

"Diff Files" for NARA 2025 Documents Release JFK Assassination Records

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github.com/vslavik/diff-pdf
opencv.org

This file highlights **differences**
between the 2025 release, and previous releases.

Red: Newly revealed in 2025.
Blue: Present in earlier releases, but not in 2025.
Black: Unchanged between versions.

For Original Documents visit:
archives.gov/research/jfk/release-2025

Notes:

Black text on a blue background indicates content
that was previously redacted using black ink.

I did my best to be accurate in revealing what is new,
but please confirm with the original sources
where accuracy is essential.

Created by: x.com/hlywdufo

JFKdiffs.com

Personnel Actions
After Mexico City Assignment

SECRET
(When Filled In)

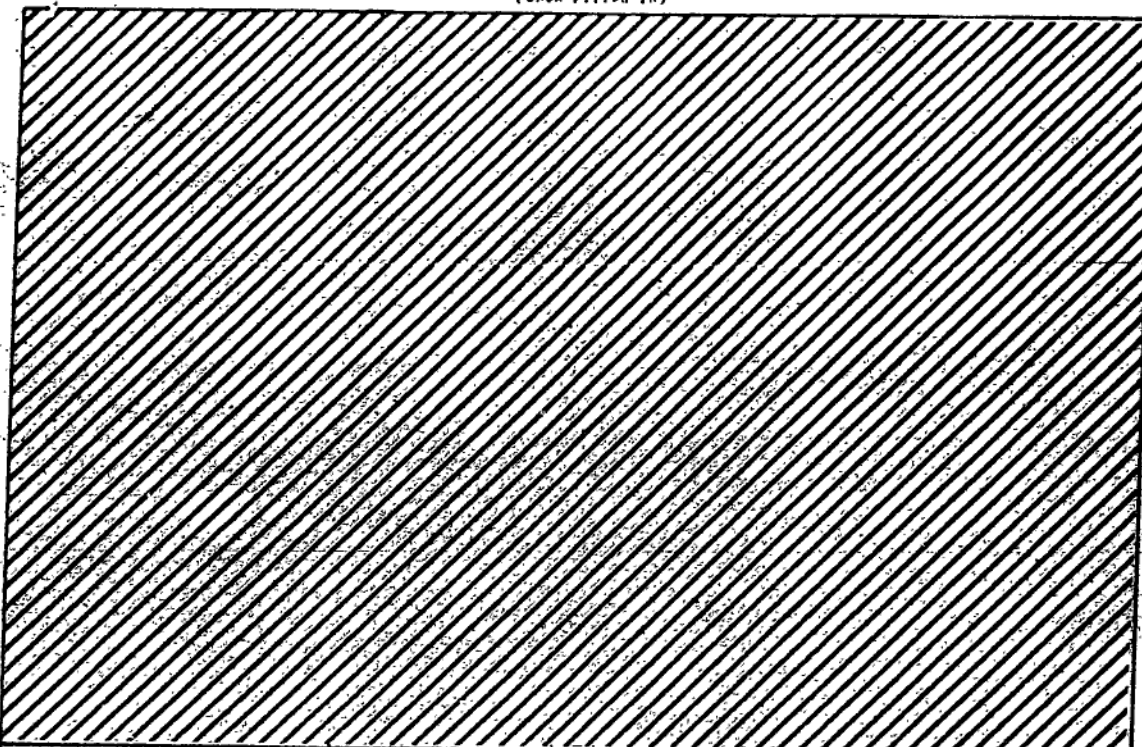
REQUEST FOR PERSONNEL ACTION				DATE PREPARED 11 SEPTEMBER 1963	
1. SERIAL NUMBER 009274		2. NAME (Last-First-Middle) CHARLES F. R.			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH 09 DAY 15 YEAR 63		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V XX V TO CF CF TO CF		7. COST CENTER NO. CHARGE-ABLE L135-5700-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3 MEXICO, MEXICO STATION CITY			10. LOCATION OF OFFICIAL STATION MEXICO, MEXICO		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 418		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12	
17. SALARY OR RATE 9290					
18. REMARKS FROM: DDP/WH/400/MEXICO STATION Recorded by CSPD <i>Lhr</i>					
18a. SIGNATURE OF REQUESTING OFFICIAL <i>Robert D. Cashman</i> ROBERT D. CASHMAN, C/WH/PERS			DATE SIGNED 9/12/63		18b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Dwight M. Collins</i> Dwight M. Collins
DATE SIGNED 13 Sep 63					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC 51400 ALPHABETIC WH	22. STATION CODE 45075	23. INTEREST CODE 3	24. DATE OF BIRTH MO. 01 DA. 06 YR. 12
25. DATE OF DEATH MO. DA. YR.	26. DATE OF DEATH MO. DA. YR.	27. DATE OF DEATH MO. DA. YR.	28. DATE OF DEATH MO. DA. YR.	29. DATE OF DEATH MO. DA. YR.	30. DATE OF DEATH MO. DA. YR.
31. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE		32. SEPARATION DATA CODE		33. SECURITY REQ. NO.	
34. VET. PREFERENCE 0 - NONE 1 - 5 YR. 2 - 10 YR.		35. SERV. COMP. DATE		36. LONG. COMP. DATE	
37. CAREER CATALOGY CODE		38. FEELI / HEALTH INSURANCE 0 - NONE 1 - YES		39. SOCIAL SECURITY NO.	
40. PREVIOUS GOVERNMENT SERVICE DATA 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		41. STATE CAT CODE		42. FEDERAL TAX DATA FORM EXECUTED 1 - YES 2 - NO	
43. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO		45. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO	
45. POSITION CONTROL CERTIFICATION <i>W. Kearney</i> 9/18/63			46. O.P. APPROVAL <i>Robert B. Logan</i> 17 Sep 63		

SECRET
(When Filled In)

776

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 17 JULY 1963	
1. SERIAL NUMBER 009274		2. NAME (Last-First-Middle) CARTY, F R.			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 09 63		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V XX CF TO CF		7. COST CENTER NO. CHARGEABLE 4135-5700-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3 MEXICO, MEXICO STATION			10. LOCATION OF OFFICE STATION City MEXICO, MEXICO		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 400		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 2	
17. SALARY OR RATE 9790					
18. REMARKS FROM: DDP/FE/2120/BANGKOK STATION/OPERATIONS BRANCH <i>Tracy 27</i> 1 COPY TO FINANCE DIVISION AND OFFICE OF SECURITY Recorded by CSPD EJP					
18A. SIGNATURE OF AUTHORIZING OFFICIAL <i>Robert D. Cashman</i> ROBERT D. CASHMAN, C/WH/PERS			DATE SIGNED 7/18/63		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Jim Collins</i>
DATE SIGNED 23 July 63					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 64702 WH	22. STATION CODE 45015	23. INFO OFF CODE	24. A/G/ST CODE 3
25. DATE OF BIRTH MO. DA. YR. 01 10 12		26. DATE OF DEATH MO. DA. YR.		27. DATE OF LEI MO. DA. YR.	
28. DATE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE 1 - CSC 2 - FICA 3 - NONE		30. SEPARATION DATA CODE TYPE MO. DA. YR.	
31. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE		32. CORRECTIVE/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REG. NO.	
34. SEC. PREFERENCE CODE 0 - NONE 1 - 5 BY 2 - 10 BY		35. LONG. COMP. DATE MO. DA. YR.		36. CAREER CATEGORY CODE 0 - NONE 1 - YES 2 - NO	
37. HEALTH INSURANCE CODE 0 - NONE 1 - YES 2 - NO		38. SOCIAL SECURITY NO.		39. STATE TAX DATA CODE 0 - NONE 1 - YES 2 - NO	
40. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		41. LEAVE CAT. CODE		42. FEDERAL TAX DATA CODE 0 - NONE 1 - YES 2 - NO	
43. STATE TAX DATA CODE 0 - NONE 1 - YES 2 - NO		44. STATE TAX DATA CODE 0 - NONE 1 - YES 2 - NO		45. STATE TAX DATA CODE 0 - NONE 1 - YES 2 - NO	
46. POSITION CONTROL CERTIFICATION <i>W. Keenan 07/25/63</i>			47. O.P. APPROVAL <i>Joseph B. Lagare</i>		
DATE APPROVED 22 July 63					

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle)

Karty, Florian

NAME AND RELATIONSHIP OF DEPENDENT*

Wife - German

CLAIM NUMBER

63-087

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 23 Nov 62. Ruptured aorta

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE
3 MAY 1963

SIGNATURE OF OSD REPRESENTATIVE

B. De Felice

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

Personnel Actions
prior to Mexico City
Assignment

SECRET

REPRODUCTION MASTERS

BIOGRAPHIC PROFILE

H a n d l e W i t h C a r e

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(When Filled In)

NOTICE OF CREDITABLE SERVICE

[FOR LEAVE PURPOSES]

PREPARE IN ORIGINAL FROM STANDARD FORM NO. 344 AND FORWARD TO FINANCE OFFICE.

NAME (Last, First, Middle)

OFFICE (and Division)

DDP/WH

SERVICE COMPUTATION DATE:

24 Dec 1948

2 March 1953

SIGNATURE DA

JOHN L. BISCHOFF, Chief/SCAPS

CHIEF, TRANSACTIONS AND RE. BRANCH

FORM NO. 37-157
1 MAR 54

CONFIDENTIAL

(4)

ORIGINAL BIOGRAPHIC PROFILE

(sanitized version in file)

Personnel Actions After
Mexico City Assignment

WH

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

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
██████████ KARTY, FLORYAN R.	009274	91	700	CF GS 12 3	\$10,105	\$10,640

POSTED ON
8-40

8 JAN 1964

WH-2

1. Serial No. 009274		2. Name KARTY, FLORYAN R.		3. Cost Center Number 64 700 CF		4. LWOP Hours	
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
GS 12	2	\$ 9,790	11/29/62	GS 12	3	\$10,105	11/24/63
7. TYPE ACTION							
PSI LSI ADJ.							
8. Remarks and Authorization							
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>JWH</i>				DATE: 7 Oct 1963			
PAY CHANGE NOTIFICATION							

DLS: 13
KX SEPT 63SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
NCB												
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)										
009274		KARTY, FLORIAN R.										
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						09 15 63			REGULAR			
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE			8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CP		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			
OPS OFFICER						0418			D			
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS				0136.01		12 2		9790				
18. REMARKS												
POSTED ON 09-15-63												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF SER	
37	10	NUMERIC	ALPHABETIC	45075			MO	DA	YR	MO	DA	YR
		51400	WH				01	06	12			
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.		34. SEX
NO	DA	YR		1. CSC	2. PICA	3. NONE		TYPE	MO	DA	YR	
35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.		
CODE	0 - NONE 1 - 5 PT 2 - 10 PT	MO	DA	YR	MO	DA	YR	CAN	STSV	CODE	0 - WAIVER 1 - YES	HEALTH INS CODE
								PROV	TEMP			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.		43. FEDERAL TAX DATA		44. STATE TAX DATA				
CODE				CODE		FORM EXECUTED		NO TAX EXEMPTIONS		FORM EXECUTED		CODE
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)						1 - YES 2 - NO				1 - YES 2 - NO		NO TAX STATE CODE
SIGNATURE OR OTHER AUTHENTICATION												
POSTED 09/24/63												

FORM 1150
11-62Use Previous
Edition

SECRET

19 SEP

 GPO :
 FEDERAL GOVERNMENT
 PRINTING OFFICE : 1962 O - 345-141

(When Filled In)

MHC: 31 JULY 63

SECRET
(When Filled In)

OCB NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 009274		2. NAME (LAST FIRST MIDDLE) <i>KARRY, ELKYN R</i>									
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE 06 09 63		5. CATEGORY OF EMPLOYMENT REGULAR					
6. FUNDS		7. V TO V		8. V TO CF		9. LOST LATER NO. CHARGEABLE 4135 5700 1000		10. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
11. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3 MEXICO CITY, MEXICO STATION		12. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO									
13. POSITION TITLE OPS OFFICER				14. POSITION NUMBER 0400		15. SERVICE DESIGNATION D					
16. CLASSIFICATION SCHEDULE (GS, LR, etc.) GS		17. OCCUPATIONAL SERIES 0136.01		18. GRADE AND STEP 12 2		19. SALARY OR RATE 9790					
20. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE 37		22. EMPLOY. CODE 10		23. OFFICE CODING 64700 WH		24. STATION CODE 45075		25. INTEGREE CODE 3		26. DATE OF BIRTH 01 06 12	
27. DATE OF GRADE		28. DATE OF LEE		29. NTE EXPIRES		30. SPECIAL REFERENCE		31. RETIREMENT DATA		32. SEPARATION DATA CODE	
33. VET. PREFERENCE		34. SERV. COMP. DATE		35. LONG COMP. DATE		36. CAREER CATEGORY		37. FEGLI / HEALTH INSURANCE		38. SOCIAL SECURITY NO.	
39. GOVERNMENT SERVICE DATA		40. LEAVE CAT		41. FEDERAL TAX DATA		42. STATE TAX DATA		43. SECURITY REQ NO.		44. SEX	
45. SIGNATURE OF OTHER AUTHENTICATION		46. POSTED									

FORM 1150
11 42Use Previous
Edition

SECRET

31 JUL 63
JHCSECRET
FORM 1150
11 42
12-70 (When Filled In)

A. Fitness Reports covering period after
Mexico City Assignment

B. Personnel Actions for period prior
to Mexico City Assignment

SECRET

(When Filled In)

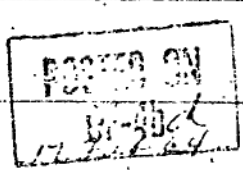
FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				009276	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
[REDACTED] CAROLY FLECK		1912	M	GS-12	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/WH/1		Mexico City	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
☒ CAREER ☐ RESERVE ☐ TEMPORARY			☐ INITIAL ☒ REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			ANNUAL ☒ REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
December 1964			1 Jan 1964 - 22 November 1964		
SECTION B PERFORMANCE EVALUATION					
W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - Strong Performance is characterized by exceptional proficiency. O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Case Officer for Soviet access agents.					P
SPECIFIC DUTY NO. 2					RATING LETTER
Analyst work, preparing Soviet personality reports. ✓					S
SPECIFIC DUTY NO. 3					RATING LETTER
Transcription into English of Russian technical product, and preparation of interpretative renditions of same when necessary.					O
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
POSTED ON 7 JAN 1965					
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S
7 JAN 1965					✓

SECRET
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable. As explained in the previous fitness report, Subject was assigned to the Station for the purpose of taking charge of the Station's joint telephone tap center, a position for which he was and is eminently qualified by reason of extensive experience and outstanding language qualifications. However, this position did not materialize because of circumstances beyond the control of Subject and the Station. It was therefore subsequently decided to train Subject locally, and have him gradually assume case officer and analyst responsibilities in certain simpler aspects of the Station's Soviet program. Given the circumstances that Subject had not had prior case officer or analytical experience (or even any substantial past exposure to operations to give him vicarious experience) he progressed more than adequately in absorbing the training offered, in assuming responsibility for two Soviet operations and in the preparation of analytical studies on the Soviet complement. Given the further circumstances that the Station did not have the time to train him more than superficially, and that the operations he handled were basically uncomplicated, it must be stated that Subject cannot now be considered to be a case officer. This conscientious and intelligent officer has high interest and enthusiasm for operations, but it is believed that his forte and future lies in the management of technical operations. This has been recognized also by Headquarters in the assignment presently planned for him. As a staff agent under tourist cover, he and his family adapted themselves remarkably well to the deep cover situation and to all other environmental factors.			
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		
23 November 1964			
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	
23 November 1964	Ops Officer	s/ Herbert Manell	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
23 November 1964	COS	s/ Winston K. Scott	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				009274	
SECTION A <i>PARITY, LUCYAN R. GENERAL</i>					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
<i>[REDACTED]</i>		6 Jan 1912	M	GS-12	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Operations Officer		DDP WH 3		Mexico City	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
☐ CAREER ☐ RESERVE ☐ TEMPORARY ☐ CAREER-PROVISIONAL (See Instructions - Section C) ☐ SPECIAL (Specify):		☐ INITIAL ☐ REASSIGNMENT SUPERVISOR ☒ ANNUAL ☐ REASSIGNMENT EMPLOYEE ☐ SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to)			
28 February 1964		6 August 1963 - 31 December 1963			
SECTION B PERFORMANCE EVALUATION					
W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner. S - <u>Strong</u> Performance is characterized by exceptional proficiency. O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Translation of Russian and Spanish materials.					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
					
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
14 FEB 1964					S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

OFFICE OF

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

From the time of Subject's arrival in Mexico and through all December 1963, he was utilized principally in translation work and was held on tap for the position of heading up the Station's joint telephone tap center. Circumstances beyond the control of the Station and Subject are responsible for the fact that the incumbent in charge of the center will continue these duties and Subject will be given other responsibilities.

Primarily, Subject will be trained to handle analyst and case officer responsibilities in the Soviet field. The level and range of the responsibilities will depend on the progress Subject makes in handling these duties in a manner satisfactory to the Station.

Subject is most conscientious and effective in every assignment given him to date, and the Station is extremely pleased to have him available as an outside Station asset. He is enthusiastic about all his work, including certain part-time routine and arduous duties, and he looks forward with confidence to the prospect of becoming a case officer. Although it is premature to state positively that Subject will succeed as a case officer, the supervisor believes that Subject will undoubtedly progress adequately.

Subject and his family have acclimated themselves excellently to the deep cover situation, faster than most of the Station's other staff agents, and certainly with fewer problems and requests for guidance from the Station's staff.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 29 January 1964	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 29 January 1964	OFFICIAL TITLE OF SUPERVISOR Operations Officer	TYPED OR PRINTED NAME AND SIGNATURE /S/ Herbert Linnell
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE 29 January 1964	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station	TYPED OR PRINTED NAME AND SIGNATURE /S/ Winston M. Scott

SECRET

Pre 1961 Fitness Reports
and other personnel
documents