

JFK ASSASSINATION SYSTEM
IDENTIFICATION FORM

AGENCY INFORMATION

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

DOCUMENT INFORMATION

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

REQUESTED ACTION

CLEARANCE AND/OR ACCESS

LATEST INVESTIGATION/CLEARANCE

TYPE OF INVESTIGATION

RESULTS OF PERSONNEL SECURITY ACTION

REQUEST FOR AND RESULT OF PERSONNEL SECURITY ACTION

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

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

Generated using diff-pdf and OpenCV.
Thanks to the Mary Ferrell Foundation and
The Black Vault for their archiving work.

maryferrell.org
theblackvault.com
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

REQUEST FOR AND RESULTS OF PERSONNEL SECURITY ACTION

(AR 381-130)

1966

TO: (Control Office)

CG, USA Intelligence Cmd
ATTN: ACOFS, CONOPS
PO Box 398
Fort Holabird, Md 21219

THRU:

CG, USAREC
ATTN: Security Officer
Fort Monroe, Va 23351-24 OCT 1966

FROM: (Requesting Agency)

CO, AFEES
1515 Clay Street
Oakland, California

(Enter name and address of the ACTION AGENCY to which results are to be sent, if known by requester)

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

CONTROL OFFICE USE ONLY

REQUIREMENT	REQUEST NO.
DOSSIER NO.	OPENING DATE
REMARKS	

SECTION I - REQUESTER TO CONTROL OFFICE

1. SUBJECT (Last name in capitals, first and middle names) SCHEER, Robert (NMN)	2. ALIAS(ES), UNRECORDED None	3. SERVICE SOCIAL SECURITY NO. 112-28-1134 D
4. DATE OF BIRTH (Day, Month, Year) 4 April 1936	5. PLACE OF BIRTH (City, State and country) Bronx, New York, New York, USA	6. GRADE AND POSITION N/A
7. REQUESTED ACTION <input checked="" type="checkbox"/> INVESTIGATION <input type="checkbox"/> VALIDATION <input type="checkbox"/> RECORDS CHECK		
8. TYPE OF INVESTIGATION: <input type="checkbox"/> NAC <input type="checkbox"/> NACI <input type="checkbox"/> BI <input type="checkbox"/> OTHER (Explain in Item 15)		9. a. FOR CLEARANCE AND/OR ACCESS TO: <input type="checkbox"/> TOP SECRET <input type="checkbox"/> SECRET <input type="checkbox"/> CONFIDENTIAL b. <input type="checkbox"/> FOR LIMITED ACCESS AUTHORIZATION c. <input type="checkbox"/> INTERIM CLEARANCE DESIRED d. <input checked="" type="checkbox"/> OTHER (Explain in Item 15)
10. TO DETERMINE SUITABILITY FOR: Induction		
11. JUSTIFICATION PAR 18, AR 604-10		
12. REVIEW OF FILES REQUIRED BY PARAGRAPH AR 604-5, COMPLETED ON _____ REVEALED: <input type="checkbox"/> NO UNFAVORABLE INFORMATION <input type="checkbox"/> UNFAVORABLE INFORMATION DETERMINED NOT TO BE A BAR TO ACTION <input type="checkbox"/> INFORMATION SUMMARIZED IN ITEM 15		
13. LATEST INVESTIGATION/CLEARANCE (Type, when, by whom) N/A		14. NO BREAK IN FEDERAL SERVICE EXCEEDING SIX MONTHS SINCE N/A

15. REMARKS (If unfavorable information entered, transmit in sealed envelope thru intelligence channels.).

Request investigation of registrant in view of remarks made by registrant in remarks section of DD Form 98 and DD Form 398.

Headquarters
US Army Recruiting Command
Hampton, Virginia 23369

INCLS 2	TYPED NAME AND TITLE MYRON K. HAYASHIDA 1, LT, AGC	SIGNATURE <i>Myron K. Hayashida</i>
SECTION II - CONTROL OFFICE TO REQUESTER		DATE
16. <input type="checkbox"/> NEW FINGERPRINT CARD REQUIRED <input type="checkbox"/> ITEMS _____ ON SPH (PSQ) REQUIRE CORRECTION AND/OR COMPLETION. <input type="checkbox"/> INTERIM REPORT FORWARDED. REQUEST REPORT OF ACTION TAKEN AND RETURN OF INCLOSURES UPON COMPLETION.		
INCLS	TYPED NAME AND TITLE C35	SIGNATURE

DA FORM 2784
1 APR 64

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SECTION III - REQUEST TO CONTROL OFFICE		DATE	
17. REPORT OF ACTION			
<input type="checkbox"/> INFORMATION NOTED		<input type="checkbox"/> SUBJECT REASSIGNED TO NON-SENSITIVE DUTIES, INVESTIGATION MAY BE CANCELED.	
<input type="checkbox"/> INFORMATION CONSIDERED NO BAR TO CLEARANCE. REQUEST COMPLETION OF INVESTIGATION.			
18. SUBJECT WAS TRANSFERRED			
TO	HEADQUARTERS	PER	DATED
19. REMARKS (If returning corrected forms, state here)			
INCLS	TYPED NAME AND TITLE	SIGNATURE	
SECTION IV - CONTROL OFFICE TO ACTION AGENCY		DATE 29 FEB 1967	
20. RESULTS OF PERSONNEL SECURITY ACTION			
<input type="checkbox"/> NO RECORD <input type="checkbox"/> FAVORABLE <input type="checkbox"/> MINOR UNFAVORABLE INFORMATION RECORDED IN ITEM 21			
<input type="checkbox"/> PRIOR INVESTIGATION INSUFFICIENT FOR ACTION CONTEMPLATED <input checked="" type="checkbox"/> FORWARDED FOR SECURITY DETERMINATION BY CLEARING AUTHORITY			
IF NEEDED, INITIATE REQUEST FOR INVESTIGATION.			
TYPE OF INVESTIGATION		COMPLETED BY	DATE
<input type="checkbox"/> NAC <input type="checkbox"/> NACI <input type="checkbox"/> BI <input checked="" type="checkbox"/> OTHER		USAINTC	16 Feb 67
DOSSIER NUMBER		H1 01 69 40	
21. REMARKS			
a. THIS FORM, TOGETHER WITH ANY INCLOSURES, REPORT OF ACTION TAKEN AND USACRF COPY OF DA FORM 873 (if appropriate) WILL BE RETURNED TO THE CONTROL OFFICE WITHIN _____ DAYS AFTER RECEIPT.			
b. IN THE EVENT SUBJECT HAS BEEN TRANSFERRED FROM YOUR COMMAND, THIS FORM AND INCLOSURES WILL BE RETURNED IMMEDIATELY WITH ITEM 23 COMPLETED.			
c. ATTENTION IS INVITED TO: PARAGRAPHS _____ AR 604-5; PARAGRAPH _____ AR 604-11; PARAGRAPH _____ AR 640-98; AND PARAGRAPH _____ AR 381-130, AS APPLICABLE.			
INCLS		SIGNATURE	
DOSSIER H1 01 69 40		DAN H. DIETRICH, Jr. Lt Col, AIS, Chief, Ops III	
SECTION V - ACTION AGENCY TO CONTROL OFFICE		DATE	
22. REPORT OF ACTION			
<input type="checkbox"/> FAVORABLE DETERMINATION, USACRF COPY DA FORM 873 ATTACHED			
<input type="checkbox"/> UNFAVORABLE DETERMINATION, RECOMMENDED ACTION IN ITEM 24			
<input type="checkbox"/> REQUEST ADDITIONAL INVESTIGATION AS INDICATED IN ITEM 24			
23. SUBJECT WAS TRANSFERRED			
TO	HEADQUARTERS	PER	DATED
24. REMARKS			
INCLS	TYPED NAME AND TITLE	SIGNATURE	
3 AND BE207			

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