schools*  
EMMETT J. SCHOOLS

*J. C. King*  
J. C. KING  
Chief, WHD

## APPOINTMENT AFFIDAVITS

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

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

WASHINGTON, D.C.

(Bureau or division)

(Place of employment)

I, DAVID ATLEE PHILLIPS, 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.

14 March 1960  
(Date of entrance on duty)

David A Phillips  
(Signature of appointee)

Subscribed and sworn before me this 11<sup>th</sup> day of March A. D. 1960,

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

[SEAL]

Allen Capron  
(Signature of officer)

PERSONNEL CLERK  
(Title)

NOTE.—The oath of office must be administered by a person specified in 5 U. S. C. 18, or by a person designated to administer oaths under Section 206, Act of June 26, 1943, 5 U. S. C. 16a. If by 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)  
ALBAN TOWERS - 3500 MASS. AVE. WASHINGTON, D.C.

2. (A) DATE OF BIRTH OCTOBER 31, 1922 (B) PLACE OF BIRTH (city and State or city and foreign country)  
FORT WORTH, TEXAS

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY HELEN N. PHILLIPS (B) RELATIONSHIP WIFE (C) STREET AND NUMBER CITY AND STATE ALBAN TOWERS 3500 MASS. AVE. WASH, D.C. (D) TELEPHONE NO. WOL-6400

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)	(1) POSITION (2) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	(3) TEMPORARY OR NOT	RELATIONSHIP	MAR. STAT.	SIN. STAT.
					(Check one)	
		1. ....				
		2. ....				
		3. ....				
		1. ....				
		2. ....				
		3. ....				
		1. ....				
		2. ....				
		3. ....				

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
8. (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"/>
9. 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 checked="" type="checkbox"/>	<input type="checkbox"/>	(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED 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 checked="" type="checkbox"/>	<input type="checkbox"/>	11. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, 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 LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCE? DO NOT INCLUDE TRAFFIC VIOLATIONS, FOR WHICH A FINE OF \$25 OR 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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 clearly 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.	ITEM NO.

**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.

**STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE  
AND DETERMINATION OF COMPETITIVE STATUS**

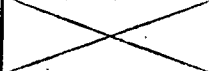
**IMPORTANT:** The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I.—EMPLOYEE'S STATEMENT										PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE		
1. NAME (Last, first, middle initial)					2. DATE OF BIRTH					3. RETENTION GROUP		
PHILLIPS, DAVID ATLEE					OCTOBER 31, 1927							
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service).										10. A. CSC STATUS <input type="checkbox"/> YES <input type="checkbox"/> NO B. TYPE OF PRESENT APPOINTMENT		
NAME AND LOCATION OF AGENCY	FROM			TO			TYPE OF APPOINTMENT IF KNOWN	11. SERVICE				
	YEAR	MONTH	DAY	YEAR	MONTH	DAY		YEAR	MONTH	DAY		
CIA	1954	10	1	1955	10	13	C.S.-1	3	4	13		
4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE."												
BRANCH	FROM			TO			DISCHARGE (Hon. or dishon.?)					
	YEAR	MONTH	DAY	YEAR	MONTH	DAY						
ARMY AIR FORCE	1948	2	13	1955	10	31	HON.	2	8	19		
5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.										12. TOTAL SERVICE 6 2 3		
TYPE IF KNOWN (LWOP, Furl, Susp, AWOL, Mer Mar)	FROM			TO			TOTAL			13. NONCREDITABLE SERVICE (Leave purposes only):		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS			
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)										14. NONCREDITABLE SERVICE (RIF purposes only):		
7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNREMARIED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										15. REEMPLOYMENT RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO		
8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.										16. RETENTION RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO		
12 MARCH 1960 (DATE)										17. EXPIRATION DATE OF RETENTION RIGHTS		
Subscribed and sworn to before me on this _____ day of _____ 1960 at WASHINGTON, D.C. (MONTH) (CITY) (STATE)												
SEAL												
NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.												
INSTRUCTIONS: File this form on the permanent side of the employee's official personnel folder immediately before or after the personnel action involved.												

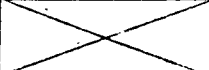
**Part III.—DETERMINATION OF COMPETITIVE STATUS.** (Complete for noncompetitive hires based on competitive status as required by instructions in FPM Chapter 52.) Employee has a competitive status. This determination is based upon the following evidence:

NAME OF AGENCY	SIGNATURE AND OFFICIAL TITLE	DATE

**PART IV.—DETERMINATION OF CREDITABLE SERVICE AND SERVICE COMPUTATION DATE FOR LEAVE PURPOSES**

	TOTAL SERVICE (Item 12)	NONCREDITABLE SERVICE (Item 13)	CREDITABLE SERVICE (Leave Purpose)	ENTRANCE ON DUTY DATE (Present Agency)	LESS CREDITABLE SERVICE (Leave Purpose)	SERVICE COMPUTATION DATE (Leave Purpose)
Years				1960	5	
Months				03	12	3
Days				14	14	1

**PART V.—DETERMINATION OF CREDITABLE SERVICE AND SERVICE COMPUTATION DATE FOR REDUCTION IN FORCE PURPOSES.** (Complete only in those cases when the amount of creditable service for reduction in force purposes differs from the amount creditable for leave purposes.)

	TOTAL SERVICE (Item 12)	NONCREDITABLE SERVICE (Item 14)	CREDITABLE SERVICE (RIF Purpose)	ENTRANCE ON DUTY DATE (Present Agency)	LESS CREDITABLE SERVICE (RIF Purpose)	SERVICE COMPUTATION DATE* (RIF Purpose)
Years						
Months						
Days						

\* Enter as the "Service Computation Date" on the employee's "Service Record Card," SF 7

REMARKS:

**CONFIDENTIAL**

(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 (Last) (First) (Middle) <b>PHILLIPS DAVID ATLEE</b>		
RESIDENCE DATA		
PLACE OF RESIDENCE WHEN APPOINTED <b>HAVANA, CUBA</b>	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) <b>476 ROSE LANE, ARLINGTON, VA.</b>	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <b>4504 WASHINGTON, FORT WORTH, TEXAS</b>		
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 <b>FORT WORTH, TEXAS</b>		DATE OF MARRIAGE <b>9 JUNE 1948</b>
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) <b>JOAN HILDEBRANDT, DIVORCE DECREE FOR (INCOMPATIBILITY), FORT WORTH, TEXAS, -- ? -- 1943</b>		
3. MEMBERS OF FAMILY		
NAME OF SPOUSE <b>HELEN N. PHILLIPS</b>	ADDRESS (No., Street, City, Zone, State) <b>ALBANY TOWERS, 3500 MASC AVE, (WACK), D.F.</b>	TELEPHONE NUMBER <b>WO 6-6400</b>
NAMES OF CHILDREN	ADDRESS	SEX AGE
<b>MARIA LOUISE PHILLIPS</b>	" " " "	<b>F 10</b>
<b>DAVID A. PHILLIPS JR.</b>	" " " "	<b>F 7</b>
<b>ATLEE YOUNG PHILLIPS</b>	" " " "	<b>M 3</b>
<b>CHRISTOPHER CARL PHILLIPS</b>	" " " "	
NAME OF FATHER (Or male guardian) <b>EDMUND PHILLIPS (DECEASED)</b>	ADDRESS <b>NA.</b>	TELEPHONE NUMBER <b>NA</b>
NAME OF MOTHER (Or female guardian) <b>MARY LOUISE PHILLIPS (DECEASED)</b>	ADDRESS <b>NA</b>	TELEPHONE NUMBER <b>NA</b>
WHAT MEMBERS OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES? <b>WIFE, AND BROTHER (EDMUND PHILLIPS JR 4504 WASHINGTON, FORT WORTH, TX</b>		
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
NAME (Mr., Mrs., Miss) (Last-First-Middle) <b>PHILLIPS HELEN FLORENCE</b>	RELATIONSHIP <b>WIFE</b>	
HOME ADDRESS (No., Street, City, Zone, State) <b>3500 MASC AVE (ALBANY TOWERS)</b>	HOME TELEPHONE NUMBER <b>WO 6-6400</b>	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE <b>NONE</b>	BUSINESS TELEPHONE & EXTENSION <b>NONE</b>	
IS THIS INDIVIDUAL NAMED ABOVE BITTING 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 6 ON THE REVERSE SIDE OF THIS FORM.		
5. VOLUNTARY ENTRIES		
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS <b>FORT WORTH NATIONAL BANK, FORT WORTH, TEXAS</b>		
CONTINUED ON REVERSE SIDE		

**CURRENT RESIDENCE AND DEPENDENCY REPORT**



CONFIDENTIAL

MEMORANDUM FOR:

SUBJECT : Credit Reference

1. You are advised that the position for which you have been hired is of a sensitive nature and that YOU ARE NOT TO IDENTIFY YOURSELF WITH THIS AGENCY FOR credit reference or for any other purpose.

2. You are to disregard that portion of the Monday morning Personnel EEO Orientation and the Monday morning Security Introduction (which you will receive during your second or third week with the Agency) which authorizes certain personnel to identify themselves with this Agency, when necessary, for credit, rental agreements, and like purposes.

3. You will be advised by your Placement Officer as to the correct information concerning your proper job identification. If at any time you encounter difficulties and are unable to arrange an appointment through your Placement Officer to see the Security Officer responsible for your activity.

G. H. STREET  
Director of Personnel

I have read the above and understand that I am not to associate myself with the Central Intelligence Agency for credit reference or for any other purpose.

14 March 1960  
Date

*David C. Pinner*  
Signature of Employee



SECRET

STAFF AGENT LETTER OF APPOINTMENT

Mr. *Howard Phillips*

Dear Mr. *Phillips*

1. Pursuant to the authority vested in me by section 5.2 of the Confidential Fund Regulations, you are hereby appointed a Staff Agent of the Government at an initial salary of \$10,320, grade GS-14, effective as of

FEB 7 1956

2. As a Staff Agent of the Government, you are an appointed employee of the Government and as such are entitled to all the emoluments of, and subject to the restrictions of, that status. As a Staff Agent, you will undertake certain cover employment or activities as directed by the Government. Your Federal income taxes will be reported and paid in conformance with AFN 20-660-4, dated 26 November 1954, and/or any subsequent Government issuances promulgated on this matter.

3. As an appointed employee of the Government, you are required to make certain contributions to the Civil Service Retirement Fund. In the event that you are paid through a cover facility, you will be required to return to the Government at such times and in such manner as it shall direct the required contributions (presently six per cent (6%) of your gross salary). If the conditions of your cover require that you make contributions to the Social Security Fund, such contributions will be at your expense.

4. (a) In addition to your basic salary, you will be entitled to any post differential, living-quarters allowances, cost-of-living allowances (except post allowance), or other allowances that are granted Government employees stationed at the same permanent post of duty abroad. You will account for such allowances in compliance with applicable Government regulations.

(b) In addition to the above payments, effective upon the arrival of you and your dependents at your initial permanent post of duty overseas you will be entitled to an equalization allowance calculated at the rate of \$3,670 per annum. This allowance is in lieu of any present or future standardized post allowance established for your initial permanent post of duty overseas, but is subject to the entitlement provisions applicable to standardized post allowances. It is understood and agreed that this allowance is predicated upon the comparative cost of living between Washington, D. C., and your overseas post, your unofficial cover, family status and basic compensation. Consequently, this allowance may be unilaterally adjusted or discontinued by the Government whenever warranted by a change in any of these factors. No accounting will be required for this allowance.

SECRET

5. You will be advanced or reimbursed funds for necessary expenses including travel and operational expenses which are authorized by the Government or your cover. Accountings for such expenses will be in compliance with applicable Government regulations unless such accounting is inconsistent with the practices of your cover facility. If the policies of your cover facility relating to payment of travel and transportation expenses differ from those of the Government, and if you are paid through your cover facility, you will receive and retain the amount paid by your cover without regard to Government regulations.

6. (a) It is specifically understood and agreed that as an appointed employee of the Government you are entitled to receive and retain only the salary, allowances, and other benefits which are commensurate with your appointed position and salary grade except as provided in paragraph five (5) above and paragraphs six (6), (b) and (c), below. Any compensation that you may receive from your cover facility will be offset against your salary from the Government, and you will return to the Government any salary, allowances and other pecuniary benefits which in the aggregate exceed your Government salary, allowances and other pecuniary benefits. You will report to the Government not less than semi-annually any sums received from your cover facility.

(b) It is understood and agreed that any fees derived from the remaining three (3) lectures on your current lecture tour will not be subject to the offset provisions of this agreement. It is further understood and agreed, however, that said lectures will be made by you while on annual leave and that you will be solely responsible for all expenses incidental thereto. Subsequent to the completion of said three (3) lectures, the income derived from any additional lectures will be presumed to be income derived from cover activities and will, therefore, be subject to offset unless specifically excluded by an amendment hereto.

(c) It is understood and agreed that should a specific manuscript, the title to which is set forth in your operational letter of instructions, be published during your tour of duty hereunder, the income derived therefrom will not be subject to offset as said manuscript was completed in its entirety prior to your appointment as a Staff Agent.

7. It is understood and agreed that your overseas assignment is to be for a minimum of two (2) years from the date of your arrival at your overseas post of duty unless such assignment shall be sooner terminated by the Government for its convenience. If, in violation of this letter, you terminate your overseas assignment for your convenience at any time prior to the expiration of two (2) years from the date of your arrival at your overseas post of duty, you shall not be entitled to return travel or transportation for yourself or your dependents from such post of duty to the United States; and, further, if, in violation of this letter, you terminate your overseas assignment for your convenience prior to the expiration of one (1) year from the date of your arrival at your overseas post of duty, you shall reimburse the Government for all its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.

8. It is expressly understood and agreed that any and all documents which you may execute in the course of such cover employment are subordinate to this letter and any contradiction in terms which may in any way appear to amplify, extend or restrict your rights and/or obligations hereunder shall be resolved by this letter which shall always be dominant.

SECRET

9. Upon termination of your cover employment or activity, you will revert to normal staff employee status, unless for good and sufficient cause, such as misconduct or demonstrated incompetence, such reversion would be opposed to the best interest of the Government.

10. If, in the performance of your cover service, you assume the custody of Government funds or take title of record to, property of any nature whatsoever situate which property has in fact been purchased with monies of the U. S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either express or constructive, and you agree to execute whatever documents may be required by the Government to evidence this relationship.

11. Instructions received by you from the Government in briefing or training are a part of this letter and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.


12. You will be required to keep forever secret this letter and all information which you may obtain by reason hereof (unless released in writing by the Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1948, as amended, and other applicable laws and regulations.

UNITED STATES GOVERNMENT

BY

Office of Personnel

ACCEPTED:

  
Harold Phillips

SECRET

CONTRACT INFORMATION AND CHECK LIST		CASE OFFICER	DIVISION
INSTRUCTIONS: Complete all items, inserting "N" when items are not applicable. Forward original and one copy for preparation of contract.		<b>Roy Malcolm</b>	<b>WH</b>
		TELEPHONE EXTENSION	DATE
		<b>2056</b>	<b>17 January 1956</b>
SECTION I GENERAL			
1. NAME <b>[REDACTED]</b>	2. PROJECT	3. ALLOTMENT NO.	4. SLOT NO.
		<b>6-3545-55-055</b>	<b>BAF-125</b>
5. PREVIOUS CIA PSEUDONYM OR ALIASES	6. INDIVIDUAL IS PRESENTLY ENGAGED, OR HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include salary)		
<b>Paul D. Langevin</b>	<b>Contract Agent, 1952 - 1954</b> <b>Staff Employee as of 1 May 1955 - \$10,320</b>		
7. SECURITY CLEARANCE (Type and date)	8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E. "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Top Secret</b>			
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E. REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	10. PROPOSED CATEGORY (Contract agent, contract employee, etc.)		
	<b>Staff Agent</b>		
SECTION II PERSONAL DATA			
11. CITIZENSHIP	12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO	13. AGE	14. DATE OF BIRTH (Month, day, year)
<b>U.S.</b>		<b>33</b>	<b>31 October 1922</b>
15. LEGAL RESIDENCE (City and state or country)		16. CURRENT RESIDENCE (City and state or country)	
<b>4804 Washburn, Fort Worth, Texas, USA</b>		<b>949 Rose Lane, Falls Church, Va.</b>	
17. MARITAL STATUS (Check as appropriate)			
<input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input checked="" type="checkbox"/> DIVORCED			
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP:		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP:	
Wife : Helen H. Phillips Daughter : Maria Louise Phillips Son : David A. Phillips, Jr. Daughter : Atlee Young Phillips			
SECTION III U.S. MILITARY STATUS			
20. RESERVE	21. VETERAN	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
<b>No</b>	<b>Yes</b>		
23. BRANCH OF SERVICE	24. RANK OR GRADE	25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
SECTION IV COMPENSATION			
27. BASIC SALARY	28. POST DIFFERENTIAL	29. COVER (Breakdown, if any)	30. TAXES TO BE WITHHELD BY COVER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>\$10,320</b>	<b>Yes</b>	<b>No</b>	
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)			
31. QUARTERS	32. POST	33. OTHER	
<b>Yes</b>			
34. COVER (Breakdown, if any)			
<b>Newspaperman</b>			
SECTION VI TRAVEL			
35. TYPES <input checked="" type="checkbox"/> PCS <input type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL			36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
37. HOUSEHOLD EFFECTS TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	38. PERSONAL VEHICLE TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH			
Helen H. Phillips, Wife, U.S. 36, March 29, 1919			
Maria Louise Phillips, Daughter, U.S. 6, [REDACTED]			
David A. Phillips, Jr., Son, U.S. 4, [REDACTED]			
Atlee Young Phillips, Daughter, U.S. 2, [REDACTED]			
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES			
SECTION VII OPERATIONAL EXPENSES			
42. PURCHASE OF INFORMATION	43. ENTERTAINMENT	44. OTHER	
45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH			

**CONTRACT INFORMATION AND CHECK LIST  
(CONTINUED)**

7B. SEE INSTRUCTIONS ON FIRST SHEET.

NAME OFFICER <b>Roy Malcolm</b>	DIVISION <b>WH</b>
TELEPHONE EXTENSION <b>2056</b>	DATE <b>17 January 1956</b>

**SECTION VIII OTHER BENEFITS**  
 BENEFITS (See Part XIV of Confidential Fund Regulations or successor regulations for benefits applicable to various categories of contract personnel. If medical benefits are requested, see R 15-235 or successor regulations.)

Staff Agent benefits

**SECTION IX COVER ACTIVITY**

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

18. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS  
 YES  NO  COMPLETE  PARTIAL

**SECTION X OFFSET OF INCOME**

19. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.)  
 TOTAL  PARTIAL  NONE

**SECTION XI TERM**

1. DURATION	22. EFFECTIVE DATE	23. RENEWABLE
DAYS MONTHS <b>2</b> YEARS	<b>Upon Departure</b>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

24. TERMINATION NOTICE (Number of days)  YES  NO

**SECTION XII FUNCTION**

6. PRIMARY FUNCTION (PI, PP, other) **PP**

**SECTION XIII DUTIES**

7. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED  
**PP Officer, Cuba**

**SECTION XIV QUALIFICATIONS**

58. EXPERIENCE  
**Contract Agent 1952-1954 in Chile  
 Contract Agent 1954 (PBUSUCCESS & FBHISTORY)  
 Covert Associate 1954-1955**

**SECTION XV EDUCATION**

(Check Highest Level Attained)	GRADE SCHOOL	HIGH SCHOOL GRADUATE	TRADE SCHOOL GRADUATE
	BUSINESS SCHOOL GRADUATE	COLLEGE (No degree)	COLLEGE DEGREE

59. LANGUAGE COMPETENCY

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

62. AREA KNOWLEDGE  
**Latin America, Europe**

**SECTION XVI PRIOR EMPLOYMENT**

63. JOB AND SALARY PRIOR TO SERVICE FOR CIA  
**Self employed: Newspaper editor and publisher; lecturer.**

**SECTION XVII ADDITIONAL INFORMATION**

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

DATE	TYPED NAME & SIGNATURE OF CONTRACTOR OFFICER	TYPED NAME & SIGNATURE OF SERVICE STAFF OFFICER
	<i>[Signature]</i>	

CONFIDENTIAL

You will utilize your established cover as a newspaper publisher and lecturer on Latin American affairs resident in Santiago, Chile. You have chosen to live temporarily in Cuba because of ~~some~~ unfulfilled lecture contracts in the United States. You have not returned to your business in Santiago because of the great expense of traveling between Chile and the United States. You will, in fact, return to the United States on two occasions to deliver lectures contracted before your employment as a Staff Employee of this Agency. (February 14 and 15 in Sioux Falls, South Dakota, and Wichita, Kansas; and March 13 in Palm Beach, Florida). You are strictly enjoined against using any material relating to intelligence or other covert activities. You are advised that the income received from the three scheduled lectures shall not be subject to the offset provisions of ~~your contract~~ (this letter of instruction). It is understood that the lectures will be made while on annual leave and that all expenses incidental thereto will be met by you. At some future date, should it be decided that you should renew your lecture activities, the decision as to whether or not the income will be subject to offset provisions will be made at ~~the~~ Headquarters.

<sup>are</sup>  
You ~~are~~ also informed that should the manuscript entitled "Popcorn <sup>now</sup> in the Andes", ~~now~~ in the hands of your literary agent, be published during your tour of duty the income therefrom will not be subject to the offset provisions of this contract.

SECRET

CONTRACT INFORMATION AND CHECK LIST		CASE OFFICER <b>Robert S. GoralSKI</b>	DIVISION <b>NEA</b>
INSTRUCTIONS: Complete all items involving USA, other items may not apply. Forward original and one copy for preparation of contract.		TELEPHONE EXTENSION <b>3548</b>	DATE <b>9 May 1957</b>
SECTION I GENERAL			
1. NAME <b>Helen H. Phillips</b>	2. PROJECT <b>PSCIATS</b>	3. ALLOTMENT NO.	4. SLOT NO.
5. PREVIOUS CIA PSEUDONYM OR ALIASES <b>[REDACTED]</b>	8. INDIVIDUAL IS PRESENTLY ENGAGED OR HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include salary) <b>Staff Agent, WH \$10,535.00</b>		
7. SECURITY CLEARANCE (Type and date) <b>Top Secret, 1 April 1955</b>		9. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) <b>Staff Agent</b>	
SECTION III PERSONAL DATA			
11. CITIZENSHIP <b>U.S.A.</b>	12. IF NOT U.S. CITIZEN INDIVIDUAL IS PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO	13. AGE <b>34</b>	14. DATE OF BIRTH (Month, day, year) <b>31 Oct. 1922</b>
15. LEGAL RESIDENCE (City and state or country) <b>4804 Washburn, Fort Worth, Texas</b>		16. CURRENT RESIDENCE (City and state or country)	
17. MARITAL STATUS (Check as appropriate) <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED			
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP: <b>Five: Wife and four children</b>		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP:	
SECTION IIII U.S. MILITARY STATUS			
20. RESERVE <b>N.A.</b>	21. VETERAN <b>World War II</b>	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat) <b>N.A.</b>	
23. BRANCH OF SERVICE <b>N.A.</b>	24. RANK OR GRADE <b>N.A.</b>	25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
SECTION IV COMPENSATION			
27. BASIC SALARY <b>\$10,320.00</b>	28. POST DIFFERENTIAL <b>\$585.00</b>	29. COVER (Breakdown, if any)	30. TAXES TO BE WITHHELD BY COVER <input type="checkbox"/> YES <input type="checkbox"/> NO
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)			
31. QUARTERS <b>\$3,000.00</b>	32. POST <b>\$585.00</b>	33. OTHER	
34. COVER (Breakdown, if any)			
SECTION VI TRAVEL			
35. TYPES <input checked="" type="checkbox"/> PCS <input type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL			36. WITH DEPENDENTS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
37. HOUSEHOLD EFFECTS TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	38. PERSONAL VEHICLE TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH  Wife: Helen H. Phillips, U.S., 38, 29 March 1919 Daughter: Maria Louise Phillips, U.S., 7, Daughter: Atless Young Phillips, U.S., 4, Son: David A. Phillips, Jr., U.S. 5, Child approx. 5 mos., U.S.  <i>Present letter OK.</i> <i>HW - April 57</i>			
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES			
SECTION VII OPERATIONAL EXPENSES			
42. PURCHASE OF INFORMATION <b>N.A.</b>	43. ENTERTAINMENT <b>N.A.</b>	44. OTHER <b>N.A.</b>	
45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH			

<b>CONTRACT INFORMATION AND CHECK LIST (CONTINUED)</b>		CASE OFFICER <b>Robert S. Goralski</b>	DIVISION <b>NEA</b>
NOTE: SEE INSTRUCTIONS ON FIRST SHEET		TELEPHONE EXTENSION <b>3548</b>	DATE <b>9 May 1957</b>
SECTION VIII OTHER BENEFITS			
46. BENEFITS (See Part XIV of Confidential Fund Regulations or successor regulations for benefits applicable to various categories of contract personnel. If medical benefits are requested, see B 15-210 or successor regulations.)			
<b>Usual staff employee benefits</b>			
SECTION IX COVER ACTIVITY			
47. STATUS (Check)	<input type="checkbox"/> PROPOSED <input checked="" type="checkbox"/> ESTABLISHED	48. TYPE (Check)	<input type="checkbox"/> PROPRIETARY <input type="checkbox"/> CULTURAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> TOURIST <input type="checkbox"/> SUBSIDIZED <input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> MILITARY <input type="checkbox"/> OTHER
49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL			
SECTION X OFFSET OF INCOME			
50. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.) <input checked="" type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input type="checkbox"/> NONE			
SECTION XI TERM			
51. DURATION	52. EFFECTIVE DATE	53. RENEWABLE	
DAYS MONTHS <b>2</b> YEARS	<b>Upon departure</b>	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
54. TERMINATION NOTICE (Number of days)		55. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SECTION XII FUNCTION			
56. PRIMARY FUNCTION (PI, PP, other) <b>PP</b>			
SECTION XIII DUTIES			
57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED <b>Ostensible Assistant to the Director of a Lebanese radio and television center, perform liaison functions between the Chief of Station, Beirut, and the Center; provide thematic guidance to the Center in its output in accordance with Agency needs in support of HERMANTLED projects.</b>			
SECTION XIV QUALIFICATIONS			
58. EXPERIENCE <b>PP operations officer in the development, management and supervision of radio broadcasting facilities; professional experience in several media, particularly newspapers and radio.</b>			
59. EDUCATION (Check Highest Level Attained)	GRADE SCHOOL	HIGH SCHOOL GRADUATE	TRADE SCHOOL GRADUATE
	BUSINESS SCHOOL GRADUATE	COLLEGE DEGREE	POST GRADUATE
	<input checked="" type="checkbox"/> COLLEGE (No degree)		
60. LANGUAGE COMPETENCY (Check Appropriate Degree Competency)	LANGUAGE	SPEAK	WRITE
		FLUENT AVERAGE POOR	FLUENT AVERAGE POOR
	Spanish	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	French	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
	German	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>
			61. INDIVIDUAL'S COUNTRY OF ORIGIN <b>U.S.A.</b>
62. AREA KNOWLEDGE <b>Central and South America; North Africa; Italy</b>			
SECTION XV PRIOR EMPLOYMENT			
63. JOB AND SALARY PRIOR TO SERVICE FOR CIA <b>Editor and publisher, lecturer, actor and free-lance writer.</b>			
SECTION XVI ADDITIONAL INFORMATION			
64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary) <b>Assignment to Project PECTATE should be effective 30 April 1957</b>			
<input type="checkbox"/> OVER			
APPROVAL			
DATE	TYPED NAME & SIGNATURE OF DIVISION OFFICER	DATE	TYPED NAME & SIGNATURE OF SENIOR STAFF OFFICER
<b>10 May 57</b>	<i>[Signature]</i>		



TR

CONFIDENTIAL  
(When Filled In)

1. NAME (Last) <i>Phillips</i>		(First) <i>David</i>		(Middle) <i>A</i>		2 THIS DATE <i>9 Dec 55</i>
3. THE FOLLOWING AGENCY SPONSORED INSURANCE PROGRAMS HAVE BEEN EXPLAINED TO ME						
<input type="checkbox"/> WAR SERVICES EMPLOYEES PROTECTIVE ASSOCIATION (WSEPA)		<input type="checkbox"/> GROUP DISEASES *				
<input checked="" type="checkbox"/> GROUP HOSPITALIZATION INCORPORATED (GHI)		<input checked="" type="checkbox"/> INCOME REPLACEMENT *				
<input checked="" type="checkbox"/> MUTUAL BENEFIT OF OHIO - HOSPITALIZATION		* CASH PAYMENT OF PREMIUMS AT THE TIME EMPLOYEE APPLIES FOR INSURANCE MUST COVER THE PERIOD OF TIME HE WILL BE AWAY FROM HEADQUARTERS.				
<input checked="" type="checkbox"/> UNITED LIFE INSURANCE (ULIC)						
<input checked="" type="checkbox"/> AIR TRIP INSURANCE						
4. ITINERARY (To be completed only for individuals making application for Air Trip Insurance)						
5. I AM NOW PARTICIPATING, OR WOULD LIKE TO PARTICIPATE IN THE INSURANCE PROGRAMS LISTED BELOW.				SIGNATURE OF EMPLOYEE <i>David A. Phillips</i>		
TYPE OF POLICY	DESIRED	NOT HAVE	POLICY NUMBER	DEDUCTIONS AUTHORIZED EACH PAY PERIOD	CASH PAID	
<i>Life Empire Life</i>		<input checked="" type="checkbox"/>				
<i>Mutual of Omaha Health</i>		<input checked="" type="checkbox"/>	<i>PC 100000000</i>	<i>\$5.00</i>		
6. I DO NOT ELECT TO PARTICIPATE IN ANY OF THE STATED INSURANCE PROGRAMS				SIGNATURE OF EMPLOYEE		
7. EMPLOYEE INTERVIEWED BY	CPB (Signature) <i>C-T Chisman</i>			ICD (Signature)		
8. REMARKS						
When completed, the original of this form should be forwarded to TRB for incorporation in the employee's official personnel folder. The copy should be forwarded to CPB for retention in CPB files.						
INSURANCE QUESTIONNAIRE						

TR

CONFIDENTIAL  
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT			
<p><i>INSTRUCTIONS: Submit in duplicate when ordered overseas or whenever designated place of residence, marital or dependency status changes. This information is important in determining travel expenses allowable in connection with leave or Government expense, overseas duty, return to residence upon separation, and in determining transportation expenses allowable in connection with shipment of remains of employee or member of family.</i></p>			
1. NAME OF EMPLOYEE (Last)		(First) (Middle)	
Phillips		David Atlee	
2. RESIDENCE DATA			
PLACE OF RESIDENCE WHEN APPOINTED		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (if appointed abroad)	
919 Rose Lane, Falls Church, Va.			
PLACE IN CONTINENTAL U.S. DESIGNATED PERMANENT OR LEGAL RESIDENCE			
1804 Washburn, Fort Worth, Texas.			
3. MARITAL STATUS			
<input type="checkbox"/> SINGLE	PLACE OF MARRIAGE	DATE OF MARRIAGE	
<input checked="" type="checkbox"/> MARRIED	Fort Worth, Texas	5 June 1948	
<input type="checkbox"/> DIVORCED	PLACE OF DIVORCE DECREE	DATE OF DIVORCE DECREE	
<input type="checkbox"/> WIDOWED	PLACE SPOUSE DIED	DATE SPOUSE DIED	
4. MEMBERS OF FAMILY			
NAME OF SPOUSE	ADDRESS (Number) (Street) (City) (State)	TELEPHONE	
Helen Haasch Phillips	919 Rose Lane Falls Church Va.	JE-3-9579	
NAMES OF CHILDREN	ADDRESS (Number) (Street) (City) (State)	SEX	AGE
Maria Louise Phillips	" " " "	Female	6
David Atlee Phillips, Jr.	" " " "	Male	3
Atlee Young Phillips	" " " "	Female	2
NAME OF FATHER (or male guardian)	ADDRESS (Number) (Street) (City) (State)	TELEPHONE	
Deceased			
NAME OF MOTHER (or female guardian)	ADDRESS (Number) (Street) (City) (State)	TELEPHONE	
Deceased			
5. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME	RELATIONSHIP		
Edwin T. Phillips, Jr.	Brother		
ADDRESS (Number) (Street) (City) (State)	TELEPHONE		
1804 Washburn Fort Worth Texas			
THE PERSONS NAMED IN ITEM 4 ABOVE WILL ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE, DUE TO HEALTH OR OTHER PERTINENT REASONS, PLEASE SO STATE UNDER "REMARKS."			
VOLUNTARY ENTRIES			
THE FOLLOWING AGENCY ENDORSED LIFE AND HOSPITALIZATION INSURANCE POLICIES ARE IN FORCE IN MY NAME: THE "POLICY NO." SHOULD BE ENTERED IF POSSIBLE, SINCE THIS INFORMATION WILL ASSIST IN EXPEDITING ACTION BY THE INSURANCE COMPANY SHOULD A CLAIM BECOME PAYABLE.			
6. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.	
U.S. Government Employee Mutual of Omaha Hospitalization	Washington, D.C. Omaha, Neb.	GWF 1514	
7. I HAVE COMPLETED THE FOLLOWING: WILL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO POWER OF ATTORNEY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
8. REMARKS:			
Power of Attorney to:			
Edwin T. Phillips, Jr 1804 Washburn, Fort Worth, Texas.			
Edmond K. Fannon Casilla 1250, Santiago, Chile			
SIGNED AT	DATE	SIGNATURE	
Washington, D.C.	27 December 1955	David C. Phillips	

CERTIFICATE OF ATTENDANCE

I certify that on MAY 12 1955 I have attended  
(DATE)  
the Induction Course specified by Regulation 25-110.

*Note:*  
Displayed unusual  
alertness at the  
Introduction Program  
on May 12

DAVID A. PHILLIPS  
(NAME) - Please print  
 CLERICAL     STENOGRAPHIC     OTHER  
OFFICE 2210 / PP / 130  
GS- 14 (Grade)

FORM NO. 484 REPLACES FORM SI-121  
1-54-55 WHICH MAY BE USED.

### APPOINTMENT AFFIDAVITS

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

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

(Bureau or division)

WASHINGTON, D. C.

(Place of employment)

I, DAVID A. PHILLIPS, do solemnly swear (or affirm) that—

#### A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, **SO HELP ME GOD.**

#### B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

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

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

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

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

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

#### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

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

1 April 1955

(Date of entrance on duty)

*David A. Phillips*

(Signature of appointee)

Subscribed and sworn before me this 23 day of April, A. D. 1955,

at Washington

(City)

D. C.

(State)

[SEAL]

*William C. Sandquist*

(Signature of officer)

SEC 18 & 16a

(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. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State)  
 4001 JACKSON FORT WORTH TEXAS

2. (A) DATE OF BIRTH: OCTOBER 21 1922 (B) PLACE OF BIRTH (city or town and State or country): FORT WORTH TEXAS

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY: NELOO SEVEN PHOENIX (B) RELATIONSHIP: WIFE (C) STREET AND NUMBER, CITY AND STATE: 4001 JACKSON FORT WORTH TEXAS (D) TELEPHONE NO.: JF 1-9077

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (LITNER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 12 MONTHS? YES NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE
		1. _____			
		2. _____			
		3. _____			
		1. _____			
		2. _____			
		3. _____			
		1. _____			
		2. _____			
		3. _____			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS	
			ITEM NO.	WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X			
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in Item 10.</i>		X		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.</i>		X		
8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN DISCHARGED OR FORNED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in Item 10 the name and address of employer, date and reason in each case.</i>		X		
9. HAVE YOU BEEN ARRESTED (NOT INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED 25 OR LESS OR FORFEITED COLLATERAL OF 15 OR LESS) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT? <i>If your answer is "Yes", list all such cases under Item 10. Give in each case, (1) The date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.</i>		X		

### INSTRUCTIONS TO APPOINTING OFFICER

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

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

(1) **Identity of appointee**—It is the duty of the appointing officer to guard against impersonation and to determine beyond reasonable doubt that the appointee is the same person whose appointment was authorized. The appointee's signature and handwriting are to be compared with the application and other government papers. If the appointee qualified in a written examination, the signature on this form should be compared with the signature on the declaration sheet, which was signed in the examination room. His physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

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

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

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

SECRET  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST <b>29 Jan 75</b>										
2. NAME (Last, First, Middle) <b>Phillips, David A.</b>		3. POSITION TITLE <b>C/LAD</b>	4. GRADE <b>GS-18</b>									
5. OFFICE, DIVISION BRANCH <b>DDO/LA</b>		6. EMPLOYEE'S EXT. <b>5103</b>										
7. PURPOSE OF EVALUATION												
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input checked="" type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1"> <tr><td>ETO</td></tr> <tr><td>STATION</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS  <table border="1"> <tr><td>ETA</td></tr> <tr><td>STATION</td></tr> <tr><td>NO. OF DEP.'S</td></tr> </table>		ETO	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	ETA	STATION	NO. OF DEP.'S
ETO												
STATION												
TDY OR PCS												
TYPE OF COVER												
NO. OF DEPENDENTS TO ACCOMPANY												
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED												
ETA												
STATION												
NO. OF DEP.'S												
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER										
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <i>Kathy Hill</i> <b>Kathy Hill, LA/Trng</b>										
		ROOM NO. & BUILDING <b>3D5317 Hqs</b>	EXT <b>7431</b>									
10. COMMENTS  <b>Subject has completed his Executive Annual.</b>												
11. REPORT OF EVALUATION  <b>Qualified for IYBXXIYXX TDY Standby until 1 October 1975.</b>												
DATE <b>4 February 1975</b>		SIGNATURE OF CHIEF OF MEDICAL STAFF <b>William T. Golder, OMS/Registrar</b>										

SECRET

(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST 10 May 1972													
2. NAME (Last, First, Middle) Phillips, David A. (Dependents Of)		3. POSITION TITLE COS	4. GRADE GS-17												
5. OFFICE DIVISION BRANCH Brasilia, Brazil		6. EMPLOYEE'S EXT. 7431													
7. PURPOSE OF EVALUATION															
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT													
<p>10 July 0900 12 July 1300 13 July 0800 27 Jul 0900 28 Jul 1300 20 Jul 1300</p>		<table border="1"> <tr><td>ETO</td></tr> <tr><td>August 1972</td></tr> <tr><td>STATION</td></tr> <tr><td>Caracas, Venezuela</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td><del>Five</del> five</td></tr> <tr><td>NO OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr> </table>		ETO	August 1972	STATION	Caracas, Venezuela	TDY OR PCS	PCS	TYPE OF COVER	NO OF DEPENDENTS TO ACCOMPANY	<del>Five</del> five	NO OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED		
ETO															
August 1972															
STATION															
Caracas, Venezuela															
TDY OR PCS															
PCS															
TYPE OF COVER															
NO OF DEPENDENTS TO ACCOMPANY															
<del>Five</del> five															
NO OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED															
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER													
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <b>DEPENDENT</b>		SIGNATURE Joan Ferguson													
		ROOM NO. & BUILDING 3D 5309 Hqs	EXT. 7431												
10. COMMENTS Please schedule appointments for the week of 10 July.															
<table border="0"> <tr> <td>Virginia S. wife</td> <td>26 Feb 43</td> <td>Wynne Aughterton</td> <td>12 Sep 64</td> </tr> <tr> <td>Deborah Anne <del>Mau</del> <sup>Mau</sup></td> <td>25 Dec 59</td> <td>Todd <sup>son</sup></td> <td>3 Aug 70</td> </tr> <tr> <td>Bryan Moss <del>son</del> <sup>son</sup></td> <td>31 Dec 60</td> <td><del>Clayton</del> <sup>Clayton</sup></td> <td>28 Dec 56</td> </tr> </table>				Virginia S. wife	26 Feb 43	Wynne Aughterton	12 Sep 64	Deborah Anne <del>Mau</del> <sup>Mau</sup>	25 Dec 59	Todd <sup>son</sup>	3 Aug 70	Bryan Moss <del>son</del> <sup>son</sup>	31 Dec 60	<del>Clayton</del> <sup>Clayton</sup>	28 Dec 56
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11. REPORT OF EVALUATION QUALIFIED FOR US PCS															
DATE SPERRY PRESTON		SIGNATURE FOR CHIEF OF MEDICAL STAFF Earl <sup>Earl</sup> 67 31 72 Tom 52													

FORM 259 USE PREVIOUS EDITIONS

SECRET

15 MAY 1972

15 MAY 1972

SECRET  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		DATE OF REQUEST <b>17 October 1969</b>
---------------------------------------	--	---

2. NAME (Last, First, Middle) <b>Phillips, David A. (dependents)</b>	5. POSITION TITLE <b>Branch Chief</b>	4. GRADE <b>GS-16</b>
3. OFFICE, DIVISION, BRANCH <b>DLP/III/COG</b>		6. EMPLOYEE'S PAY <b>7451</b>

7. PURPOSE OF EVALUATION																			
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HQS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1"> <tr><td>RTD</td><td><b>o/a 28 December 1969</b></td></tr> <tr><td>STATION</td><td><b>Rio de Janeiro</b></td></tr> <tr><td>TDY OR PCS</td><td><b>PCS</b></td></tr> <tr><td>TYPE OF COVER</td><td></td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td><td><b>7</b></td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SR 89) ATTACHED</td><td><b>To be forwarded</b></td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS  <table border="1"> <tr><td>FTA</td><td></td></tr> <tr><td>STATION</td><td></td></tr> <tr><td>NO. OF DEP.'S</td><td></td></tr> </table>	RTD	<b>o/a 28 December 1969</b>	STATION	<b>Rio de Janeiro</b>	TDY OR PCS	<b>PCS</b>	TYPE OF COVER		NO. OF DEPENDENTS TO ACCOMPANY	<b>7</b>	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SR 89) ATTACHED	<b>To be forwarded</b>	FTA		STATION		NO. OF DEP.'S	
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FTA																			
STATION																			
NO. OF DEP.'S																			

8. OVERSEAS PLANNING EVALUATION (One block must be checked)	9. REQUESTING OFFICER	
<input checked="" type="checkbox"/> YES  <input type="checkbox"/> NO	SIGNATURE <i>Ruth A. Sanford</i> <b>Ruth A. Sanford</b> III Personnel	ROOM NO. & BUILDING <b>3D6309 1k</b>
		EXT. <b>6815</b>

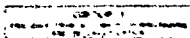
10. COMMENTS <b>Virginia S. - wife - [redacted]</b> <del>Christopher Clark - son - [redacted]</del> <b>112 31 69</b> <b>Christopher Clark - son - [redacted]</b> <b>Bryan Moss - son - [redacted]</b> <b>DeSPERTY PASTY - [redacted]</b> <b>Lynn Auyherton - son [redacted]</b>	
11. REPORT OF EVALUATION <b>QUALIFIED OS PCS</b> <b>112 31 69</b>	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF

ALBURY AREA



SECRET

1. NAME (Last, First, Middle) <b>Phillips, David A.</b>		2. DATE OF BIRTH <b>10/31/22</b>		3. GRADE <b>GS-16</b>	
4. OFFICE, DIVISION, BRANCH (of overseas station and existing cover if lateral assignment) <b>DDP/VH/COO</b>		5. PRESENT POSITION <b>Branch Chief</b>		6. EMPLOYEE EXTENSION <b>7451</b>	
7. PROPOSED STATION <b>Rio de Janeiro</b>		8. PROPOSED POSITION (Title, Number, Grade) <b>COS, # 0106, GS-00</b>			
9. TYPE OF COVER AT NEW STATION <b>State</b>		10. ESTIMATED DATE OF DEPARTURE <b>c/a 28 Dec. '69</b>		11. NO. OF DEPENDENTS TO ACCOMPANY <b>7</b>	
12. COMMENTS <b>Vice Robert D. Gahagen</b> <b>Form DS-1688 to be forwarded</b>					
13. DATE OF REQUEST		14. SIGNATURE OF REQUESTING OFFICIAL <b>Ruth A. Sanford</b>		15. ROOM NUMBER AND BUILDING <b>3D 3309</b>	
				16. EXTENSION <b>6815</b>	
17. OFFICE OF MEDICAL SERVICES DISPOSITION  <b>MEDICALLY QUALIFIED FOR PROPOSED OS PCS.</b>  <b>DONALD FARLEY</b>					
18. OFFICE OF SECURITY DISPOSITION <b>12 24 69</b>					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION					
<b>REQUEST FOR PCS OVERSEAS EVALUATION</b>					



SECRET  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST													
2. NAME (Last, First, Middle) <b>PHILLIPS, David A.</b>		3. POSITION TITLE <b>Ops Officer</b>	4. GRADE <b>GS-15</b>												
5. OFFICE, DIVISION, BRANCH <b>DDP/H/COG</b>		6. EMPLOYEE'S EXT.													
7. PURPOSE OF EVALUATION															
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT													
		<table border="1"> <tr><td>ETO</td></tr> <tr><td><b>22 May - 5 June 1968</b></td></tr> <tr><td>STATION</td></tr> <tr><td><b>Mexico City</b></td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td><b>TDY</b></td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td><b>Tourist</b></td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td> </td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (IF 2ND ATTACHED)</td></tr> <tr><td> </td></tr> </table>		ETO	<b>22 May - 5 June 1968</b>	STATION	<b>Mexico City</b>	TDY OR PCS	<b>TDY</b>	TYPE OF COVER	<b>Tourist</b>	NO. OF DEPENDENTS TO ACCOMPANY		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (IF 2ND ATTACHED)	
ETO															
<b>22 May - 5 June 1968</b>															
STATION															
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		<input type="checkbox"/> RETURN FROM OVERSEAS													
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ETA															
STATION															
NO. OF DEP.'S															
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER													
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <i>Mary C. Wernig</i> <b>Mary C. Wernig</b>													
		ROOM NO. & BUILDING <b>3DE 309</b>	EXT. <b>1516</b>												
10. COMMENTS															
QUALIFIED FOR PRODUCTION															
11. REPORT OF EVALUATION <b>TDY</b>															
<b>REX HART</b>															
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF													

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST						
2. NAME (Last, First, Middle) <b>Phillips, David</b>		4. GRADE <b>GS-15</b>						
3. POSITION TITLE		6. EMPLOYEE'S EXT.						
5. OFFICE, DIVISION, BRANCH <b>WH</b>								
7. PURPOSE OF EVALUATION								
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HDQS/TDY	<table border="1"><tr><td>ETD</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCS</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 49) ATTACHED</td></tr></table>	ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 49) ATTACHED
ETD								
STATION								
TDY OR PCS								
TYPE OF COVER								
NO. OF DEPENDENTS TO ACCOMPANY								
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 49) ATTACHED								
<input type="checkbox"/> ENTRANCE ON DUTY	<input type="checkbox"/> OVERSEAS ASSIGNMENT							
<input type="checkbox"/> TDY STANDBY								
<input type="checkbox"/> SPECIAL TRAINING								
<input checked="" type="checkbox"/> ANNUAL - Executive								
<input type="checkbox"/> RETURN TO DUTY	<input type="checkbox"/> RETURN FROM OVERSEAS							
<input type="checkbox"/> FITNESS FOR DUTY	<table border="1"><tr><td>ETA</td></tr><tr><td>STATION</td></tr><tr><td>NO. OF DEP.'S</td></tr></table>	ETA	STATION	NO. OF DEP.'S				
ETA								
STATION								
NO. OF DEP.'S								
<input type="checkbox"/> MEDICAL RETIREMENT								
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER						
<input type="checkbox"/> YES	SIGNATURE							
<input type="checkbox"/> NO	ROOM NO. & BUILDING							
		EXT.						
10. COMMENTS								
11. REPORT OF EVALUATION								
DATE								
SIGNATURE FOR CHIEF OF MEDICAL STAFF								

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION

1. NAME (Last, First, Middle) **PHILLIPS, David A.** (Dep's of )

2. POSITION TITLE **Ops Off**

3. DATE OF REQUEST

4. GRADE **GS-15**

5. OFFICE, DIVISION, BRANCH **DDP/WH/3**

6. EMPLOYEE'S EXT. **5909**

7. PURPOSE OF EVALUATION

PRE-EMPLOYMENT

ENTRANCE ON DUTY

TDY STANDBY

SPECIAL TRAINING

ANNUAL

RETURN TO DUTY

FITNESS FOR DUTY

MEDICAL RETIREMENT

HDQ/ TDY

OVERSEAS ASSIGNMENT

RETURN FROM OVERSEAS

ETA

STATION

TDY OR PCS

TYPE OF COVER

NO. OF DEPENDENTS TO ACCOMPANY

NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SR 49) ATTACHED

ETA

STATION

NO. OF DEP.'S

**Sancti Domingo**

**Five**

MEDICAL Y QUALIFIED  
RETURNED

BACK HAD

8. OVERSEAS PLANNING EVALUATION (One block must be checked)

YES

NO

9. REQUESTING OFFICER

SIGNATURE

ROOM NO. & BUILDING

EXT.

10. COMMENTS

Wife: Helen F.

Dau: Maria L. DOB [redacted]

Son: David A DOB [redacted]

Son: Atlee I DOB [redacted]

~~Son: Christopher DOB [redacted]~~

11. REPORT OF EVALUATION

DATE

SIGNATURE FOR CHIEF OF MEDICAL STAFF

**SECRET**  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST <b>31 October 1966</b>	
2. NAME (Last, First, Middle) <b>Phillips, David A.</b>		3. POSITION TITLE	4. GRADE <b>GS-</b>
5. OFFICE, DIVISION, BRANCH <b>COB (WH)</b>		6. EMPLOYEE'S EXT. <b>5903</b>	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input checked="" type="checkbox"/> ANNUAL - Executive  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT  <div style="border: 1px solid black; padding: 2px;">         RTM          STATION          TDY OR PCS          TYPE OF COVER          NO. OF DEPENDENTS TO ACCOMPANY          NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED       </div> <input type="checkbox"/> RETURN FROM OVERSEAS  <div style="border: 1px solid black; padding: 2px;">         ETA          STATION          NO. OF DEP.'S       </div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE	
		ROOM NO. & BUILDING	EXT.
10. COMMENTS			
<b>QUALIFIED FOR CURRENT DUTIES</b>			
11. REPORT OF EVALUATION			
<b>REX HART</b>			
DATE <b>12 1 66</b>		SIGNATURE FOR CHIEF OF MEDICAL STAFF	

SECRET  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST <b>2 June 64</b>																			
2. NAME (Last, First, Middle) <b>PHILLIPS, David A.</b>		3. POSITION TITLE <b>Ops Ofcr</b>	4. GRADE <b>15</b>																		
5. OFFICE, DIVISION, BRANCH <b>DDP/WH/3</b>		6. EMPLOYEE'S EXT. <b>x5909</b>																			
7. PURPOSE OF EVALUATION																					
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input checked="" type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1"> <tr><td>ETO</td></tr> <tr><td><b>3 July 64</b></td></tr> <tr><td>STATION</td></tr> <tr><td><b>Return to Mexico City</b></td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td><b>PCS</b></td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td> </td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td><b>5</b></td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 69) ATTACHED</td></tr> <tr><td><b>-0</b></td></tr> </table> <input checked="" type="checkbox"/> RETURN FROM OVERSEAS  <table border="1"> <tr><td>ETA</td></tr> <tr><td><b>30 June 64</b></td></tr> <tr><td>STATION</td></tr> <tr><td><b>Mexico City, Mexico</b></td></tr> <tr><td>NO. OF DEP.'S</td></tr> <tr><td><b>5</b></td></tr> </table>		ETO	<b>3 July 64</b>	STATION	<b>Return to Mexico City</b>	TDY OR PCS	<b>PCS</b>	TYPE OF COVER		NO. OF DEPENDENTS TO ACCOMPANY	<b>5</b>	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 69) ATTACHED	<b>-0</b>	ETA	<b>30 June 64</b>	STATION	<b>Mexico City, Mexico</b>	NO. OF DEP.'S	<b>5</b>
ETO																					
<b>3 July 64</b>																					
STATION																					
<b>Return to Mexico City</b>																					
TDY OR PCS																					
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TYPE OF COVER																					
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NO. OF DEP.'S																					
<b>5</b>																					
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER																			
<input checked="" type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <i>Murray Benthall</i> <b>Murray Benthall WH/Pers Ofcr</b> ROOM NO. & BUILDING <b>GH 4407 Hqs</b>																			
		EXT. <b>x5909</b>																			
10. COMMENTS  <p>Will be in Hqs beginning 30 June until 3 July for TDY.</p> <p style="text-align: right;"><i>17-2 July</i></p> <p style="text-align: center;"><b>QUALIFIED FOR PROPOSED O'S</b></p>																					
11. REPORT OF EVALUATION  <p style="text-align: center;"><b>PCS</b></p> <p style="text-align: center;"><b>JOE W. CLINE</b></p>																					
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF																			
		<i>[Signature]</i>																			

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST																			
2. NAME (Last, First, Middle) <b>PHILLIPS, DAVID A.</b>		3. POSITION TITLE <b>COS</b>																			
4. GRADE <b>15</b>		5. OFFICE, DIVISION, BRANCH <b>DDP/WH/BRANCH 2</b>																			
6. EMPLOYEE'S EXT. <b>6576</b>		7. PURPOSE OF EVALUATION																			
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1"><tr><td>ETO</td></tr><tr><td><b>LATERAL TRANSFER</b></td></tr><tr><td>STATION</td></tr><tr><td><b>SANTO DOMINGO, D.R.</b></td></tr><tr><td>TDY OR PCS</td></tr><tr><td><b>PCS</b></td></tr><tr><td>TYPE OF COVER</td></tr><tr><td></td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td><b>5</b></td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr><tr><td><b>0</b></td></tr></table> <input type="checkbox"/> RETURN FROM OVERSEAS  <table border="1"><tr><td>ETA</td></tr><tr><td><b>LATERAL TRANSFER</b></td></tr><tr><td>STATION</td></tr><tr><td><b>MEXICO CITY, MEXICO</b></td></tr><tr><td>NO. OF DEP.'S</td></tr><tr><td><b>5</b></td></tr></table>		ETO	<b>LATERAL TRANSFER</b>	STATION	<b>SANTO DOMINGO, D.R.</b>	TDY OR PCS	<b>PCS</b>	TYPE OF COVER		NO. OF DEPENDENTS TO ACCOMPANY	<b>5</b>	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	<b>0</b>	ETA	<b>LATERAL TRANSFER</b>	STATION	<b>MEXICO CITY, MEXICO</b>	NO. OF DEP.'S	<b>5</b>
ETO																					
<b>LATERAL TRANSFER</b>																					
STATION																					
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NO. OF DEP.'S																					
<b>5</b>																					
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER																			
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <b>FRANK LANE</b> <b>WH/PERSONNEL</b> ROOM NO. & BUILDING <b>CR 56</b>																			
		EXT. <b>6576</b>																			
10. COMMENTS  <b>MR. PHILLIPS IS A DIRECT TRANSFER.</b>  <b>QUALIFIED FOR PROPOSED PCS</b>																					
11. REPORT OF EVALUATION  <b>JOE V. CLINE</b>																					
DATE <b>17 30 65</b>		SIGNATURE FOR CHIEF OF MEDICAL STAFF																			

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST													
2. NAME (Last, First, Middle) <b>PHILLIPS, David A.</b>		3. POSITION TITLE <b>Ops Officer</b>	4. GRADE <b>GS-14</b>												
5. OFFICE, DIVISION, BRANCH <b>DDP/AFD</b>		6. EMPLOYEE'S EXT. <b>8212</b>													
7. PURPOSE OF EVALUATION															
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input checked="" type="checkbox"/> OVERSEAS RETURN  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> ACS/ICV <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1"><tr><td>ETD</td><td><b>16 August 1961</b></td></tr><tr><td>STATION</td><td><b>Mexico City</b></td></tr><tr><td>TDY OR PCS</td><td><b>PCS</b></td></tr><tr><td>TY</td><td></td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td><td><b>five</b></td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td><td></td></tr></table> <input type="checkbox"/> RETURN FROM OVERSEAS  ECA STATION NO. OF DEPS  Subject's last physical exam was more than a year ago.		ETD	<b>16 August 1961</b>	STATION	<b>Mexico City</b>	TDY OR PCS	<b>PCS</b>	TY		NO. OF DEPENDENTS TO ACCOMPANY	<b>five</b>	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	
ETD	<b>16 August 1961</b>														
STATION	<b>Mexico City</b>														
TDY OR PCS	<b>PCS</b>														
TY															
NO. OF DEPENDENTS TO ACCOMPANY	<b>five</b>														
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED															
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER													
<input checked="" type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <i>Henry Costhock, Jr.</i> <b>Henry Costhock, Jr.</b>													
		ROOM NO. & BUILDING <b>1104 Barton Hall</b>	EXT. <b>8212</b>												

10. REPORT OF EVALUATION COMMENTS	
11. REPORT OF EVALUATION	
DATE <b>10 AUG 1961</b>	SIGNATURE FOR CHIEF OF MEDICAL STAFF



SECRET

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST <b>12 April 1960</b>													
2. NAME (Last, First, Middle) <b>PHILLIPS, David Atlee</b>		3. POSITION TITLE	4. GRADE <b>GS-14</b>												
5. OFFICE, DIVISION, BRANCH <b>Washington, D. C.</b>		6. EMPLOYEE'S EXT. <b>2560</b>													
7. PURPOSE OF EVALUATION															
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> OVERSEAS RETURN  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1" style="width: 100%;"> <tr><td>ETD</td></tr> <tr><td><b>15 April 1960</b></td></tr> <tr><td>STATION</td></tr> <tr><td><b>WH Area</b></td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td><b>TDY</b></td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td> </td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td><b>None</b></td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 82) ATTACHED</td></tr> <tr><td> </td></tr> </table>		ETD	<b>15 April 1960</b>	STATION	<b>WH Area</b>	TDY OR PCS	<b>TDY</b>	TYPE OF COVER		NO. OF DEPENDENTS TO ACCOMPANY	<b>None</b>	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 82) ATTACHED	
ETD															
<b>15 April 1960</b>															
STATION															
<b>WH Area</b>															
TDY OR PCS															
<b>TDY</b>															
TYPE OF COVER															
NO. OF DEPENDENTS TO ACCOMPANY															
<b>None</b>															
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 82) ATTACHED															
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER													
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <i>[Signature]</i> <b>S. J. CHELLINO</b>													
		ROOM NO. & BUILDING <b>1014 Burton</b>	EXT. <b>8717</b>												
10. REPORT OF EVALUATION															
(REMOVED FOR INFORMATION) (PHEN) AND THE ...															
DATE <b>21 APR 1960</b>		SIGNATURE FOR CHIEF OF MEDICAL STAFF <i>[Signature]</i>													

SECRET  
(When Filled In)

CS/

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST							
2. NAME (Last, First, Middle) MILLER, DAVID A.		3. POSITION TITLE OPS O-10	4. GRADE O-10						
5. OFFICE, DIVISION, BRANCH INSP/TR CS/CS Develop ment. Cos 1ment		6. EMPLOYEE'S EXT.							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT <input checked="" type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> OVERSEAS RETURN <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1"> <tr><td>ETD</td></tr> <tr><td>STATION</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr> </table>		ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED
ETD									
STATION									
TDY OR PCS									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED									
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER							
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE <i>David A. Miller</i> ROOM NO. & BUILDING 101 Curia EXT. 437							

*my comm. from ...  
...  
...  
...*

10. REPORT OF EVALUATION	
REASON FOR THE <i>Qualified comm from S. TPSE</i>	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF <i>[Signature]</i>

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST							
2. NAME (Last, First, Middle) <b>PHILLIPS, DAVID A.</b>		3. POSITION TITLE <b>OPS O. PL. M.</b>	4. GRADE <b>11</b>						
5. OFFICE, DIVISION, BRANCH <b>DEP/HR CE/C Development Component</b>		6. EMPLOYEE'S EXT.							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> OVERSEAS ASSIGNMENT							
<input checked="" type="checkbox"/> ENTRANCE ON DUTY		<table border="1"><tr><td>ETO</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCS</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr></table>		ETO	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED
ETO									
STATION									
TDY OR PCS									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED									
<input type="checkbox"/> OVERSEAS RETURN									
<input type="checkbox"/> TDY STANDBY									
<input type="checkbox"/> SPECIAL TRAINING									
<input type="checkbox"/> ANNUAL									
<input type="checkbox"/> RETURN TO DUTY									
<input type="checkbox"/> FITNESS FOR DUTY									
<input type="checkbox"/> MEDICAL RETIREMENT									
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER							
<input type="checkbox"/> YES		SIGNATURE							
<input type="checkbox"/> NO		ROOM NO. & BUILDING							
		EXT.							
10. REPORT OF EVALUATION									
PLEASE PRINT <b>DEPARTMENTAL DUTIES</b> <i>See attached Commission from SA to SE</i>									
DATE <b>24 MAR 1960</b>		SIGNATURE FOR CHIEF OF MEDICAL STAFFS <i>[Signature]</i>							

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST							
2. NAME (Last, First, Middle) <b>PHILLIPS, DAVID A.</b>		3. POSITION TITLE <b>OPS OFFICER</b>	4. GRADE <b>GS-11</b>						
5. OFFICE, DIVISION, BRANCH <b>NSA/PR CS/CS Development Complement</b>		6. EMPLOYEE'S EXT.							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> OVERSEAS ASSIGNMENT							
<input checked="" type="checkbox"/> ENTRANCE ON DUTY		<table border="1"><tr><td>ETD</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCS</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 59) ATTACHED</td></tr></table>		ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 59) ATTACHED
ETD									
STATION									
TDY OR PCS									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 59) ATTACHED									
<input type="checkbox"/> OVERSEAS RETURN									
<input type="checkbox"/> TDY STANDBY									
<input type="checkbox"/> SPECIAL TRAINING									
<input type="checkbox"/> ANNUAL									
<input type="checkbox"/> RETURN TO DUTY									
<input type="checkbox"/> FITNESS FOR DUTY									
<input type="checkbox"/> MEDICAL RETIREMENT									
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER							
<input type="checkbox"/> YES		SIGNATURE							
<input type="checkbox"/> NO		<b>POD H. CARLITTI</b>							
		ROOM NO. & BUILDING <b>1501 C-10</b>	EXT. <b>8372</b>						
10. REPORT OF EVALUATION									
<b>PLEASE EXPEDITE</b>									
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF							

SECRET  
(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST							
2. NAME (Last, First, Middle) <b>PHILLIPS, LARRY A. (DEPENDENTS)</b>		3. POSITION TITLE <b>O S OFFICER</b>	4. GRADE <b>14</b>						
5. OFFICE, DIVISION, BRANCH <b>IDP/WH CS/IS Development Complement</b>		6. EMPLOYEE'S EXT.							
7. PURPOSE OF EVALUATION									
<input type="checkbox"/> PRE-EMPLOYMENT  <input type="checkbox"/> ENTRANCE ON DUTY  <input type="checkbox"/> OVERSEAS RETURN  <input type="checkbox"/> TDY STANDBY  <input type="checkbox"/> SPECIAL TRAINING  <input type="checkbox"/> ANNUAL  <input type="checkbox"/> RETURN TO DUTY  <input type="checkbox"/> FITNESS FOR DUTY  <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> OVERSEAS ASSIGNMENT  <table border="1" style="width: 100%;"> <tr><td>ETO</td></tr> <tr><td>STATION</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr> </table>		ETO	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED
ETO									
STATION									
TDY OR PCS									
TYPE OF COVER									
NO. OF DEPENDENTS TO ACCOMPANY									
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED									
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER							
<input type="checkbox"/> YES  <input type="checkbox"/> NO		SIGNATURE <b>POD H. Capriotti</b>							
		ROOM NO. & BUILDING <b>1504 Curie</b>	EXT. <b>8371</b>						
10. REPORT OF EVALUATION									
<b>PLEASE EXPEDITE (DEPENDENTS)</b>									
DATE		SIGNATURE FOR CHIEF OF MEDICAL STAFF							

SECRET  
(When Filled In)

MEDICAL ACTION REQUEST AND REPORT		
I REQUEST FOR PHYSICAL EXAMINATION BY <i>Ralph S. Pollock, C/CPD</i>		
1. NAME (Last) <b>PHILLIPS, DAVID A.</b>	(First) (Middle)	2. DATE <b>20 Jan 56</b>
3. TO POSITION <b>Operations Officer (PP)</b>	4. OFFICE, DIVISION, BRANCH <b>DDP/411</b>	5. GRADE <b>GS-14</b>
6. TYPE OF POSITION <input type="checkbox"/> Departmental <input type="checkbox"/> U.S. Field <input checked="" type="checkbox"/> Overseas	7. EVALUATE FOR <input type="checkbox"/> EOD <input checked="" type="checkbox"/> Overseas <input type="checkbox"/> Returnee <input type="checkbox"/> Pre-Employment <input type="checkbox"/> Annual <input type="checkbox"/> Special (Specify) <b>Please notify Ken Vambold only, 2508 Currie Hall, x3585</b>	
II REPORT OF MEDICAL EVALUATION		
<input type="checkbox"/> Qualified for Full Duty (General) <input type="checkbox"/> Qualified for Full Duty (Special)		
<input type="checkbox"/> Qualified for Departmental Duty Only <input type="checkbox"/> Disqualified		
Remarks: <b>Subject is qualified for proposed PCS O/S assignment. (1-16-56)</b>		
<b>SECRET</b> <i>C. O. [Signature]</i> MEDICAL OFFICE		

SECRET  
(When Filled In)

MEDICAL ACTION REQUEST AND REPORT		
I REQUEST FOR PHYSICAL EXAMINATION BY		
1. NAME (Last) <b>Phillips,</b>	(First) (Middle) <b>David A.</b>	2. DATE <b>12 Dec., 1955</b>
3. TO POSITION	4. OFFICE, DIVISION, BRANCH <b>WH</b>	5. GRADE <b>GS-12</b>
6. TYPE OF POSITION <input type="checkbox"/> Departmental <input type="checkbox"/> U.S. Field <input type="checkbox"/> Overseas	7. EVALUATE FOR <input type="checkbox"/> EOD <input type="checkbox"/> Overseas <input type="checkbox"/> Returnee <input type="checkbox"/> Pre-Employment <input type="checkbox"/> Annual <input type="checkbox"/> Special (Specify)	
II REPORT OF MEDICAL EVALUATION		
<input type="checkbox"/> Qualified for Full Duty (General) <input type="checkbox"/> Qualified for Full Duty (Special)		
<input type="checkbox"/> Qualified for Departmental Duty Only <input type="checkbox"/> Disqualified		
Remarks: <b>Subject is qualified for proposed 7 days TDY assignment. (12/12/55)</b> <b>Must have a physical examination on return from trip.</b> <b>This memo supersedes previous qualification.</b>		
<i>Cal</i> <i>C. O. [Signature]</i> MEDICAL OFFICE		

SECRET  
(When Filled In)

MEDICAL ACTION REQUEST AND REPORT			
I. REQUEST FOR PHYSICAL EXAMINATION BY			
1. NAME (Last)	PHILLIPS	2. DATE	30 Dec 1955
3. TO POSITION	ops officer	4. OFFICE, DIVISION, BRANCH	ATLEE N. H.
5. GRADE	GS-14	7. EVALUATE FOR	
6. TYPE OF POSITION <input type="checkbox"/> Departmental <input type="checkbox"/> U.S. Field <input checked="" type="checkbox"/> Overseas Cuba	ETD 17 Feb 1956 PCS	<input type="checkbox"/> EOD <input type="checkbox"/> Overseas <input type="checkbox"/> Returnee	<input type="checkbox"/> Pre-Employment <input type="checkbox"/> Annual <input type="checkbox"/> Special (Specify)
II. REPORT OF MEDICAL EVALUATION			
<input type="checkbox"/> Qualified for Full Duty (General) <input type="checkbox"/> Qualified for Departmental Duty Only		<input type="checkbox"/> Qualified for Full Duty (Special) <input type="checkbox"/> Disqualified	
Remarks: Subject is qualified for proposed PCS O/S assignment. (1/16/56)			
MEDICAL OFFICE			

SECRET

MEDICAL ACTION REQUEST AND REPORT			
I. REQUEST FOR PHYSICAL EXAMINATION BY			
1. NAME (Last)	PHILLIPS, DAVID A.	2. DATE	2 August 1954
3. TO POSITION		4. OFFICE, DIVISION, BRANCH	WH
5. GRADE		GS 12	
6. TYPE OF POSITION <input type="checkbox"/> Departmental <input type="checkbox"/> U.S. Field <input checked="" type="checkbox"/> Overseas Guantanamo		7. EVALUATE FOR <input type="checkbox"/> EOD <input checked="" type="checkbox"/> Overseas <input type="checkbox"/> Returnee	<input type="checkbox"/> Pre-Employment <input type="checkbox"/> Annual <input type="checkbox"/> Special (Specify)
II. REPORT OF MEDICAL EVALUATION			
<input checked="" type="checkbox"/> Qualified for Full Duty (General) <input type="checkbox"/> Qualified for Departmental Duty Only		<input type="checkbox"/> Qualified for Full Duty (Special) <input type="checkbox"/> Disqualified	
Remarks: WH #1		Mr. GAHAGAN x 3995	
Full duty/General (8-9-54)			
Joseph J. Maceri			







# PERSONAL HISTORY STATEMENT

## INSTRUCTIONS

- DO NOT ATTEMPT TO COMPLETE THIS FORM UNTIL YOU HAVE READ THE FOLLOWING INSTRUCTIONS -

1. Answer all questions completely or check (X) the box which applies. If the question is not applicable, write "NA". If you do not know the answer and it cannot be obtained from personal records, write "Unknown". Use the blank space on pages 15 and 16 for extra details on any question for which you do not have enough space.
2. Type or print carefully - USE BLACK TYPEWRITER RIBBON OR BLACK INK.
3. Leave blank any boxes or columns which are marked "FOR OFFICE USE ONLY".
4. Consider each of your answers carefully; accurate completion of the form will permit review of your qualifications to the best advantage. Your signature at the end of the form will certify to its correctness.
5. Page 17 entitled "Personal History Summary" must be completed. It is a brief abstract of information from other parts of the form and will help to speed the processing of your application.

### SECTION I GENERAL PERSONAL AND PHYSICAL DATA

1. Full Name (Last first middle) Abern, Virginia, Simmons		2. Age 26	3. Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		
5. Nicknames Gina		6. Other names you have used N/A			
7. Indicate circumstances (including length of time) under which you have used the names noted in item 6 above N/A					
8. If legal change of name, give particulars (Where and by what authority) N/A					
9. Height 5' 3"	10. Weight 105	11. Color of eyes green	12. Color of hair blond	13. Type of complexion fair	14. Build slight
15. Scars (Type and location) appendix, stomach			16. Other distinguishing physical features N/A		
17. Current address (No., Street, City, State & ZIP code - country if not U.S.) 9741 Corral Dr., Potomac, Maryland 20854			18. Current phone number 202-5362	19. Long distance area code 301	
20. Permanent address (No., Street, City, State & ZIP code - country if not U.S.) 9741 Corral Dr., Potomac, Maryland 20854			21. Permanent phone number 202-5362	22. Long distance area code 301	
23. Office phone number 332-2730		24. Office extension N/A		25. Legal residence (State, territory or country) Maryland	

### SECTION II POSITION DATA

1. Indicate the type of work or position for which you are applying					
2. Indicate the lowest annual entrance salary you will accept \$ _____			3. Dates available for employment Earliest _____ Latest _____		
4. Indicate your willingness to travel			5. Indicate your willingness to accept assignment in the following locations - check (X) each item applicable		
<input type="checkbox"/> Occasionally	Other (Specify)		<input type="checkbox"/> Washington, D.C.	<input type="checkbox"/> Outside continental U.S.	
<input type="checkbox"/> Frequently			<input type="checkbox"/> Anywhere in U.S.	<input type="checkbox"/> Certain locations only (Specify)	
<input type="checkbox"/> Constantly					
6. Indicate any restrictions you would place on assignments outside the Washington, D.C. area					
(For Office Use Only)				Date of this application	

SECTION III CITIZENSHIP			
1. <input type="checkbox"/>	2. Place of birth (City, State, Country) <b>Philadelphia, Pennsylvania</b>	3. Present citizenship (Country) <b>U.S.</b>	
4. Citizenship acquired by: <input checked="" type="checkbox"/> Birth <input type="checkbox"/> Marriage <input type="checkbox"/> Other (Specify)	5. Date naturalized <b>N/A</b>	6. Naturalization certificate number <b>N/A</b>	
7. Court issuing naturalization certificate <b>N/A</b>	8. Issued at (City, State, Country) <b>N/A</b>		
9. If alien, give alien registration number <b>N/A</b>	10. Date and place of arrival in U.S. <b>N/A</b>		
11. Have you held previous nationality? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	12. If yes, give name of country <b>N/A</b>		
13. Give particulars concerning previous nationalities  <b>N/A</b>			
14. Last U.S. visa (Number, type, place of issue) <b>N/A</b>		15. Date visa issued <b>n/a</b>	

SECTION IV EDUCATION							
ELEMENTARY SCHOOL							
1. Name of elementary school		Address (City, State, Country)		Years attended (From - to -)		Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	
HIGH SCHOOLS							
1. Name of high school		Address (City, State, Country)		Years attended (From - to -)		Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Name of high school		Address (City, State, Country)		Years attended (From - to -)		Graduate <input 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	Grade or Point Average	Number of Sem./Qtr. Hours (Specify)
	Major	Minor					
1.							
2.							
3.							
4. 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	
1.							
2.							
3.							
4.							

EDUCATION (Continued)				
MILITARY TRAINING IN SPECIALIZED SCHOOLS SUCH AS ORDNANCE, COMMUNICATIONS, ETC.				
Name and address of school	Study or specialization	From	To	No. of months
1.				
2.				
3.				

Other education or training not indicated above

SECTION V FOREIGN LANGUAGE ABILITIES																									
<p>1. List below the foreign language or languages in which you possess any degree of competence. Indicate your proficiency in each of the five skill factors shown (reading comprehension, writing ability, etc.) by noting the number most indicative of your level of skill under the factor being considered.</p> <p>If your proficiency relates to a particular dialect of a major language, identify this dialect by noting it in parentheses after the language on the same line.</p> <p>If you have no proficiency in any foreign language, check (X) box at right and leave other items blank. <input style="float: right;" type="checkbox"/></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">Level of Skill</td> </tr> <tr> <td style="text-align: center;">(Slight)</td> <td style="text-align: center;">(Native)</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">5</td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">4</td> </tr> <tr> <td style="text-align: center;">3</td> <td style="text-align: center;">3</td> </tr> <tr> <td colspan="2" style="text-align: center;">0 = No proficiency in a specific skill factor</td> </tr> <tr> <th style="text-align: center;">SKILL FACTORS</th> <th style="text-align: center;">HOW ACQUIRED (Check (X) boxes which apply)</th> </tr> <tr> <td style="text-align: center;">Reading comprehension</td> <td style="text-align: center;">Native or country</td> </tr> <tr> <td style="text-align: center;">Writing ability</td> <td style="text-align: center;">Proficiency</td> </tr> <tr> <td style="text-align: center;">Pronunciation</td> <td style="text-align: center;">Command (with phrases, etc.)</td> </tr> <tr> <td style="text-align: center;">Comprehension ability</td> <td style="text-align: center;">Academic study</td> </tr> <tr> <td style="text-align: center;">Oral comprehension</td> <td></td> </tr> </table>	Level of Skill		(Slight)	(Native)	1	5	2	4	3	3	0 = No proficiency in a specific skill factor		SKILL FACTORS	HOW ACQUIRED (Check (X) boxes which apply)	Reading comprehension	Native or country	Writing ability	Proficiency	Pronunciation	Command (with phrases, etc.)	Comprehension ability	Academic study	Oral comprehension	
Level of Skill																									
(Slight)	(Native)																								
1	5																								
2	4																								
3	3																								
0 = No proficiency in a specific skill factor																									
SKILL FACTORS	HOW ACQUIRED (Check (X) boxes which apply)																								
Reading comprehension	Native or country																								
Writing ability	Proficiency																								
Pronunciation	Command (with phrases, etc.)																								
Comprehension ability	Academic study																								
Oral comprehension																									
<p>2. If you have had experience as a translator, interpreter or instructor - explain and specify in which language(s) you have had such experience.</p>																									
<p>3. Describe your ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, military and other specialized fields</p>																									
<p>4. If you have noted a proficiency in language, would you be willing to use this ability in any position for which you might be selected? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>																									
(For Office Use Only)																									



**SECTION XVII MOTHER-IN-LAW** (If marriage contemplated, fill in information for future mother in law)

1. Full name (Last - First - Middle - Maiden)			
2. State other names she has used			
Indicate circumstances (including length of time) under which any names noted in item 2 above were used. If legal change, give particulars (where and by what authority). Use extra space provided on pages 15 and 16 of this form to record this information.			
3. Date of birth	4. Place of birth	5. Living <input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Date of death	7. Cause of death	8. Citizenship (Country)	
9. Former citizenship(s) (country/ies)		10. Date U.S. citizenship acquired	11. Where acquired (City, State, Country)
12. Naturalization certificate number		13. If alien, give alien registration number	14. Date and place of arrival in U.S.
13. Occupation		16. Present employer (Give last employer if mother-in-law deceased or unemployed)	
17. Current address (Give last address, if deceased)			

**SECTION XVIII RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO EITHER (1) LIVE ABROAD, (2) ARE NOT U.S. CITIZENS OR (3) WORK FOR A FOREIGN GOVERNMENT**

RELATIVES WITH FOREIGN CONNECTIONS	1. Name (Last - First - Middle)		2. Relationship	3. Date of birth	4. Place of birth (City, State, Country)	
	Simmons, George Stuart		Grandfather	3-17-84	San Francisco, Calif	
	(1) 5. Citizenship (Country)	6. Address or country in which relative resides				
	U.S.	4143 Unterer Zielweg 111, Dornach, Switzerland				
	7. Employed by		8. Frequency of contact		9. Date of last contact	
	N/A		none		1961	
	1. Name (Last - First - Middle)		2. Relationship	3. Date of birth	4. Place of birth (City, State, Country)	
	(2) 5. Citizenship (Country)	6. Address or country in which relative resides				
	7. Employed by		8. Frequency of contact		9. Date of last contact	
1. Name (Last - First - Middle)		2. Relationship	3. Date of birth	4. Place of birth (City, State, Country)		
(3) 5. Citizenship (Country)	6. Address or country in which relative resides					
7. Employed by		8. Frequency of contact		9. Date of last contact		

**SECTION XIX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO ARE IN THE MILITARY OR CIVIL SERVICE OF THE UNITED STATES**

RELATIVES IN THE SERVICE OF THE UNITED STATES	1. Name (Last - First - Middle)		2. Relationship	3. Date of birth	4. Place of birth (City, State, Country)	
	(1) 5. Citizenship (Country)	4. Address (Number, Street, City, State, Country)				
			7. Type and location of service (if known)			
	1. Name (Last - First - Middle)		2. Relationship	3. Date of birth	4. Place of birth (City, State, Country)	
	(2) 5. Citizenship (Country)	6. Address (Number, Street, City, State, Country)				
			7. Type and location of service (if known)			
	1. Name (Last - First - Middle)		2. Relationship	3. Date of birth	4. Place of birth (City, State, Country)	
(3) 5. Citizenship (Country)	6. Address (Number, Street, City, State, Country)					
		7. Type and location of service (if known)				

(For Office Use Only)

THIS SHEET MUST BE COMPLETED

Use the following space for extra details. Reference each continued item by the section and item number to which it relates and sign your name at the end of the material. If additional space is required beyond page 16, use extra pages the same size as this page and sign each such page.

**SECTION XI    MARITAL STATUS    FORMER HUSBAND**

- |   |  |
|---|--|
| 3. Ahorn, Thomas Joseph                             | 21. Foreign Service Reserve Officer                      |
| 4. N/A  | 22. <input type="text"/>                                 |
| 5. 4-12-40  | 23. <input type="text"/> Santo Domingo, Washington, D.C. |
| 6. Washington, D.C.                                 | 24. N/A  |
| 7. 4-6-59   | 25. N/A  |
| 8. Hyattsville, Maryland                            | 26. N/A  |
| 9. yes  | 27. N/A  |
| 10. U.S.  |  |
| 11. N/A   |  |
| 12. N/A   |  |
| 13. N/A   |  |
| 14. N/A   |  |
| 15. N/A   |  |
| 16. N/A   |  |
| 17. N/A   |  |
| 18. N/A   |  |
| 19. U.S. Embassy, Santo Domingo, Dominican Republic |  |
| 20. 4622 Hunt Avenue, Chevy Chase, Maryland         |  |

(Signature)

Space for extra details continued on page 16 →

PERSONAL HISTORY STATEMENT — (Appendix I)

Listed below are names of organizations identified by the Attorney General, under his responsibility pursuant to Executive Order 10450, dated 27 April 1953, to list the names of each foreign or domestic organization, association, movement, group or combination of persons which he designates as Totalitarian, Fascist, Communist, or subversive, or as having adopted or having shown a policy of advocating or approving the commission of acts of force or violence to deny others their rights under the Constitution of the United States, or as seeking to alter the form of government of the United States by unconstitutional means.

Each applicant or employee and spouse (if any) must review the following list of organizations for certification purposes, and sign on the last page.

<p>Abraham Lincoln Brigade Abraham Lincoln School, Chicago, Illinois Action Committee to Free Spain Now Alabama People's Educational Association (see Communist Political Association) American Association for Reconstruction in Yugoslavia, Inc. American Branch of the Federation of Greek Maritime Unions American Christian Nationalist Party American Committee for European Workers' Relief (see Socialist Workers Party) American Committee for Protection of Foreign Born American Committee for Spanish Freedom American Committee for the Settlement of Jews in Birobidjan, Inc. American Committee for Yugoslav Relief, Inc. American Committee to Survey Labor Conditions in Europe American Council for a Democratic Greece, formerly known as the Greek American Council; Greek American Committee for National Unity American Council on Soviet Relations American Croatian Congress American Jewish Labor Council American League Against War and Fascism American League for Peace and Democracy American National Labor Party American National Socialist League American National Socialist Party American Nationalist Party American Patriots, Inc. American Peace Crusade American Peace Mobilization American Poets for Peace American Polish Labor Council American Polish League American Rescue Ship Mission (a project of the United American Spanish Aid Committee) American-Russian Fraternal Society American Russian Institute, New York, also known as the American Russian Institute for Cultural Relations with the Soviet Union American Russian Institute, Philadelphia American Russian Institute of San Francisco American Russian Institute of Southern California, Los Angeles American Slav Congress American Women for Peace American Youth Congress American Youth for Democracy Armenian Progressive League of America Associated Klans of America Association of Georgia Klans Association of German Nationals (Reichsdeutsche Vereinigung) Ausland-Organization der NSDAP, Overseas Branch of Nazi Party</p> <p>Baltimore Forum Benjamin Davis Freedom Committee Black Dragon Society</p>	<p>Boston School for Marxist Studies, Boston, Massachusetts Bridges-Robertson-Schmidt Defense Committee Bulgarian American People's League of the United States of America</p> <p>California Emergency Defense Committee California Labor School, Inc., 321 Divisadero Street, San Francisco, California Carpatho-Russian People's Society Central Council of American Women of Croatian Descent, also known as Central Council of American Croatian Women, National Council of Croatian Women Central Japanese Association (Heikoku Chuo Nipponjin Kai) Central Japanese Association of Southern California Central Organization of the German-American National Alliance (Deutsche-Amerikanische Einheitsfront) Cervantes Fraternal Society China Welfare Appeal, Inc. Chopin Cultural Center Citizens Committee for Harry Bridges Citizens Committee of the Upper West Side (New York City) Citizens Committee to Free Earl Browder Citizens Emergency Defense Conference Citizens Protective League Civil Liberties Sponsoring Committee of Pittsburgh Civil Rights Congress and its affiliated organizations, including: Civil Rights Congress for Texas Veterans Against Discrimination of Civil Rights Congress of New York Civil Rights Congress for Texas (see Civil Rights Congress) Columbians Comite Coordinador Pro Republica Espanola Comite Pro Derechos Civiles (See Puerto Rican Comite Pro Libertades Civiles) Committee for a Democratic Far Eastern Policy Committee for Constitutional and Political Freedom Committee for Nationalist Action Committee for Peace and Brotherhood Festival in Philadelphia Committee for the Defense of the Pittsburgh Six Committee for the Negro in the Arts Committee for the Protection of the Bill of Rights Committee for World Youth Friendship and Cultural Exchange Committee to Abolish Discrimination in Maryland (See Congress Against Discrimination; Maryland Congress Against Discrimination; Provisional Committee to Abolish Discrimination in the State of Maryland) Committee to Aid the Fighting South Committee to Defend Marie Richardson Committee to Defend the Rights and Freedom of Pittsburgh's Political Prisoners Committee to Uphold the Bill of Rights Commonwealth College, Mena, Arkansas Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates</p>
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PHILLIPS DAVID A  
00 0 (1) 00 00 0

1065 44  
(2) (3)

(4)

SUBJECT: NOTIFICATION OF GRANTING OR OF REVOCATION OF CRYPTOGRAPHIC CLEARANCE

THE ABOVE NAMED INDIVIDUAL (ITEM 1) HAS BEEN GRANTED A CRYPTOGRAPHIC CLEARANCE FOR THE CRYPTOGRAPHIC CLEARANCE HELD BY THIS INDIVIDUAL HAS BEEN REVOKED UNDER THE PROVISIONS OF HR 90-8. THE CLEARANCE (ITEM 2) OR REVOCATION (ITEM 4), IS EFFECTIVE AS OF THE MONTH AND YEAR SHOWN ABOVE. SUBJECT HAS BEEN BRIEFED OR DEBRIEFED, AS APPROPRIATE, CONCERNING CRYPTOGRAPHIC AND RELATED COMMUNICATIONS SECURITY MATTERS AND HAS SIGNED A BRIEFING/DEBRIEFING STATEMENT, AS APPROPRIATE, ACKNOWLEDGING RESPONSIBILITY FOR THE PROTECTION OF CRYPTOGRAPHIC INFORMATION. UPON REVOCATION OF CRYPTOGRAPHIC CLEARANCE SUBJECT IS NOT AUTHORIZED TO HAVE CONTINUED CUSTODY OF, ACCESS TO, OR OTHERWISE GAIN FURTHER KNOWLEDGE OF STAFF CRYPTOGRAPHIC MATERIAL OR INFORMATION.

WHEN EMPLOYEE NO LONGER REQUIRES THE CLEARANCE IN ORDER TO PERFORM HIS/HER ASSIGNED DUTIES, IT IS REQUESTED THAT THE COMMUNICATIONS SECURITY STAFF, OC, BE NOTIFIED THAT THE CLEARANCE MAY BE REVOKED.

DISTRIBUTION:  
1 - EMPLOYEE'S COMPONENT (ITEM 3)  
1 - OFFICE OF PERSONNEL

FORM 12-63 597b USE PREVIOUS EDITIONS

FOR THE DIRECTOR OF COMMUNICATIONS.

*David A. Phillips*  
CHIEF, ~~PERSONNEL~~ BRANCH, OC-5

CONFIDENTIAL

GROUP 1  
Excluded from automatic  
downgrading and declassification

SECRET  
(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)				LANGUAGE PROFICIENCY AND AWARDS DATA			2. LD NO.
3. NAME (7-24) LAST Phillips, David A.			FIRST	MIDDLE	4. OFFICE OR DIVISION	5. LANGUAGE	6. LANG. CODE (25-27)
7. DATE OF TEST '46-51 June 10, 1951		8. ANNIVERSARY DATE Mar. 16, 1952		9. GRADE	10. DATE OF BIRTH July 21, 1908		
11. REASON FOR TAKING TEST				12. TEST SCORES			
APPLY FOR AWARD		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	
ESTABLISH SKILL LEVEL							
13. ELIGIBILITY (39)		14. TYPE OF AWARD					
A	ACHIEVEMENT (A)	ELEMENTARY (E)	READING (R) SPEAKING (S)		BASED ON TRAINING THAT WAS DIRECTED (D) OR VOLUNTARY (V)		
M	MAINTENANCE (M)	INTERMEDIATE (I)	COMPREHENSIVE (C)				
NA		HIGH (H)					
15. INELIGIBLE (REASON) level of proficiency not maintained				16. I CERTIFY THIS EMPLOYEE FOR A PROFICIENCY AWARD OF \$ (40-45)			
				SIGNATURE		DATE	
REMARKS				17. I CERTIFY THAT FUNDS ARE AVAILABLE			
				OBLIGATION REF. NO.		CHARGE ALLOTMENT NO.	
				SIGNATURE			

FORM 127-1  
5-60

OBSOLETE 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.	
54415								7512	
3 NAME (7-24) LAST			FIRST	MIDDLE	4. OFFICE OR DIVISION	5 LANGUAGE		6 LANG. CODE (25-27)	
Dobbin, David A.						French		205	
7 DATE OF TEST (46-51)			8 ANNIVERSARY DATE		9 GRADE	10 DATE OF BIRTH			
May 20, 1965			Mar. 14, 1960		14	Oct. 21, 1920			
11. REASON FOR TAKING TEST			12. TEST SCORES						
APPLY FOR AWARD			READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)		
ESTABLISH SKILL LEVEL									
13. ELIGIBILITY (39)			14. TYPE OF AWARD						
A			ACHIEVEMENT (A)	ELEMENTARY (E)	READING (R) SPEAKING (S)		BASED ON TRAINING THAT WAS		
M			MAINTENANCE (M)	INTERMEDIATE (I)	COMPREHENSIVE (C)		DIRECTED (D) OR VOLUNTARY (V)		
NA									
15 INELIGIBLE (REASON)					16 I CERTIFY THIS EMPLOYEE FOR A PROFICIENCY AWARD OF \$ (40-45)				
did not achieve an awardable level.					SIGNATURE		DATE		
					17 I CERTIFY THAT FUNDS ARE AVAILABLE				
REMARKS					OBLIGATION REF. NO.		CHARGE ALLOTMENT NO.		
					SIGNATURE				

FORM 1273  
5-60

OBSELETE PREVIOUS EDITIONS

**SECRET**

(10-45)

MRD COPY

SECRET

(When Filled In)

11-61		LANGUAGE DATA RECORD		
524345				
PART I-GENERAL				
1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (20-33)		
PHILLIPS, DAVID A.		MONTH OCTOBER	DAY 31	YEAR 1922
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39)		5.	
FRENCH 265	MONTH march	DAY 14	YEAR 60	<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, 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.				
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 (44)	
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. 25-175, PAR. 1(C)(2). 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	SIGNATURE
14 MARCH 1960	<i>David A. Plesner</i>
1401 S	1471 F

SECRET

(When Filled In)

(1-6)		<b>LANGUAGE DATA RECORD</b>			
<b>PART I-GENERAL</b>					
1. NAME (Last-First-Middle) (17-24)			2. DATE OF BIRTH (25-30)		
PHILLIPS, DAVID ATLEE			OCTOBER	31	1922
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)		5.	
SPANISH DC		MONTH	DAY	YEAR	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
		MARCH	14	1960	
<b>PART II-LANGUAGE ELEMENTS</b>					
<b>SECTION A.</b>			<b>Reading (40)</b>		
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.					
<b>SECTION B.</b>			<b>Writing (41)</b>		
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT 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, 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.					
5. I CANNOT WRITE IN THE LANGUAGE.					
<b>SECTION C.</b>			<b>Pronunciation (42)</b>		
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 (44)

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.
5. 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. 23-115, PAR. 1C(4). 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

14 MARCH 1960

SIGNATURE

*David G. Nelson*

(46)

(47)



SECRET  
(When Filled In)

(11-6)		LANGUAGE DATA RECORD	
963663			
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (25-30)	
DAVID A. PHILLIPS		MONTH	DAY YEAR
		OCTOBER	31 1957
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)	
FRENCH 265		MONTH	DAY YEAR
		OCTOBER	22 1957
		<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, 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.			
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.			
13			
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 EASILY 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 (44)

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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. 29-115, PAR. 1C(4). 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

SIGNATURE

1463

1471

*[Handwritten signature]*  
*[Handwritten initials]* E

SECRET  
(When Filled In)

56  
Link

412003 LANGUAGE DATA RECORD

PART I-GENERAL

1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (25-30)		
DAVID A. PHILLIPS		MONTH	DAY	YEAR
		OCTOBER	31	1922
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)		5.
SPANISH 720		MONTH	DAY	YEAR
		OCTOBER	22	1957
		<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE		

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CONTINUE ON REVERSE SIDE

CONTINUATION OF PART II—LANGUAGE ELEMENTS

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DATE SIGNED

SIGNATURE

*B. Sam*

(46)

(47)

*C*

*A*

CONFIDENTIAL  
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 9 February 1960

YOUR  
REFERENCE: E-8573 CS/CS Div. Comp.

CASE NO. : 40696

TO : Director of Personnel

FROM : Director of Security

SUBJECT : PHILLIPS, David Atlee

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.

FOR THE DIRECTOR OF SECURITY:

*W. A. Osborne*  
W. A. Osborne

Acting Chief, Personnel Security Division

*Mr. Washburn advised  
(with)  
2-10-60*

*Policy of Mr. Call - 2-24-60*  
FORM NO. 1173 REPLACES FORM 28-104  
1 MAR 57 WHICH IS OBSOLETE

CONFIDENTIAL

CONFIDENTIAL  
SECURITY INFORMATION  
SECURITY APPROVAL

Date: 26 April 1955

TO: Chief, Processing & Records Division  
Personnel Office  
FROM: Chief, Security Division  
Personnel  
SUBJECT: PHILLIPS, David Atlee

Your Reference: SR-6038-PP

Case Number: 10696

1. This is to advise you of security action in the subject case as indicated below:

- Security approval is granted the subject person for access to classified information.
- Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
- The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of paragraph H of Regulation 10-9.

2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.

3. Subject is to be polygraphed as part of EOD procedures.

4. This clearance is retroactive to 1 April 1955  
per Myers  
27 April 55

*Ernest P. Geiss*  
Ernest P. Geiss

CONFIDENTIAL

# PERSONAL HISTORY STATEMENT

1. I am a citizen of the United States of America, and I am over 18 years of age. I am not a member of the Communist Party, nor do I have any other affiliations with any organization that is prohibited by law. I have never been convicted of a crime, nor have I ever been in the military service of any country.

**HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?**

**SECTION 1: PERSONAL BACKGROUND**

**A. FULL NAME:** \_\_\_\_\_  
**1. LAST NAME:** \_\_\_\_\_  
**2. FIRST NAME:** \_\_\_\_\_  
**3. MIDDLE NAME:** \_\_\_\_\_

**B. CURRENT ADDRESS:** \_\_\_\_\_  
**1. STREET ADDRESS:** \_\_\_\_\_  
**2. CITY:** \_\_\_\_\_  
**3. STATE:** \_\_\_\_\_  
**4. ZIP CODE:** \_\_\_\_\_

**C. BIRTHDATE:** \_\_\_\_\_  
**1. MONTH:** \_\_\_\_\_  
**2. DAY:** \_\_\_\_\_  
**3. YEAR:** \_\_\_\_\_

**D. PLACE OF BIRTH:** \_\_\_\_\_  
**1. CITY:** \_\_\_\_\_  
**2. STATE:** \_\_\_\_\_  
**3. COUNTRY:** \_\_\_\_\_

**E. EDUCATION:** \_\_\_\_\_  
**1. HIGHEST LEVEL OF EDUCATION:** \_\_\_\_\_  
**2. INSTITUTION:** \_\_\_\_\_  
**3. DATES:** \_\_\_\_\_

**F. EMPLOYMENT HISTORY:** \_\_\_\_\_  
**1. CURRENT EMPLOYER:** \_\_\_\_\_  
**2. DATES:** \_\_\_\_\_  
**3. POSITION:** \_\_\_\_\_

**G. MILITARY SERVICE:** \_\_\_\_\_  
**1. BRANCH:** \_\_\_\_\_  
**2. DATES:** \_\_\_\_\_  
**3. POSITION:** \_\_\_\_\_

**H. TRAVEL HISTORY:** \_\_\_\_\_  
**1. COUNTRIES VISITED:** \_\_\_\_\_  
**2. DATES:** \_\_\_\_\_

**I. CONTACT INFORMATION:** \_\_\_\_\_  
**1. PHONE NUMBER:** \_\_\_\_\_  
**2. EMAIL ADDRESS:** \_\_\_\_\_

**J. SIGNATURE:** \_\_\_\_\_  
**1. DATE:** \_\_\_\_\_

**K. WITNESSES:** \_\_\_\_\_  
**1. NAME:** \_\_\_\_\_  
**2. ADDRESS:** \_\_\_\_\_  
**3. SIGNATURE:** \_\_\_\_\_

**L. NOTES:** \_\_\_\_\_

**M. CONTACT INFORMATION:** \_\_\_\_\_  
**1. PHONE NUMBER:** \_\_\_\_\_  
**2. EMAIL ADDRESS:** \_\_\_\_\_

# PERSONAL HISTORY STATEMENT

1. This form is to be filled out by the individual being interviewed. It should be filled out in the presence of the interviewer. The interviewer should read the instructions to the individual and answer any questions. The individual should be given a copy of this form and the instructions. The individual should be given a copy of this form and the instructions. The individual should be given a copy of this form and the instructions.

**HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?**

**PERSONAL BACKGROUND**

2. Full Name: \_\_\_\_\_  
 3. Date of Birth: \_\_\_\_\_  
 4. Present Address: \_\_\_\_\_  
 5. Previous Addresses: \_\_\_\_\_  
 6. Education: \_\_\_\_\_  
 7. Occupation: \_\_\_\_\_  
 8. Marital Status: \_\_\_\_\_  
 9. Children: \_\_\_\_\_  
 10. Other: \_\_\_\_\_

11. How long have you lived at your present address? \_\_\_\_\_  
 12. How long have you lived at your previous address? \_\_\_\_\_  
 13. How long have you lived at your previous address? \_\_\_\_\_  
 14. How long have you lived at your previous address? \_\_\_\_\_  
 15. How long have you lived at your previous address? \_\_\_\_\_

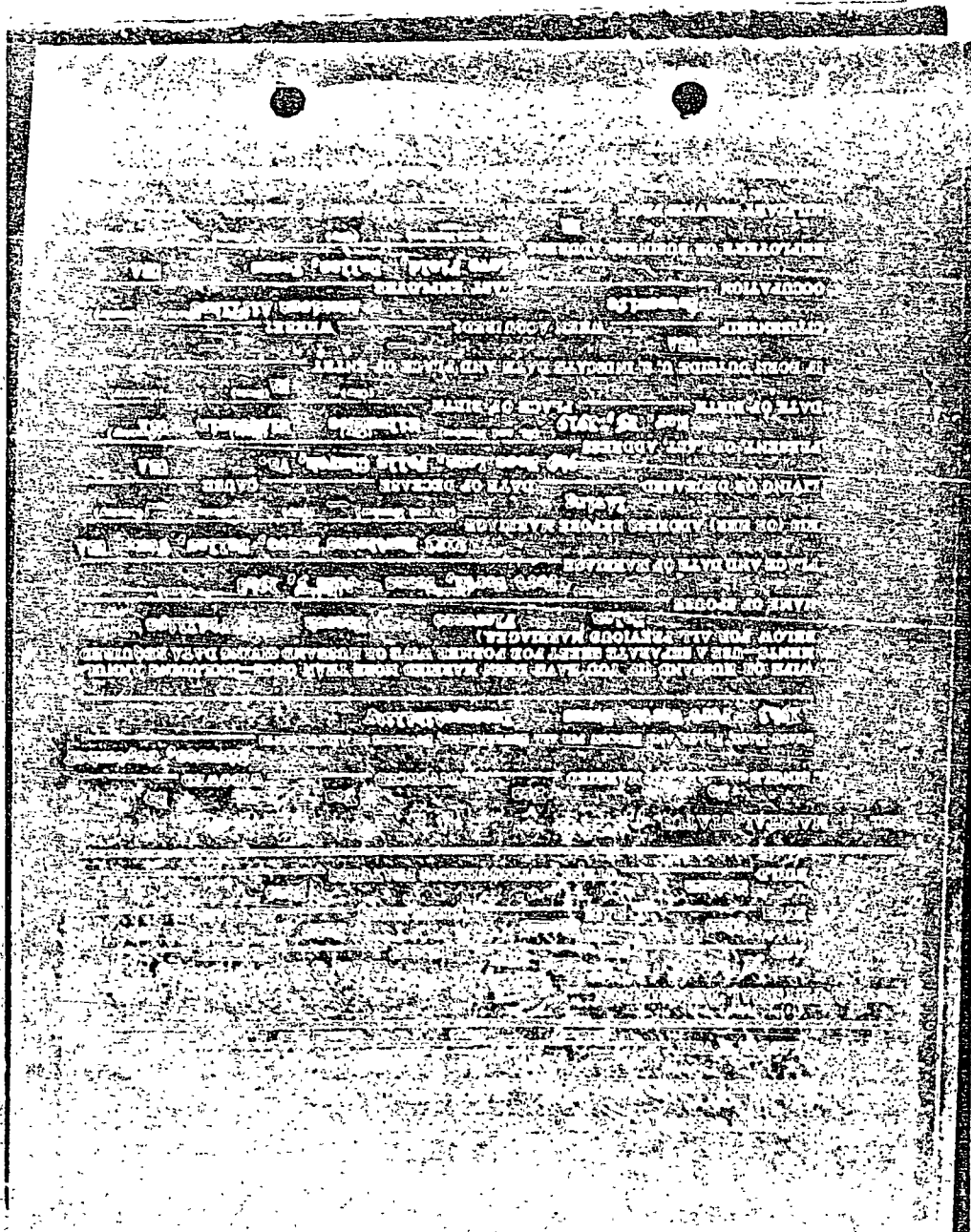
16. How long have you lived at your previous address? \_\_\_\_\_  
 17. How long have you lived at your previous address? \_\_\_\_\_  
 18. How long have you lived at your previous address? \_\_\_\_\_  
 19. How long have you lived at your previous address? \_\_\_\_\_  
 20. How long have you lived at your previous address? \_\_\_\_\_

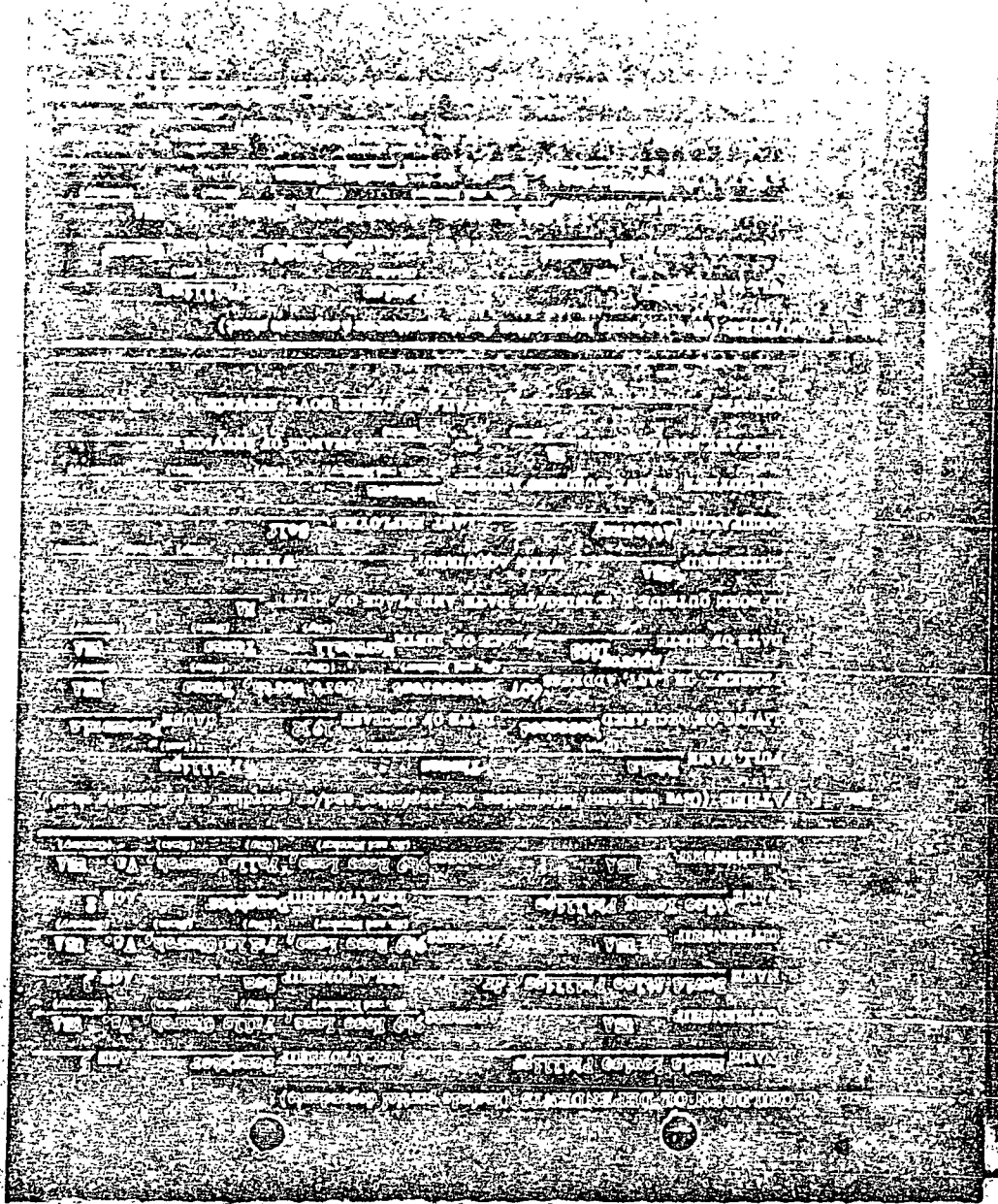
21. How long have you lived at your previous address? \_\_\_\_\_  
 22. How long have you lived at your previous address? \_\_\_\_\_  
 23. How long have you lived at your previous address? \_\_\_\_\_  
 24. How long have you lived at your previous address? \_\_\_\_\_  
 25. How long have you lived at your previous address? \_\_\_\_\_

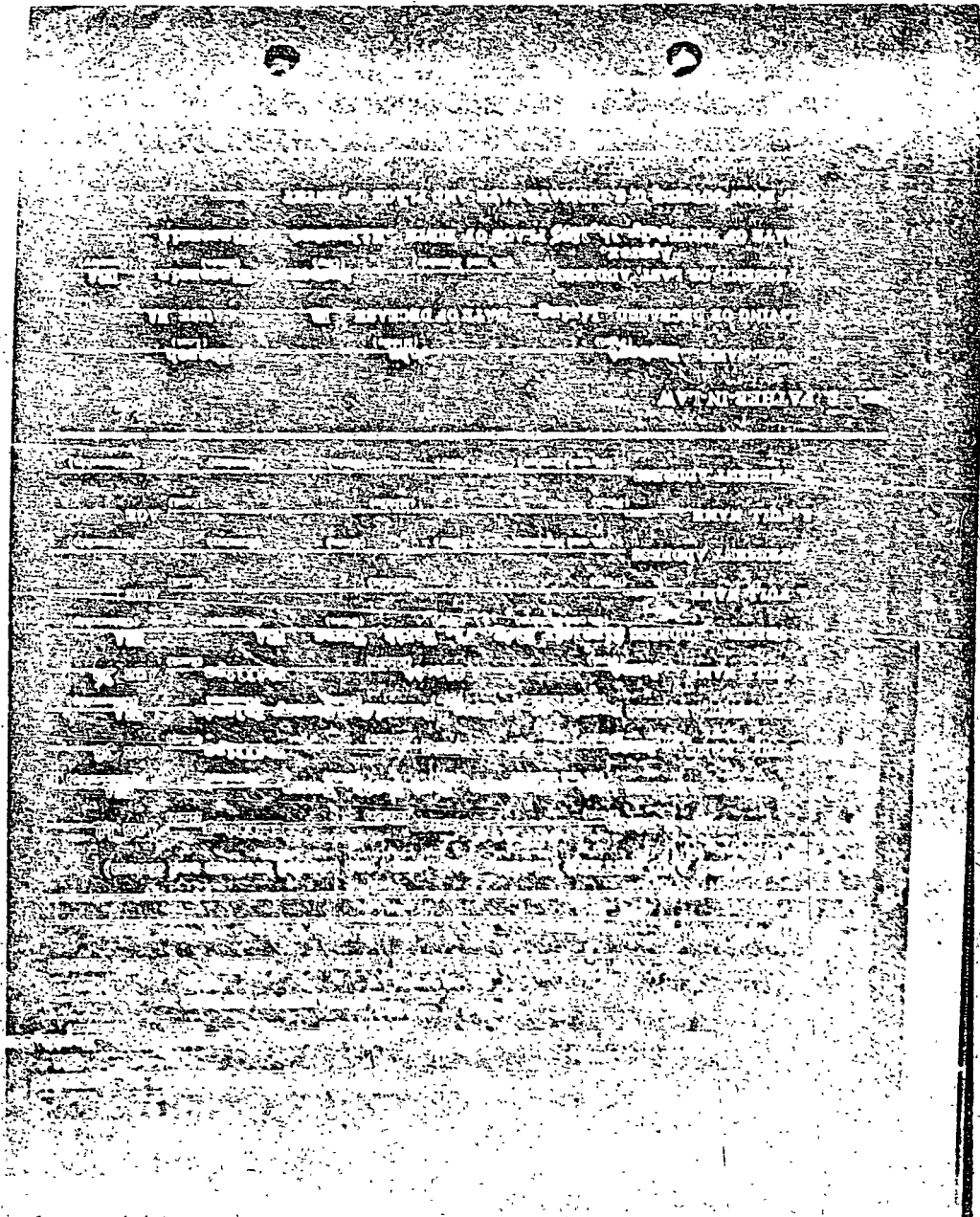
26. How long have you lived at your previous address? \_\_\_\_\_  
 27. How long have you lived at your previous address? \_\_\_\_\_  
 28. How long have you lived at your previous address? \_\_\_\_\_  
 29. How long have you lived at your previous address? \_\_\_\_\_  
 30. How long have you lived at your previous address? \_\_\_\_\_

31. How long have you lived at your previous address? \_\_\_\_\_  
 32. How long have you lived at your previous address? \_\_\_\_\_  
 33. How long have you lived at your previous address? \_\_\_\_\_  
 34. How long have you lived at your previous address? \_\_\_\_\_  
 35. How long have you lived at your previous address? \_\_\_\_\_











[The following text is extremely faint and largely illegible due to heavy noise and low contrast in the scan. It appears to be a multi-paragraph document with several lines of text per paragraph. Some faint words and structures are visible, but they cannot be accurately transcribed.]

[Illegible text block 1]

[Illegible text block 2]

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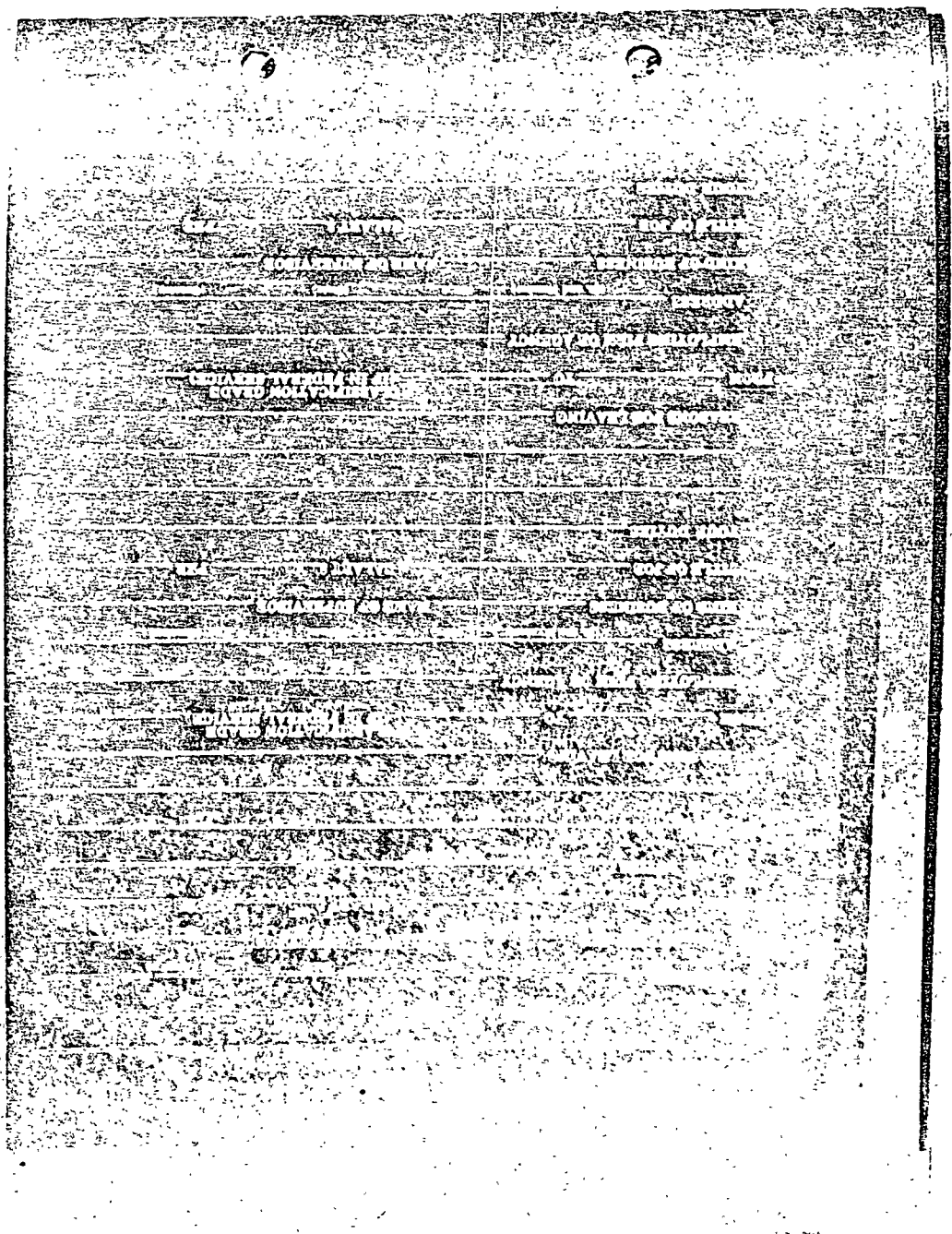
[Illegible text block 17]

[Illegible text block 18]

[Illegible text block 19]

[Illegible text block 20]





HAVE YOU EVER BEEN DISCHARGED OR AWAY FROM YOUR POSITION? HAVE YOU LEFT A POSITION UNDER THE DISCIPLINE? WOULD YOU DESIRE TO EXPLAIN? GIVE DETAILS:

GENERAL INFORMATION

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
MARRIED: \_\_\_\_\_  
SINGLE: \_\_\_\_\_  
MOTHER: \_\_\_\_\_  
FATHER: \_\_\_\_\_  
MOTHER-IN-LAW: \_\_\_\_\_  
FATHER-IN-LAW: \_\_\_\_\_  
SIBLINGS: \_\_\_\_\_  
CHILDREN: \_\_\_\_\_  
EDUCATION: \_\_\_\_\_  
EMPLOYMENT: \_\_\_\_\_  
MILITARY SERVICE: \_\_\_\_\_  
RECORDS: \_\_\_\_\_  
REFERENCES: \_\_\_\_\_  
OTHER: \_\_\_\_\_



[The following text is extremely faint and largely illegible due to heavy noise and grain in the scan. It appears to be a series of lines of text, possibly a list or a set of instructions, with some lines starting with "1." and "2." ]

1. [Illegible text]

2. [Illegible text]

[Additional illegible lines of text follow, including what appears to be a section header or a specific instruction.]



[The following text is extremely faint and appears to be a form or document with multiple sections. It is largely illegible due to the quality of the scan.]

SECTION 1  
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 SECTION 81  
 SECTION 82  
 SECTION 83  
 SECTION 84  
 SECTION 85  
 SECTION 86  
 SECTION 87  
 SECTION 88  
 SECTION 89  
 SECTION 90  
 SECTION 91  
 SECTION 92  
 SECTION 93  
 SECTION 94  
 SECTION 95  
 SECTION 96  
 SECTION 97  
 SECTION 98  
 SECTION 99  
 SECTION 100

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

[Section 1: Faint header or introductory text, possibly containing a title or reference number.]

[Section 2: A paragraph of text, possibly describing a subject or context.]

[Section 3: A paragraph of text, possibly detailing a specific event or action.]

[Section 4: A paragraph of text, possibly providing further details or a conclusion.]

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

[Section 6: A paragraph of text, possibly a closing or a reference to another document.]

[Section 7: A paragraph of text, possibly a final note or a date.]



NAME	DATE	LOCATION	STATUS
ALICE M. BROWN	1/15/50	NEW YORK	ACTIVE
JOHN D. SMITH	2/10/50	CHICAGO	RESERVED
CHARLES E. JONES	3/5/50	LOS ANGELES	ACTIVE
MARY K. WHITE	4/1/50	BOSTON	RESERVED
ROBERT L. GREEN	5/1/50	PHILADELPHIA	ACTIVE
EDWARD G. BLACK	6/1/50	ATLANTA	RESERVED
FRANK H. BLUE	7/1/50	HOUSTON	ACTIVE
HELEN I. RED	8/1/50	MEMPHIS	RESERVED
WILLIAM O. YELLOW	9/1/50	INDIANAPOLIS	ACTIVE
JANE P. PURPLE	10/1/50	COLUMBIANA	RESERVED
HENRY Q. BROWN	11/1/50	MEMPHIS	ACTIVE
MARGARET R. GREEN	12/1/50	MEMPHIS	RESERVED

**MEMPHIS, TENNESSEE**

On July 1, 1950, the following individuals were listed as active members of the organization. The names and addresses of these individuals are as follows:

ALICE M. BROWN, 123 Main St., New York, N.Y.  
 JOHN D. SMITH, 456 Elm St., Chicago, Ill.  
 CHARLES E. JONES, 789 Oak St., Los Angeles, Calif.  
 MARY K. WHITE, 101 Pine St., Boston, Mass.  
 ROBERT L. GREEN, 202 Cedar St., Philadelphia, Pa.  
 EDWARD G. BLACK, 303 Birch St., Atlanta, Ga.  
 FRANK H. BLUE, 404 Spruce St., Houston, Tex.  
 HELEN I. RED, 505 Ash St., Memphis, Tenn.  
 WILLIAM O. YELLOW, 606 Hickory St., Indianapolis, Ind.  
 JANE P. PURPLE, 707 Maple St., Columbiana, W. Va.  
 HENRY Q. BROWN, 808 Walnut St., Memphis, Tenn.  
 MARGARET R. GREEN, 909 Chestnut St., Memphis, Tenn.

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

SECRET

FILE TITLE/NUMBER/VOLUME: Phillips, David A.

INCLUSIVE DATES: 25-MARCH-1955-2 Feb 1976

CUSTODIAL UNIT/LOCATION: OP Files

ROOM: 5E13

DELETIONS, IF ANY:

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
2/10/78	2/10/78	DAN HARDWAY	Dan Hardway
12-26-78	4/12/78	DAN HARDWAY	Dan Hardway

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

SECRET

522663  
 RECORDED  
 FBI WITH USA  
 NOV 8 1978  
 BOX 8

Contract Service — Michael M. CHADEN (P) <sup>GS</sup>

<u>Date</u>	<u>Action</u>	<u>Compensation</u>	<u>Grade</u>
1 Feb 51	Independent contractor	\$600 per mo	
23 Feb 51	<del>Independent</del> contract terminated	600 " "	
25 Jan 52	Independent contractor	\$6,000 p.a.	
31 Aug 53	Contract terminated	6,000	
4 Mar 54	Contract Employee	\$7,200	
31 Jul 54	Contract terminated	7,200	
1 Aug 54	Contract Employee	8,360	
31 Mar 55	Contract terminated	8,360	
1 Apr 55	Agency Staff Agent service		
13 Aug 58			
19 Aug 58	Independent contractor (Note: the base rate of pay of \$7,200 is subject to increase on occasions wherein subject performs specialized assignments)	<del>\$7,200</del>	
13 Mar 60	<del>Contract</del> terminated	\$7,200	
14 Mar 60	Entered on duty as an Agency Staff Employee at the rate of GS-14/3 (\$11,835).		




ADMINISTRATIVE-INTERNAL USE ONLY

13 May 1975

MEMORANDUM FOR: Chief, Contract Personnel Division  
SUBJECT : Earnings of David A. Phillips

In accordance with your telephone request, the following is a record of income earned by Mr. Phillips during the period 19 August 1958 through 13 March 1960. Mr. Phillips was paid at \$7,200 P/A, with the exception of those periods of service performed outside of his country of permanent assignment and then he was paid at \$13,000 P/A.

<u>DATES</u>	<u>PAID AT \$7200 P/A</u>	<u>DUE DIFFERENCE BETWEEN \$7200 P/A &amp; \$13000 P/A</u>	<u>TOTAL</u>
19-31 Aug 58	\$ 240.00	-0-	\$ 240.00
Sept 58	600.00	\$ 32.22	632.22
Oct 58	600.00	434.97	1034.97
Nov 58-Jan 59	1800.00	-0-	1800.00
Feb 59	600.00	88.60	688.60
March 59	600.00	-0-	600.00
April 59	600.00	157.07	757.07
May 59	600.00	128.88	728.88
June-July 59	1200.00	-0-	1200.00
Aug 59	600.00	80.55	680.55
Sept 59-Feb 60	3600.00	-0-	3600.00
1-13 March 60	260.00	-0-	260.00
Totals	\$11,300.00	\$922.29	\$12,222.29

  
JOSEPH H. HUDSON  
Deputy Chief

Compensation and Tax Division

ADMINISTRATIVE-INTERNAL USE ONLY

Out of Country 6 times

P.O. J. J. J. J. J.

# David Phillips

19 Aug 58 - \$7200

19-31 Aug 58	-	\$260	
Sep 58	-	600 + 32.22	\$632.22
Oct 58	-	600 + 289.98	889.98
Nov 58	-	600	\$1800.00
Dec 58	-	600 + 88.60	688.60
Jan 59	-		600.00
Feb 59	-	600 + 157.07	757.07
Mar 59	-	600 + 128.88	728.88
Apr 59	-	600	600.00
May 59	-	600	600.00
Jun 59	-	600 + 80.55	680.55
Jul 59	-	600	600.00
Aug 59	-	600	600.00
Sep 59	-	600	600.00
Oct 59	-	600	600.00
Nov 59	-	600	600.00
Dec 59	-	600	600.00
Jan 60	-	600	600.00
Feb 60	-	600	600.00
1-13 Mar 60	-	260	260.00

11,320 paid at \$7200

also pay \$777.30

Total Paid \$12,097.30

4 March 1975

BACKGROUND ON REQUEST FOR CREDITABLE SERVICE: August 1950 Until 3 March 1954

1. A basic document in consideration of this request is HCSA-825, dated 4 February 1954.

*Pol. gh*  
*Be. ment*  
2. I was running an English-language newspaper in Santiago, Chile when asked to work with our Station there. My first pay was \$50.00 per month. The file contains a project approval dated 31 May 1950; TCS-A-1064 asks that the first payment be made to the U.S. bank on 1 August 1950.

*Lo. us*  
*73 a*  
*pro. ct*  
3. During this period I recall a number of activities undertaken for the Station, and I travelled to New York for clandestine training. The file indicates "He was originally approved operationally to handle the complex Soviet espionage case of FULMINATER-2. His conduct of this case was considered excellent...." Also, "It will be recalled that Headquarters was very pleased with the printing job...which he had done." The latter was indicative of a number of such chores, when I stayed behind in my plant after the employees had left for the night, printing leaflets, booklets, etc. I also handled agents and did a number of spotting and assessing jobs for the Station.

4. I signed a new contract on 25 January 1952 for \$500.00 per month which ran until the termination date of 31 August 1953. (Actually this was in the form of a loan which was paid off at the rate of \$500.00. The advance was used to purchase printing equipment which allowed me to do certain work for the Station, but which I retained.)"

5. After termination of the contract on 31 August I remained in Chile until 4 March 1954. During this period I recruited a CP agent who still works for the Station--and was a cabinet member under Allende. On 3 February 1954 Headquarters asked that I be made available for another assignment. The Station pointed out that I was working on the recruitment, and that I and my family were planning on a European vacation. Headquarters again requested my assignment. Thus I departed for the Guatemala project in early March, abandoning my free family trip to Europe (tickets paid for by advertising in my paper) and leaving my family behind to pack up. I accepted this assignment without knowing where it was, or for how long it would last. Indeed I did not even have a contract.

E2 IMPDET  
CL BY 024345

6. I worked for the Agency in Santiago, then, between 1 August 1950 until departure for PBSUCCESS on 4 March 1954. I was always available and when I finally did leave it was for Agency business rather than my own. Thus I request that all or part of this time be approved as creditable toward retirement.



David A. Phillips

Mr. DeFelice:

Information from Adele regarding  
Dave Phillips' creditable service:

As of 31 December 1974:

18 years, 11 months, 27 days  
(Agency civilian service)

2 years, 8 months, 11 days  
(military service)

Total creditable service:

21 years, 8 months, 8 days.

Sick leave will be added to that.

For your information, Paul Seidel has  
an appointment with Mr. Phillips on  
Wednesday afternoon. He is in the  
CIARDS system and with his birth date  
in 1922, he is eligible for voluntary  
retirement.

*Bonnie*

18 - 11 23

Mar 54 - July 54 - 4 mos -  
1 Aug 54 - 31 Mar 57 - 8 mos -

April 55 - 15 Mar 56 - 3 mos

Mar 56 - Mar 57 - 1 yr

Self lead - 7 Feb 56 - 13 Aug 58

Royce Borden - show

Contract job - 1 Feb 51 - 28 Feb 51 -  
Contract job - 25 Mar 52 - 31 Aug 53

Contract Employee  
Self lead  
Self lead  
Contract job  
Self lead

4 March 50 - 31 Mar 55  
1 April 55 - 6 Feb 56  
2 Feb 56 - 13 Aug 58  
15 Mar 58 - 13 Mar 60  
18 Mar 60 - 6 Oct 60

David A. Phillips

Excepted Appointment Staff Employee 1 Apr 55

Resignation Staff Employee 6 Feb 56

Excepted Appointment Staff Agent 7 Feb 56

Resignation Staff Agent 13 Aug 58

Contract Agent 19 Aug 58

Terminated 13 Mar 60

Excepted Agent Staff Employee 14 Mar 60  
Staff Employee since 14 March 1960



SECRET

21 May 1975

MEMORANDUM FOR: Office of Finance/C&TD

SUBJECT : Verification of Contract Employee Service of David A. Phillips, current staff employee for period 19 August 1958 through 13 March 1960.

REFERENCE : Memorandum from Deputy Chief Comp & Tax Division subject earnings of David A. Phillips dated 13 May 1975

1. Based upon new information it has now been determined that subject served as an Agency contract employee during period 19 August 1958 through 13 March 1960, and that this period is creditable for both retirement and leave account category purposes. Civil Service Retirement deductions were not withheld during the period. Records of this office reflect subject was authorized compensation during referenced period at the rate of \$7,200 per annum, except that when he was outside of the United States he was paid at the rate of \$13,000 per annum. For times and amounts involved in change of rate see reference.

2. Action required:

(a) Office of Finance: Please post the above information to subjects retirement records.

(b) DDO/LA/Pers: Please advise subject of the contents of this memorandum.

(c) RAD/ROB: For your information and assistance in retirement processing.

  
Rogers C. Brooks  
Deputy Chief

Contract Personnel Division

Distribution:

Orig - Addressee  
1 - DDO/LA/Pers  
1 - RAD/ROB

OGC Concurrence: 16 - 19 May 1975

SECRET

E2IMPDET  
CL by: 063837


**ADMINISTRATIVE-INTERNAL USE ONLY**

13 May 1975

**MEMORANDUM FOR:** Chief, Contract Personnel Division  
**SUBJECT :** Earnings of David A. Phillips

In accordance with your telephone request, the following is a record of income earned by Mr. Phillips during the period 19 August 1958 through 13 March 1960. Mr. Phillips was paid at \$7,200 P/A, with the exception of those periods of service performed outside of his country of permanent assignment and then he was paid at \$13,000 P/A.

<u>DATES</u>	<u>PAID AT \$7200 P/A</u>	<u>DUE DIFFERENCE BETWEEN \$7200 P/A &amp; \$13000 P/A</u>	<u>TOTAL</u>
19-31 Aug 58	\$ 240.00	-0-	\$ 240.00
Sept 58	600.00	\$ 32.22	632.22
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Feb 59	600.00	88.60	688.60
March 59	600.00	-0-	600.00
April 59	600.00	157.07	757.07
May 59	600.00	128.88	728.88
June-July 59	1200.00	-0-	1200.00
Aug 59	600.00	80.55	680.55
Sept 59-Feb 60	3600.00	-0-	3600.00
1-13 March 60	260.00	-0-	260.00
<b>Totals</b>	<b>\$11,300.00</b>	<b>\$922.29</b>	<b>\$12,222.29</b>

  
 JOSEPH H. HUDSON  
 Deputy Chief  
 Compensation and Tax Division

**ADMINISTRATIVE-INTERNAL USE ONLY**

SECRET

21 May 1975

**MEMORANDUM FOR: Office of Finance/C&TD**

**SUBJECT** : Verification of Contract Employee Service of David A. Phillips, current staff employee for period 19 August 1958 through 13 March 1960.

**REFERENCE** : Memorandum from Deputy Chief Comp & Tax Division subject earnings of David A. Phillips dated 13 May 1975

1. Based upon new information it has now been determined that subject served as an Agency contract employee during period 19 August 1958 through 13 March 1960, and that this period is creditable for both retirement and leave account category purposes. Civil Service Retirement deductions were not withheld during the period. Records of this office reflect subject was authorized compensation during referenced period at the rate of \$7,200 per annum, except that when he was outside of the United States he was paid at the rate of \$13,000 per annum. For times and amounts involved in change of rate see reference.

**2. Action required:**

(a) Office of Finance: Please post the above information to subjects retirement records.

(b) DDO/LA/Pers: Please advise subject of the contents of this memorandum.

(c) RAD/ROB: For your information and assistance in retirement processing.

7s/ Rogers C. Brooks

Rogers C. Brooks

Deputy Chief

Contract Personnel Division

**Distribution:**

Orig - Addressee

1 - DDO/LA/Pers

1 - RAD/ROB

1 - Subjects CPD file

1 - CPD Chrono file

DDA/OP/CPD: RCB;sp (21 May 1975)

E2IMPDEF

CL by: 063837

SECRET

SECRET

10 MAR 1975

MEMORANDUM FOR: Chief, TRB

SUBJECT : Verification of Contract Employee Service for Michael N. CHOADEN (P) Current Staff Employee

REFERENCE : CPD Memorandum of 30 June 1966 to Chief, TRB, Subject "Record of Contract Service for CHOADEN, Michael N.

1. Referent memorandum is revised in its entirety to reflect the following periods of full time contract employee service as being creditable service for both leave and Civil Service Retirement purposes.

<u>DATE</u>	<u>ACTION</u>	<u>PER ANNUM COMPENSATION</u>
4 March 1954	Contract employee	\$7,200
31 July 1954	Contract terminated	7,200
1 August 1954	Contract employee	8,360
31 March 1955	Contract terminated	8,360

2. Period of service 4 March 1954 through 31 December 1954 had in previous memorandum been declared creditable service for both leave and retirement purposes. It denied creditable retirement service for the period 1 January 1955 through 31 March 1955 because of a Federal statutory provision relating to periods covered by Social Security. The foregoing position was removed by P. L. 91-630 of 31 December 1970, thereby having the effect of rendering said service as creditable.

3. Action required:

- a. Office of Personnel/TRB: Please file this memorandum in subject's official personnel file folder.
- b. Office of Personnel/ROB: For your information.

SECRET

14-00000

**SECRET**

- 2 -

- c. Office of Finance/C&TD: Please post the above information to subject's retirement records.
- d. DDO/LA/Personnel: Please advise subject of the contents of this memorandum.

Rogers C. Brooks  
Deputy Chief  
Contract Personnel Division

Distribution:  
Orig - Addressee  
1 - CP/ROB  
1 - OF/C&TD  
1 - DDO/LA/Personnel  
1 - CPD Subject file  
1 - CPD Chrono  
OP/CPD/R.C.Brooks:jc (10 March 1975)

**SECRET**

S E C R E T

MEMO FOR: The File

SUBJECT: Michael W. CHOADEN (P), Verification of Contract Service

19 Oct 70

Subject, now a Staff Employee, asked Don DeFelice to see if any of his old contract time is creditable towards GLEBS retirement. Currently, subject is assigned PCS in VA field, but is currently in Hqtrs on TDY.

21 Oct 70:

Met with subject and discussed all aspects of his questions and his prior contractual service. Provided him with ~~some~~ information concerning his service, ~~and~~ that criteria CPD used in determining independent contractor service vs contract employee service, applicability of the "social security rule" precluding the use of ~~old~~ contract employee time under social security being creditable retirement time, etc. Also, provided subject with a sample of a memo which could be written to CPD requesting old independent contractor time be recategorized as contract employee time. Also indicated to subject we would help him draft an appropriate memo if he (subject) felt he had a good case. In general, from information provided by subject, it seemed that subject's old independent contractor time was not of a type that might lend itself to conversion to contract ~~and~~ employee time.

3 Dec 70: As of this date, JPD had heard nothing more from subject and it was therefore assumed that ~~for~~ subject had, ~~and~~ at least for the immediate moment, decided not to pursue the matter further.

Paul Wilson  
3 Dec 1970

Michael M. CHCADEN  
~~(Paul R. Wilson)~~

O/Personnel/Contract Personnel Div  
5F-69 Hqtrs.  
(Paul R. Wilson)

23 April 1970

OP/RAD - 205 Magazine Bldg.  
Attn: Adelo J. Sukowicz

1. Adele: Hope the following with help you:

- (a) Attached is our CPD file on loan. In it find a chrono of all of subject's contract service.
- (b) Information in our CPD memo of 30 June 66 is reaffirmed. However, note it did not cite subject's 1951/52/53 service, which service is cited in the O/Finance memo of 16 June 1966. This 1951/52/53 service is independent contractor service and not creditable for purposes of Civil Service Retirement.
- (c) Our CPD memo of 30 Jun 66 indicates subject ~~had~~ had a social security obligation for period 1 Jan 55 thru 31 Mar 55. Since this obligation came about retroactively in mid 1955, possibility exists that neither subject or the Agency made contributions to the Social Security System. If they were not made, it is possible for such to be made at this late date and if subject or WH Division is interested in looking into this, they should contact Rod Brooks of CPD.

Paul R. Wilson

UNCLASSIFIED  INTERNAL USE ONLY  CONFIDENTIAL  SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional) ~~XXXXXXXXXX~~ CHCADEN

FROM: WH Personnel 3D3102 6815 6 April 1970

TO: (Officer designation, room number, and building) DATE OFFICER'S INITIALS COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

NO.	TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS	COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)
		RECEIVED	FORWARDED		
1.	CP/RAD 205 Magazine ATTN: Adele J. Sukowicz		13		<p style="text-align: right;">CHCADEN</p> <p>Attached is Mr. <del>XXXXXX</del>'s official file and a dispatch from him in which he requests a computation of his time with the Agency for retirement purposes. It is a very complicated case. Good luck!</p> <p style="text-align: right;"><i>Ruth Sanford</i> Ruth Sanford WH Personnel</p>
2.					
3.					
4.					
5.					
6.	Chief, Contract Personnel Div 5 E 69 HRS				
7.					<p>1 to 6: On the basis of CPL's memo dated 30 June 1966 (copy attached) ruling on the creditability of Subject's contract service, ROB can reply to the attached dispatch. However, it is requested that CPL review HART for its factual content and advise ROB if the memo of 30 Jun 66 is reaffirmed.</p> <p>Your attention is invited to a discrepancy in identifying 1951 contract service. In the dispatch (para 5) Subject refers to himself as a "covert associate"; the Office of Finance (see memo dtd 16 Jun 66, copy attached) lists the time as "contract agent" service; and your memo of 30 Jun 66 lists the time as "contract employee" service.</p>
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					



604

<b>DISPATCH</b>		CLASSIFICATION <b>S E C R E T</b>	PROCESSING ACTION
TO	Chief, Western Hemisphere Division		MARKED FOR INDEXING
INFO.	Chief, Operational Services		NO INDEXING REQUIRED
FROM	Chief of Station, Rio de Janeiro		ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT	Request for Review of Retirement Status---Michael C. CHOADEN		
ACTION REQUIRED - REFERENCES			
<p>Action Required: See Paragraph 9 et all</p> <p>1. During his RVROCK career Michael C. CHOADEN has served as Contract Agent, Covert Associate, Staff Agent and Contract Employee. On one occasion CHOADEN resigned from RVROCK, became a Contract Agent, then returned as a Staff Employee. The purpose of this dispatch is to request a review of exactly what CHOADEN's status has been over the years, what must be done to repay retirement funds for any periods of creditable service not now covered, and to study the possibility that some periods of tenure might be converted from uncreditable to creditable status.</p> <p>2. CHOADEN served in the Air Force from February 1943 through October 1945, with total service of two years, eight months and 19 days.</p> <p>3. The dates of CHOADEN's first RVROCK service in Santiago, Chile, are very hazy to CHOADEN. He does recall that he was first recruited by the COS, but cannot recall if this was on a formal, salaried basis. At some time during 1950 or 1951, probably the latter, CHOADEN signed an RVROCK contract, for at least two years, possibly longer. The salary is remembered as US\$500 per month, and on one occasion this salary was paid in advance to allow CHOADEN to purchase printing equipment. Please check the contract covering this period and advise Rio (a) the duration of the contract and (b) if any provision for deductions (or future payment of) was made. If, as CHOADEN suspects, there were no deductions, even for Social Security, CHOADEN would appreciate Headquarters comment on the possibility that this period might be retroactively converted to creditable service status (after payments into retirement system, of course). In this connection it is suggested</p>			
Distribution:			
3 - Chief, WHD 2 - Chief, OPSER			
REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE	
	HBRT-7797	25 March 1970	
	CLASSIFICATION	MOS FILE NUMBER	
	S E C R E T		

that a discussion might be held with James G. COLLETT, who was COS in Santiago during most of that time. CHOADEN believes that COLLETT will confirm that CHOADEN demonstrated his intense interest in his RVROCK work by performing not only the work called for in his contract (mostly clandestine printing) but other chores as well. Example: during this period, or perhaps just after the expiration of CHOADEN's contract, CHOADEN, under Station guidance and instruction, approached and recruited a Communist Party agent. (It is understood that the agent is still reporting.) Another example: in March 1954, COS COLLETT approached CHOADEN and asked him if he would accept the Headquarters' request that he leave Chile, board an airplane for the U.S. and assist in an unidentified operation which would last "some months." That was the extent of the offer. CHOADEN accepted. This was despite the fact that he had no contract, and that he had to leave his family behind and to abandon a trip which had been planned through Europe. It is believed that this indicates that CHOADEN was pretty much "under RVROCK control" during this period. (Perhaps training records can assist in finding information on this Chilean period, as CHOADEN went to New York on one occasion for a six-week training course).

4. The next period of contract employment is also hazy. The operation in which CHOADEN was asked to participate turned out to be PBSUCCESS. Some sort of contract was drawn up, but CHOADEN does not recall if any deduction for retirement was made, nor of the terms of the contract. It is requested that this contract be reviewed and, should there have been no retirement credit, that it too be reviewed for possible conversion to creditable service. There is no question of CHOADEN "responding to RVROCK control" during this period. It was full time work, and most of it performed away from family---some of it in the jungle. About sixty days, CHOADEN recalls, was spent ~~in Project PBHISTORY~~, in Project PBHISTORY. CHOADEN was awarded an RVROCK decoration for his work during this period. *ABROAD.*


5. As the result of his participation in PBSUCCESS, CHOADEN was contracted as a Covert Associate from (about; this is a guess) October, 1954 until April of 1955. CHOADEN distinctly recalls that this contract called for retirement credit if chosen as a future option. (It is not impossible that this contract was made retroactive to cover CHOADEN's departure from Chile in March, 1954.) It would be appreciated if Rio would be advised of the exact duration and terms of this contract.

6. CHOADEN was a Staff Employee from 1 April 1955 until 13 July of 1958, when he resigned. Retirement payments for this period were returned to CHOADEN, and he understands that they must be repaid sometime before retirement to make the period creditable.

7. After resigning in 1953 CHOADEN went to Cuba and within a week signed a contract---as an independent operator and, to the best of CHOADEN's recollection, without any retirement benefits. Again, it is requested that this contract be reviewed with the view of possible conversion to creditable status.

8. On March 14, 1960 CHOADEN again became a Staff Employee, and has remained in that status.

9. Despite a rather long tenure with RVROCK CHOADEN now finds that much of his service is either not creditable, or is creditable and not paid. CHOADEN would like to set this house in order, and to begin having regular deductions from his salary begin building up his paid-up creditable retirement equities. Headquarters' assistance in arriving at this happy state would be appreciated. CHOADEN is especially interested in obtaining approval for conversion of the early contract days in Chile. It seems apparent that if repayment into the retirement system is to be initiated,

CONTINUATION OF DISPATCH	CLASSIFICATION S E C R E T	DISPATCH SYMBOL AND NUMBER HERT-7797
<p>it would be wiser to repay the early years first (so as to add more time more quickly with less payment). In any event, a Headquarters' review of the case would be appreciated.</p> <p style="text-align: right;"> Michael C. CHOADEN</p>		
FORM 8-64 1-67 53a USE PREVIOUS EDITION.	CLASSIFICATION S E C R E T	<input type="checkbox"/> CONTINUED PAGE NO. 3



Chief, Contract Personnel Division  
ATTN : Harry Ray Spink

16 June 1966

Compensation and Tax Division  
Office of Finance

Agency Service of ~~XXXXXXXXXXXXXXXXXXXX~~

The records of the Office of Finance show the following Agency service for Subject:

**Contract Agents:**

EOB 1 February 1951 @ \$600.00 P/A  
Term 29 February 1951 @ \$600.00 P/A

EOB 25 January 1952 @ \$1000.00 P/A  
Term 31 August 1953 @ \$6000.00 P/A

EOB 4 March 1954 @ \$7200.00 P/A  
Pay Inc. 1 August 1954 @ \$2360.00 P/A  
Term 31 March 1955 @ \$2360.00 P/A

**Staff Employees:**

Em. Appt. 1 April 1955 @ \$9600.00 P/A  
Res. 6 February 1956 @ \$10,320.00 P/A

**Staff Agent:**

Em. Appt. 7 February 1956 @ \$10,320.00 P/A  
PSI 7 October 1956 @ \$10,535.00 P/A  
Pay Raise 12 January 1958 @ \$11,555.00 P/A  
PSI 6 April 1958 @ \$11,835.00 P/A  
Res. 13 August 1958 @ \$11,835.00 P/A

**Contract Agent:**

EOB 19 August 1958 @ \$7,200.00 P/A  
Term 19 March 1960 @ \$7,200.00 P/A

**Staff Employees:**

Em. Appt. 14 March 1960 @ \$11,835.00 P/A  
Subject has been a Staff Employee since 14 March 1960.

JOSEPH L. HIGGINS  
Chief  
Agent Payroll Branch

STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE  
 AND DETERMINATION OF COMPETITIVE STATUS

**IMPORTANT:** The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I—EMPLOYEE'S STATEMENT							PART II—THIS COLUMN IS FOR PERSONNEL OFFICE USE			
1. NAME (Last, first, middle initial)				2. DATE OF BIRTH			9. RETENTION GROUP			
PHILLIPS, DAVID ATLEE				OCTOBER 31, 1927						
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.)							10. A. CEC STATUS <input type="checkbox"/> YES <input type="checkbox"/> NO B. TYPE OF PRESENT APPOINTMENT			
NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN	11. SERVICE		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY		YEAR	MONTH	DAY
CIA	1955	APRIL	1	1955	AUG	13	GS-14	3	4	13
4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE"										
BRANCH	FROM—			TO—			DISCHARGE (Hon. or dishon.?)			
	YEAR	MONTH	DAY	YEAR	MONTH	DAY				
ARMY AIR FORCE	1945	2	12	1945	10	31	HON.	2	8	19
5. TOTAL OF MORE THAN 6 MONTHS ABSENCE BY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							12. TOTAL SERVICE <u>6 3</u>			
6. NONCREDITABLE SERVICE (Leave purpose only):							13. NONCREDITABLE SERVICE (RIF purpose only):			
7. NONCREDITABLE SERVICE (RIF purpose only):							14. NONCREDITABLE SERVICE (RIF purpose only):			
8. PREEMPLOYMENT RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO							15. RETENTION RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
9. RETENTION RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO							16. EXPIRATION DATE OF RETENTION RIGHTS			
17. EXPIRATION DATE OF RETENTION RIGHTS										

**NOTE:**

This SF-144 was completed by subject on 14 March 1960 on occasion of entering on duty as GS-14 an Agency Staff Employee.

Note that he did not claim any of his prior contract service.

Original of this SF-144 on file in subject's Staff Employee file.

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

14 MARCH 1960  
 (DATE)

*David A. Phillips*  
 (SIGNATURE)

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_ 1960 at WASHINGTON, D.C.  
 (MONTH) (DAY) (STATE)

SEAL

*William Capriotti*  
 (SIGNATURE)

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

INSTRUCTIONS: File this form on the permanent side of the employee's official personnel folder immediately before or after the personnel action involved.

SECRET

14 March 1960

MEMORANDUM FOR: Chief, Contract Personnel Division

SUBJECT : Termination of Michael CHOADEN Contract

It is requested that the contract of Michael M. Choaden be terminated as of close of business 13 March 1960 in view of his appointment to staff employee status effective 14 March 1960

J. C. King  
Chief, Western Hemisphere Division

SECRET

Mr. Michael M. Choaden

Dear Mr. Choaden:

Reference is made to your contract with the United States Government, as represented by the Contracting Officer, effective 19 August 1958, as amended.

Effective 16 February 1960, said contract, as amended, is further amended by adding after paragraph seven (7), entitled "Travel and Operational Expenses," the following paragraph:

"8. Return Travel. Upon the successful completion of your services under this agreement you will be advanced or reimbursed funds for authorized travel and transportation expenses for you, your dependents and your household effects from Havana, Cuba to the Washington, D.C. area, including per diem in lieu of subsistence in the course of such travel. Such funds will be subject to payment and accounting in conformance with applicable Government regulations."

All other terms and conditions of the contract, as amended, remain in full force and effect.

UNITED STATES GOVERNMENT

BY \_\_\_\_\_

Contracting Officer

Encl - cc - 19 Feb 60  
WH/PP Amourille x  
cc Robert Rayne  
C.A.



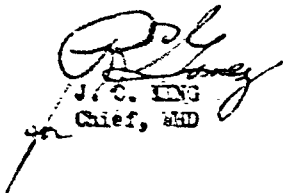
SECRET

16 February 1960

MEMORANDUM FOR: Chief, Contract Personnel Division

SUBJECT: Amendment to Contract - Michael M. CHOADEN

It is requested that Subject's contract dated 19 August 1958, as amended, be further amended to authorize return travel from Havana, Cuba, to Washington, D. C., for Subject and his dependents at Government expense. It is also requested that the amendment authorize shipment of Mr. CHOADEN's household effects from Havana, Cuba, to Washington, D. C., at Government expense.

  
J. C. KING  
Chief, SPD

SECRET



SECRET

18 August 1959

MEMORANDUM FOR: Chief, Contract Personnel Division  
 Attention: Mr. D. H. Letcher

FROM : Acting Chief, WHD

SUBJECT : Renewal of Contract of Michael M. CHOADEN

It is hereby requested that the contract of Michael M. CHOADEN, effective 19 August 1958 and amended, be renewed for one (1) year effective 19 August 1959.

*R. E. Gomez*

R. E. GOMEZ  
 Acting Chief, Western Hemisphere Division

SECRET

SECRET

Mr. Michael M. Choaden

Dear Mr. Choaden:

Reference is made to your contract with the United States Government, as represented by the Contracting Officer, effective 19 August 1958.

Effective 19 August 1958, said contract is amended in the following manner:

(a) The first sentence of paragraph one (1), entitled "Compensation," is deleted and in lieu thereof the following sentence is substituted:

"In full consideration for the purchase of such information and services you will be compensated in an amount calculated at the rate of \$7200 per annum except that for those periods of time during which you are performing services necessitating certain specialized professional skills on a full time basis outside of the country of your present permanent assignment, you will be compensated at the rate of \$13,000 per annum."

(b) The following paragraph is added after paragraph six (6), entitled "Term":

"7. Travel and Operational Expenses. While performing those tasks for which you will be compensated at the rate of \$13,000 per annum, as set forth in paragraph one (1) above, you will be advanced or reimbursed funds for necessary expenses incurred in connection with such operational travel as may be directed or authorized by the Government. This may include per diem in lieu of subsistence in the course of such travel and while on temporary duty away from your permanent post of assignment overseas. In addition, you will be advanced or reimbursed funds for necessary operational expenses as specifically approved by the Government. Payment and accounting for the items set forth herein will be in conformance with applicable Government regulations."

All other terms and conditions of the contract remain in full force and effect.

You will please indicate your approval by signing in the space provided below.

UNITED STATES GOVERNMENT

BY \_\_\_\_\_  
Contracting Officer

ACCEPTED:

\_\_\_\_\_  
Michael M. Choaden

WITNESS: \_\_\_\_\_

APPROVED:

6/20/58 29 Sep 1958  
21 2/11/1958 (1958)

SECRET

17 September 1958

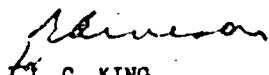
MEMORANDUM FOR : Chief, Contract Personnel Division  
Attention: Mr. D.H. Letcher

FROM : Chief, Western Hemisphere Division

SUBJECT : Amendment To Contract of Michael M. CHOADEN

1. It is hereby requested that the contract of Michael M. CHOADEN be amended to provide that he be compensated in an amount calculated at the rate of \$13,000. per annum while travelling outside Cuba at the request of the United States Government and engaged full time in the work of the United States Government. It is further requested that while so travelling outside Cuba, CHOADEN be paid per diem at the standard United States Government rate for the area of travel or temporary residence.

2. CHOADEN possesses certain specialized professional skills which are in temporary, but urgent demand in a country (other than Cuba) within the jurisdiction of the Western Hemisphere Division. The contract amendment outlined in paragraph 1. (above) is being requested so as to provide a means by which CHOADEN's skills might be made available to meet this current need for them.

  
J. C. KING  
Chief, Western Hemisphere Division

SECRET

Mr. Michael M. Choaden

Dear Mr. Choaden:

The United States Government, as represented by the Contracting Officer, hereby contracts with you as an independent contractor for the purchase of certain information and related services of a confidential nature under the following terms and conditions:

1. Compensation. In full consideration for the purchase of such information and services, you will be compensated in an amount calculated at the rate of \$7200 per annum. Payments will be made as directed by you in writing in a manner acceptable to the Government. No taxes will be withheld therefrom but it will be your responsibility to report such income under existing Federal income tax laws and regulations. A Form No. 1099 prepared in a manner to conceal the true source of such income will be furnished you by the Government in order that said responsibility may be properly fulfilled. Income received pursuant to this contract is not subject to relief from Federal income taxes on the basis of foreign residence.

2. Status. You are not an employee of the United States Government under this agreement and are not entitled to any benefits normally incident to an employee status.

3. Secrecy. You will be required to keep forever secret this contract and all information which you may obtain by reason hereof (unless released in writing by the Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1943, as amended, and other applicable laws and regulations.

4. Instructions. Instructions received by you from the Government in briefing, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

5. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government.

6. Term. This contract is effective as of 15 August 1958, and shall continue thereafter for a period of one (1) year unless sooner terminated either:

(a) By fifteen (15) days' actual notice by either party hereto, or

(b) Without prior notice by the Government in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

Subject to the availability of appropriations, this agreement may be extended upon notice from the Government. Termination of this agreement will not release you from the obligations of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY \_\_\_\_\_  
Contracting Officer

ACCEPTED:

\_\_\_\_\_  
Michael M. Choudien

WITNESS: \_\_\_\_\_

APPROVED:

\_\_\_\_\_

*L.P.M./uc/11 Sept 58*

SECRET

CONTRACT INFORMATION AND CHECK LIST		OFFICE	DIVISION
INSTRUCTIONS: Complete all items, inserting "N.A." where items are not applicable. Forward original and one copy for preparation of contract.		Robert Reynolds	WHD
TELEPHONE EXTENSION		DATE	
2056		13 August 1958	
SECTION I GENERAL			
1. NAME <input checked="" type="checkbox"/> STUDY <input type="checkbox"/> TRUE	2A. PROJECT	3. ASSIGNMENT NO.	4. SLOT NO.
Michael M. Choaden	Amourette-Z (DPTO)	8-7545-01-500	N. A.
	2B. PERMANENT STATION		
	Habana		
5. PREVIOUS CIA PSEUDONYM OR ALIASES	6. INDIVIDUAL IS PRESENTLY ENGAGED, OR HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include salary)		
Paul D. Langevin	Contact Agent, 1952-1954 Staff Agent, 1957-1958 Staff Employee, 1955-1957 (\$10,320) GS-14		
7. SECURITY CLEARANCE (Type and date)	8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Top Secret Clearance EOD/CIA 1 April 1955			
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	10. PROPOSED CATEGORY (Contract agent, contract employee, etc.)		
	Contract Agent		
SECTION II PERSONAL DATA			
11. CITIZENSHIP	12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	13. AGE	14. DATE OF BIRTH (Month, day, year)
U. S.		35	31 October 1922
15. LEGAL RESIDENCE (City and state or country)		16. CURRENT RESIDENCE (City and state or country)	
4804 Washburn, Fort Worth, Texas		Habana, Cuba	
17. MARITAL STATUS (Check as appropriate)			
<input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED			
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE:		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP:	
Five: Wife and four children.			
SECTION III U.S. MILITARY STATUS			
20. RESERVE	21. VETERAN	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
N. A.	World War II	N. A.	
23. BRANCH OF SERVICE	24. RANK OR GRADE	25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Air Force	S/Sgt.		
SECTION IV COMPENSATION			
27. BASIC SALARY	28. POST DIFFERENTIAL	29. COVER (Breakdown, if any)	30. TAXES TO BE WITHHELD BY COVER <input type="checkbox"/> COVER ISSUE 1099 IN <input type="checkbox"/> CIA NAME OF NATIONAL <input type="checkbox"/> NOT WITHHELD PAYOR.
\$7200 p. a.	N. A.	H. A.	
SECTION V ALLOWANCES (NORVALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)			
31. QUARTERS	32. POST	33. OTHER	
N. A.	N. A.	N. A.	
34. COVER (Breakdown, if any)			
N. A.			
SECTION VI TRAVEL			
35. TYPES <input type="checkbox"/> PCS <input type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL			36. WITH DEPENDENTS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
H. A.			
37. HOUSEHOLD EFFECTS TO BE SHIPPED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	38. PERSONAL VEHICLE TO BE SHIPPED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH			
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND REGULATIONS			
N. A.			
SECTION VII OPERATIONAL EXPENSES			
42. PURCHASE OF INFORMATION	43. ENTERTAINMENT	44. OTHER	





7 February 1955

MEMORANDUM FOR: CHIEF, SCAPS

VIA : Contract Approving Officer, PP Staff

SUBJECT : Termination of Contract.

It is requested that the contract on Paul E. LANGEVIN  
be terminated effective 1 April 1955.

**SIGNED**

JEANNE K. LETELLIER  
Chief of Administration  
Psychological and Paramilitary  
Operations Staff

APPROVED

PP/CONTRACT APPROVING OFFICER

SECRET

19 October 1954

**MEMORANDUM FOR:** Chief, Psychological and Paramilitary  
Operations Staff

**SUBJECT:** Paul D. Langevin (P) - Covert Associate

**REFERENCE:** Memo to Special Contracting Officer, CIA,  
dated 12 October 1954, Same Subject

Pending publication of a regulation on Employee Services, the Office of Personnel issued N 20-660-19, dated 29 July 1954 to be effective 1 August 1954. This Notice announced the availability of two life insurance and two health insurance programs sponsored by the Agency under the name of "Government Employees Health Association, Inc." Eligibility for these life and health insurance programs has been limited to those categories of personnel expressly stipulated in the Notice. Nowhere are Covert Associates listed as an eligible group, although in fact a Covert Associate may be an employee of the U. S. Government. Until the notice or the proposed regulation is changed, this Staff is precluded from inserting in contracts similar to that of subject individual's any reference to health and life insurance programs normally available to staff employees.

JOHN L. BISCHOFF  
Special Contracting Officer

DHL/pr  
Orig & 1 Addressee  
1 cc Employee Services Div. (attn. Joe Evans)  
1 cc subject file \_\_\_\_\_  
1 cc chrono  
1 cc corres w/PPStaff file

SECRET

12 OCT 1954

SECRET

12 Oct 1954

MEMORANDUM FOR: SPECIAL CONTRACTING OFFICER, CIA  
SUBJECT : Paul D. Langerin (P)--Foreign Associate

It is requested that the subject's contract effective 1 August 1954 be amended to permit the subject to apply for Hospitalization and Life Insurance with the Agency.

*John D. Baker*  
JOHN D. BAKER  
Chief

Psychological and Paramilitary Operations Staff

APPROVE: *[Signature]*  
SPECIAL CONTRACTING OFFICER

SECRET

MEMORANDUM FOR: Mr. Kermit Roosevelt

ATTENTION : Mr. John Baker

SUBJECT : Mr. Paul D. Langevin; Employment as CIA  
Staff Officer

1. To those of us at Headquarters who have followed closely the work of Mr. Langevin in connection with PBSUCCESS, it is completely evident that he made one of the major and most outstanding contributions to this Operation and that he has demonstrated himself to be exceptionally qualified in the field of political and psychological operations (covert). I have just been informed by Messrs. Barnes and Langevin that the latter who has heretofore been employed in the capacity of a Contract Agent, desires to become more closely associated with the Agency and would like to be employed as a regular staff officer. I am very much in favor of following up on this opportunity, and I have good reason to believe that the Director likewise is specifically interested.

2. There are certain aspects of this case which appear to require special handling and tailoring -- none of which presents any difficulties as I see it -- but, on the contrary, would tie in very neatly with both the near term and longer range aspects of the employment of Mr. Langevin. These aspects are as follows:

(a) Mr. Langevin desires to begin his term of employment by the Agency with a period of service at Headquarters. (He has spent many years in Latin America, principally in Chile where he has owned and still owns a newspaper, and, in my judgment, it would be mutually advantageous to the Agency and to Mr. Langevin for him to spend not less than a year as a member of the Headquarters organization.)

(b) Mr. Langevin has for some years in the past been giving an annual series of lectures in various Latin American capitals. These lectures have been arranged by an agent of his in New York and his audiences have consisted of business and professional groups and women's organizations. The general subject matter of his lectures has included talks on the threat of international Communism to Latin America. Mr. Langevin would desire, if it can be worked out, to be permitted to continue to deliver lectures of this kind in the future and is at the present time

SECRET

contemplating a series of lectures on Latin America to be given in various cities within the United States.

(c) Mr. Langevin would be ready and able to accept a field assignment in South America following the conclusion of the period of Headquarters' duty referred to.

3. As already indicated, it seems to me that there are no serious problems involved in any of the foregoing and that the material can be readily cut to fit the pattern. It is the recommendation of Mr. Barnes in which I concur, that Mr. Langevin be assigned to the PP Staff during his tour of duty here. He could in this capacity work very closely with WH Division, but it seems to Tracy and myself that he can contribute importantly to the work of the PP Staff and in the process broaden himself. As regards the matter of the lectures, I would recommend that arrangements be made to permit and even encourage him to continue these since it seems to me that they would fit in very well with his general PP assignment -- assuming, of course, that his Headquarters and field cover are properly designed and maintained. The Headquarters cover problem is not a substantial one and as far as the field is concerned if Mr. Langevin were to go under non-official cover of the right kind this also should present no problem. There is a ready-made cover in the field and in a critically important country by virtue of his ownership -- for some six years -- of a newspaper in Santiago. It would not be incompatible with his resumption of his position as owner and editor of the Santiago newspaper to work in an annual series of lectures either in Latin America or in the United States. There is only one further point involved in connection with the lectures: Because of Mr. Langevin's intimate association with many of the details of PBSUCCESS and also in light of the standing rules of the Agency, it would be desirable for him to submit at least in general outlines, and preferably textually to the extent feasible, the substance of his proposed lectures. He is anxious to do this in connection with the forthcoming lectures -- for his own piece of mind since he would like to be double-checked on the things which he should say and those which he should not say with respect to the Guatemalan development. He could send the material to Mr. Holcomb or myself -- or to you -- and after it has been checked over by one of us, we could arrange to submit it to the Office of Security for such further checking as may be desirable.

4. Mr. Langevin proposes to take a leave of absence of a month or six weeks, starting within the next few days. I believe it would be desirable for Mr. Baker, to start the necessary personnel and other administrative actions, including any additional security clearances which may

14-00000

which may be necessary, etc., looking toward having everything in line for Mr. Langevin to come aboard officially at the conclusion of this leave.

5. His home address is: 811 Hollywood Blvd.  
Hollywood, Florida

**FRANK G. WISNER**  
Deputy Director (PLANS)

ct" COPS -- DD/P  
CWH

SECRET

Date:

Mr. Paul D. Langevin

Dear Mr. Langevin:

Reference is made to your contract effective 4 March 1954 with the United States Government, as represented by the Central Intelligence Agency, for the submission of certain information and related services of a confidential nature.

Effective <sup>31 July</sup>~~14 September~~ 1954, said contract is terminated and in lieu thereof the following contract is substituted:

The United States Government, as represented by the Central Intelligence Agency, hereby contracts with you as a Covert Associate for the submission of certain information and related services of a confidential nature under the following terms and conditions:

1. Compensation. In full consideration for the submission of certain information and related services of a confidential nature, you will be compensated at the rate of \$8360 per annum. In addition, you will be entitled to authorized overtime in excess of 40 working hours per week at the rate of \$1.51 per hour. Payments will be made as directed by you in writing in a manner acceptable to CIA. No taxes will be withheld from any sums paid to you hereunder directly by CIA, but it will be your responsibility to report such sums in accordance with applicable Federal income tax laws and regulations.

2. Travel. You will be advanced or reimbursed funds for necessary expenses incurred in connection with such travel as may be directed or authorized by CIA. This will include per diem in lieu of subsistence in the course of such travel while away from Washington, D. C., and while on temporary duty overseas. You will be required to account for such expenses in accordance with applicable CIA regulations or those of your cover facility, whichever is directed by CIA.

3. Operational Expenses. You will be advanced or reimbursed funds for necessary operational expenses including, but not limited to, entertainment and the purchase of information as specifically approved by CIA. Such funds will be subject to accounting in compliance with CIA regulations.

4. Benefits. (a) You will be entitled to death and disability benefits equal to those authorized under the Federal Employees' Compensation Act, as amended. Claims by you, your heirs, or legal representatives under this paragraph will be processed by CIA in accordance with its procedures in such manner as not to impair security.

(b) You will be entitled to sick and annual leave equal to and subject to the same rules and regulations applicable to CIA employees. Such leave may only be taken at times and places approved in advance by appropriate representatives of CIA.

(c) Civil Service Retirement deductions will not be made from your wages since your employment hereunder is not a covered employment under the Civil Service Retirement Act. However, your status is that of an

SECRET



employee of the United States Government paid from Government funds. Therefore, if in the future you are employed by the United States Government in a status covered by the Civil Service Retirement Act, periods of service under this contract will be available as creditable service for retirement purposes in conformance with Civil Service Regulations.

5. Cover. It is anticipated that you will undertake certain cover employment in the course of your performance under this agreement. It is expressly understood and agreed that any and all documents which you may execute in the course of such cover employment are subordinate to this agreement and any contradiction in terms which may in any way amplify, extend or restrict your rights and/or obligations hereunder shall be resolved by this agreement which shall always be dominant.

6. Leave Without Pay. During the term of this contract it is anticipated that you will undertake contracted speaking engagements. For such periods of time necessary to fulfill these commitments you will be considered on leave without pay status under the terms of this agreement.

7. Execution of Documents. If, in the performance of your cover service, you assume the custody of government funds or take title of record to property of any nature whatsoever and wherever situate, which property has in fact been purchased with monies of the U. S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either express or constructive, and you agree to execute whatever documents may be required by CIA to evidence this relationship.

8. Secrecy. You will be required to keep forever secret this contract and all information which you may obtain by reason hereof (unless released in writing by CIA from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1948, as amended, and other applicable laws and regulations.

9. Instructions. Instructions received by you from CIA in briefing, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

10. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government.

11. Term. This contract is effective as of 1 August 1954, and shall continue thereafter for a period of one (1) year unless sooner terminated by CIA either:

(a) By fifteen (15) days' actual notice to you from CIA, or

(b) Without prior notice, in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

*Remit of 2d page  
(3 Aug 54)*

SECRET

employee of the United States Government paid from Government funds. Therefore, if in the future you are employed by the United States Government in a status covered by the Civil Service Retirement Act, periods of service under this contract will be available as creditable service for retirement purposes in conformance with Civil Service Regulations.

5. Cover. It is anticipated that you will undertake certain cover employment in the course of your performance under this agreement. It is expressly understood and agreed that any and all documents which you may execute in the course of such cover employment are subordinate to this agreement and any contradiction in terms which may in any way amplify, extend or restrict your rights and/or obligations hereunder shall be resolved by this agreement which shall always be dominant.

6. Offset. Any sums or substantially similar benefits or allowances received from your cover facility will be used to offset those due under this contract by CIA. Sums, similar benefits or allowances thus received through your cover facility are acknowledged and agreed to be payment by CIA within the provisions of this contract. You will report all sums or substantially similar benefits received from your cover facility at least every four (4) months during the term of this contract.

7. Execution of Documents. If, in the performance of your cover service, you assume the custody of government funds or take title of record to property of any nature whatsoever and wherever situate, which property has in fact been purchased with monies of the U. S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either express or constructive, and you agree to execute whatever documents may be required by CIA to evidence this relationship.

8. Secrecy. You will be required to keep forever secret this contract and all information which you may obtain by reason hereof (unless released in writing by CIA from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1948, as amended, and other applicable laws and regulations.

9. Instructions. Instructions received by you from CIA in briefing, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

10. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government.

11. Term. This contract is effective as of 15 September 1954, and shall continue thereafter for a period of one (1) year unless sooner terminated by CIA either:

(a) By fifteen (15) days' actual notice to you from CIA, or

(b) Without prior notice, in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

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**SECRET**

Subject to the availability of appropriations, this agreement may be renewed for successive periods of one year each upon notice from CIA accepted by you. Termination of this agreement will not release you from the obligations of any security oath you may be required to take.

UNITED STATES OF AMERICA

BY \_\_\_\_\_  
Special Contracting Officer

ACCEPTED:

\_\_\_\_\_  
Paul D. Langevin

WITNESS: \_\_\_\_\_

APPROVED:  
  
\_\_\_\_\_

*Disc 2617  
2 AUG 54*

*Sp. Cont.*

**SECRET**

Mr. Paul D. Langevin

Dear Mr. Langevin:

The United States Government, as represented by the Central Intelligence Agency, hereby contracts with you for the submission of certain information and related services of a confidential nature under the following terms and conditions:

1. Compensation. In full consideration for the submission of such information and services, you will be paid an amount calculated at the rate of \$7200.00 per annum. Payments will be made as directed by you in writing in a manner acceptable to CIA. No taxes will be withheld from this amount, and it will be your responsibility to report such income under existing Federal income tax laws and regulations.

2. Travel. (a) You will be advanced or reimbursed funds for necessary expenses incurred in connection with such travel as is directed or authorized by CIA. This will include per diem in lieu of subsistence in the course of such travel and while on a temporary duty status away from your permanent station. All travel, transportation and per diem provided for under this paragraph must be properly authorized, and expenses incurred hereunder are subject to payment and accounting in compliance with CIA regulations.

(b) Upon the successful completion of your services under this contract or any renewal thereof, you will be advanced or reimbursed funds for return travel and transportation expenses to your permanent residence in Santiago, Chile

3. Operational Expenses. You will be advanced or reimbursed funds for necessary operational expenses including, but not limited to entertainment and the purchase of information as specifically approved by CIA. Such funds will be subject to accounting in compliance with CIA regulations.

4. Benefits. (a) You will be entitled to death and disability benefits equal to those authorized under the Federal Employees' Compensation Act, as amended. Claims by you, your heirs, or legal representatives under this paragraph will be processed by CIA in accordance with its procedures in such manner as not to impair security.

(b) You will be entitled to continuance of pay and allowances in a manner similar to that set forth in the Missing Persons Act (50 U. S. C. A., App. 1001-1015).

(c) You will be entitled to fourteen (14) calendar days' leave per contract year. Such leave may be accrued during the term of this contract or any renewal hereof except that payment in lieu of unused leave will not be authorized. Such leave may only be taken at times and places approved in advance by appropriate representatives of CIA.

5. Execution of Documents. If, in the performance of your cover service, you assume the custody of government funds or take title of record to property of any nature whatsoever and wherever situated, which property has in fact been purchased with monies of the U. S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either

express or constructive, and you agree to execute whatever documents may be required by CIA to evidence this relationship.

6. Status. You are not an employee of the United States Government under this agreement and are not entitled to any benefits normally incident to an employee status, except as specifically enumerated herein.

7. Instructions. Instructions received by you from CIA in briefing, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

8. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government.

9. Secrecy. You will be required to keep forever secret this contract and all information which you may obtain by reason hereof (unless released in writing by CIA from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the espionage laws dated 25 June 1948, as amended, and other applicable laws and regulations.

10. Term. This contract is effective as of 4 March 1954, and shall continue thereafter for a period of two (2) years, unless sooner terminated by CIA either:

- (a) By thirty (30) days' actual notice to you from CIA, or
- (b) Without prior notice, in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

Subject to the availability of appropriations, this agreement may be renewed for successive periods of one year each upon notice from CIA accepted by you. In the event of voluntary termination on your part or termination for cause by CIA prior to the expiration of this agreement or any renewal thereof, you will not be entitled to return travel and transportation expenses to Santiago, Chile. Termination of this agreement will not release you from the obligations of any security oath you may be required to take.

UNITED STATES OF AMERICA

BY \_\_\_\_\_  
Contracting Officer

JW/PA 4 May 54  
Contracting Officer

ACCEPTED:

\_\_\_\_\_  
Paul D. Langevin

APPROVED:

SECRET  
Security Information

13 June 1952

MEMORANDUM FOR: Record

SUBJECT: PBCROVEL Amendment #1

1. This date copy number four of subject project has been forwarded to Mr. William Rowland for approval in view of the fact that the original and copies number two and three have been temporarily misplaced.
2. As amendment number one to PBCROVEL covers no substantive operations it has not been coordinated with Security and Cover.
3. It is requested that approval of subject project amendment be given as soon as possible in view of the urgency of action as stated in the project itself.

HOMER BRYETT, Jr.  
WH/Project Coordinator

WJD/HB/jc

Distribution

Orig: CO/CO

cc: Special Contracting Officer (Mr. J.L. Bischoff)  
CM (Mr. Ernest W. Pittman)  
Chief, Branch I  
Project File PBCROVEL WHD/P&O  
Chrono P&O

SECRET  
Security Information

28 May 1952

MEMORANDUM FOR: AD/CO  
ATTENTION: Mr. William Rowland  
SUBJECT: Project APPROVAL, Amendment No. 1

1. Forwarded herewith are the original and two copies of subject amendment plus an extra copy of GPC Form 404a.

2. It is respectfully requested that approval of subject amendment be expedited as the Project Financial Data, Form 404a, indicates that payment of eight thousand (\$8,000.00) dollars to PA L. D. LANGEVIN must be made on or about 20 June 1952.

3. Subparagraph six of the Proposal indicates that as a prerequisite to issuance of a loan to LANGEVIN the latter will be required to submit a complete narrative inventory of all machinery and equipment involved in the loan transaction, its physical existence in his custody, his title to the property, and an approximate evaluation of its worth (as determined by WED station personnel). WED will be prepared to do this shortly after Amendment No. 1 is approved and the necessary funds are available for payment.

4. Subparagraph five of the Proposal indicates the details of the loan contract and selection of the appropriate legal instrument to secure a lien on the machinery and equipment will be arrived at through joint agreement of WED, CCC and the Legal Division. These financial details will be arranged and sent to approval of the amendment in question and will comprise the financial plan governing the expenditure of the funds requested.

J. C. KING  
GSH

WHD/JCY/BBH/NLC/EB/jc

Distribution

Orig: GPC/CO

cc: Special Contracting Officer (Mr. J. L. Paschoff)  
CH (Mr. Ernest W. Pittman) ✓  
Chief, Branch I  
Project File APPROVAL WHD/BBH  
Chrono 430/840