

~~SECRET~~

REQUEST FOR PERSONNEL ACTION							DATE PREPARED 25 JUNE 1965		
PER NUMBER 56735	NAME (Last-First-Middle) BROE, WILLIAM V.								
NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>							4. EFFECTIVE DATE REQUESTED <b>07 06 65</b>	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
-RHOB		V TO V	V TO OF	COST CENTER NO CHARGEABLE <b>6135-0620</b>	8. LEGAL AUTHORITY (Explain by Office of Personnel)				
6. ORGANIZATIONAL DESIGNATIONS <b>DDP NH OFFICE OF THE CHIEF</b>							10. LOCATION OF OFFICIAL STATION <b>WASH., D. C.</b>		
11. POSITION TITLE <b>1ST SEC POL OFF</b> OPS OFFICER DIV CH							12. POSITION NUMBER <b>0001</b>	13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SERVING FGS, E.R. AND F <b>PSR</b> GS			15. OCCUPATIONAL SERIES <b>0136.01</b>	16. GRADE AND STEP <b>02 6</b>	17. SALARY OR RATE <b>\$ 24500</b>				
18. REMARKS FROM: DDP/FE/COS/TOKYO. Concurrence from FE per Mary Bonger									
Security Approval Created by Pers. SD/OS <b>6/25/65</b> <i>flc 7/1/65</i>							Recorded By <b>CC-3</b> <i>6/25</i>		
R. D. LISHMAN CPT PERS							DATE SIGNED <b>6/28/65</b>	19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Rossberry</i>	DATE SIGNED <b>6/28/65</b>
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
20. ACTION CODE	20. DATES 1965	21. DATE COS-4 1965	22. STATION LONE	23. UNIT/CLASS ARMED FORCES	24. PAY GRADE 0001	25. DATE OF BIRTH 1900	26. RANK OR GRADE NO. 0001	27. DATE OF DEATH NO. 0001	
37. 10. 5000	10. 5000	10. 5000	10. 5000	10. 5000	10. 5000	10. 5000	10. 5000	10. 5000	
28. 000 FORMS	29. 000 FORMS	30. 000 FORMS	31. 000 FORMS	32. 000 FORMS	33. 000 FORMS	34. 000 FORMS	35. 000 FORMS	36. 000 FORMS	
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56. 000 FORMS	57. 000 FORMS	58. 000 FORMS	59. 000 FORMS	60. 000 FORMS	61. 000 FORMS	62. 000 FORMS	63. 000 FORMS	64. 000 FORMS	
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74. 000 FORMS	75. 000 FORMS	76. 000 FORMS	77. 000 FORMS	78. 000 FORMS	79. 000 FORMS	80. 000 FORMS	81. 000 FORMS	82. 000 FORMS	
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83. 000 FORMS	84. 000 FORMS	85. 000 FORMS	86. 000 FORMS	87. 000 FORMS	88. 000 FORMS	89. 000 FORMS	90. 000 FORMS	91. 000 FORMS	
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371. 000 FORMS	372. 000 FORMS	373. 000 FORMS	374. 000 FORMS	375. 00					

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#### *When Failed*

REQUEST FOR PERSONNEL ACTION							PAGE PREPARED		
1. SERIAL NUMBER		2. NAME (Last-First-Middle)					30 June 1961		
156735		BROWN, WILLIAM V.							
3. NATURE OF PERSONNEL ACTION							4. EFFECTIVE DATE REQUESTED		
PROMOTION							MONTH	DAY	YEAR
5. FUNDS		V TO V	V TO CF	6. COST CENTER NO. CHARGEABLE			7. CATEGORY OF EMPLOYMENT		
		CF TO V	X CF TO CF	FILE 2137-7351-1000			REGULAR		
8. ORGANIZATIONAL DESIGNATIONS							9. LOCATION OF OFFICIAL STATION		
DDP/FZ FZ/JMO - Tokyo Station Office of the Chief							Tokyo, Japan		
10. POSITION TITLE							11. POSITION NUMBER		
1st. Secretary (Political Officer) Chief of Station							12. PER CONTROL NO.		
13. CLASSIFICATION SCHEME (OS, EP, WFO, J)		14. OCCUPATIONAL SERIES			15. GRADE AND STEP		16. CAREER SERVICE DESIGNATION		
FIR OS		0136.01			2 2 17 1		D 16,530		
17. REMARKS									
18A. SIGNATURE OF REQUESTING OFFICER <i>Richard B. Brown</i> Chief of Operations, DDP							18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Richard B. Brown Jr. DDP</i>		
19. SIGNATURE FOLLOWING THE EXECUTIVE CSC OF THE OFFICE OF PERSONNEL									
20. POSITION DATA		21. ADDRESS DATA		22. TELEPHONE DATA		23. WEBSITE DATA		24. APPROVAL DATA	
NAME CODE		NUMBER NAME		EX-1000 NAME		WWW.DOD.GOV NAME		APPROVAL NAME	
25. PAY DATA		26. SPECIAL REFERENCE		27. PAY REPORT DATA		28. ESTIMATING DATA		29. APPROVAL/VERIFICATION DATA	
NAME CODE		REFERENCE		EX-1000 NAME		EX-1000 NAME		APPROVAL NAME	
30. MEDICARE REFERENCE		31. SERVIC. CODE		32. LONG. COMP. CODE		33. MED. COVR. CODE		34. REG. /HEALTH. SOURCE	
NAME CODE		NAME CODE		NAME CODE		NAME CODE		NAME CODE	
35. MED. REFERENCE		36. SERVIC. CODE		37. LONG. COMP. CODE		38. MED. COVR. CODE		39. REG. /HEALTH. SOURCE	
NAME CODE		NAME CODE		NAME CODE		NAME CODE		NAME CODE	
40. PREVIOUS GOVERNMENT SERVICE DATA		41. CLEAR. DATA		42. HOLDING DATA		43. STATE FILE DATA		44. STATE FILE DATA	
NAME CODE		NAME CODE		NAME CODE		NAME CODE		NAME CODE	
45. APPROVAL		46. APPROVAL		47. APPROVAL		48. APPROVAL		49. APPROVAL	
X = NO PREVIOUS SERVICE Y = PREVIOUS SERVICE Z = PREVIOUS SERVICE WITH EX-1000 D = PREVIOUS SERVICE WITH EX-1000		X = NO APPROVAL Y = APPROVAL Z = APPROVAL		X = NO APPROVAL Y = APPROVAL Z = APPROVAL		X = NO APPROVAL Y = APPROVAL Z = APPROVAL		X = NO APPROVAL Y = APPROVAL Z = APPROVAL	
50. POSITION CONTROL CERTIFICATION							51. C.P. APPROVAL		
7-25-61							<i>Richard B. Brown Jr. DDP</i>		

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(Form Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 156735		2. NAME (Last-First-middle) BROOKS, William V.		26 April 1961	
3. NATURE OF PERSONNEL ACTION <b>INTROGATION -- Dept. of State</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 4 27 61	
5. RANKS OF TO W OF TO V		6. TO OF OF TO OF		7. CRAFT CENTER NO. OR CHARGE NILE 1137-7351-1000	
8. ORGANIZATIONAL DESIGNATIONS DDP/PS PS/JMO - Tokyo Station Office of the Chief				9. CATEGORY OF EMPLOYMENT Regular	
				10. LEGAL AUTHORITY (Completed by (Office of Personnel))	
				11. LOCATION OF OFFICIAL STATION Tokyo, Japan	
12. POSITION TITLE <b>1st. Secretary (Political Officer)</b> Chief of Station				13. POSITION NUMBER 3002	14. PCK CONTROL NO. D
15. CLASSIFICATION SCHEDULE (GS, LS, etc.) <b>PSR</b> GS		16. OCCUPATIONAL SERIES 6135.01		17. GRADE AND RATE 2 2 16 2	18. SALARY OR RATE <b>\$15,255</b> \$15,515
19. REMARKS  <b>All sick and 118 hours annual leave to be transferred to the Dept. of State.</b>					
<b>B. W. Keeney</b> B. W. Keeney, Director, Office of Personnel			C. SIGNATURE OF CAREER SERVICE APPRAISERS OFFICER		
SPACE BELOW FOR EXECUTIVE UNIT IN THE OFFICE OF PERSONNEL					
1. APPROVAL DATE 04/27/61		2. POSITION NUMBER 156735		3. GRADE AND RATE 2 2 16 2	
4. GRADE AND RATE 2 2 16 2		5. APPROVAL DATE 04/27/61		6. GRADE AND RATE 2 2 16 2	
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16. GRADE AND RATE 2 2 16 2		17. APPROVAL DATE 04/27/61		18. GRADE AND RATE 2 2 16 2	
19. GRADE AND RATE 2 2 16 2		20. APPROVAL DATE 04/27/61		21. GRADE AND RATE 2 2 16 2	
22. POSITION CONTROL VERIFICATION  <b>W. Keeney 4/27/61</b>					
23. D.P.L. APPROVAL					
24. APPROVAL FOR RELEASE 1152					

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**SECRET****BIOGRAPHIC INFORMATION**

21 September 1960

**Name:** William V. BROE  
**Grade:** GS-16  
**Service Designation:** DI

**Date and Place of Birth:** 24 August 1913, Amesbury, Mass.

**Marital Status:** Married

**Education and Career Outside the Agency:**

1933 - 1939	Bowdoin College, Brunswick, Me. AB, Biology, Chemistry
1939 - 1941	Firestone Tire & Rubber Co., Quincy, Mass. - Budget Manager
1941	General Motors Acceptance Corp., Boston, Mass. Field Representative
1942 - 1948	FBI, Ohio, Michigan, D.C. - Special Agent

**Languages:** None

**CIA Experience:**

June 1948 - Aug 1950	Acting Chief, Philippine Br., OSO/COPS/FBZ . P-5
Aug 1950 - Apr 1951	Chief, Philippine Br., OSO/FDZ/SEA, GS-13
Apr 1951 - Aug 1953	COS, Manila, OSO/FDZ/SEA. GS-14 (May-Aug 1953 TDY Hqs)
Aug 1953 - Aug 1954	Deputy Chief, <b>FRU-FEC, Yokosuka</b>
Aug 1954 - Apr 1955	DCOM, China Mission, <b>Yokosuka</b> GS-15
Apr 1955 - Jan 1958	Chief, China Branch, FE/DDP
Jan 1958 - present	Deputy Chief, FE Division, DD/P

**CIA Training:** Admin Procedures, Basic Intell, Advanced Intell Trng, Secret Writing, Crypto Briefing, Basic Ops Photo, Invest Tech, Conceal, Ops Disguise, Furnishings & Equip

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SECURITY INFORMATION

6 May 1953

MEMORANDUM FOR: Special Assistant, Intelligence  
**Department of State**

SUBJECT: Broe, William V.  
**Resignation from the Foreign Service**  
on Completion of Full Tour of Duty

1. Mr. Broe, **Attache at the American Embassy, Manila, Republic of the Philippines**, will complete his tour of duty **in the Foreign Service** in April 1953. He has been instructed by this office to advise the post administrative officer of his intention to resign **from the Foreign Service** at the completion of his tour. Mr. Broe will submit his written resignation to the post administrative officer, and request that **the Department** issue travel orders to return him, his dependents, and his effects to the United States on or about 10 May 1953. It is requested that your office arrange for the issuance of appropriate orders on receipt of notice from the post administrative officer.

2. It is requested that Mr. Langford Bevington be assigned to new diplomatic position 3, Annex Y-10, be advanced to position 1. The vacancy created by Mr. Harkins' advancement will be filled at a later date.

FOR THE SECURITY INFORMATION, PLEASE

b7

PG/PJ/PWT/TS:bj 24 April 1953  
PI/LCB/WS:kd Retyped 1 May 1953  
Distributions:

Orig & 1 - addressees  
1 - C/I  
1 - PS  
2 - LCB

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SECURITY INFORMATION

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STANDARD FORM 52 FEBRUARY 1952 GSA GEN. REG. NO. 27 MAY 1952 EDITION GSA GEN. REG. NO. 27 MAY 1952 EDITION																			
<b>REQUEST FOR PERSONNEL ACTION</b>		VOUCHERED																	
<b>REQUESTING OFFICE:</b> 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 given name, initials, and surname)</b> <b>Mr. William V. BROE</b>		<b>2. DATE OF BIRTH</b> <b>21 August 1913</b>	<b>3. REQUEST NO.</b> <b>21 Apr. '55</b>																
<b>4. NATURE OF ACTION REQUESTED</b> <b>A. REASSIGNMENT (Specify whether appointment, promotion, separation, etc.)</b>  <b>Reassignment</b>		<b>5. EFFECTIVE DATE</b> <b>6. PURPOSE</b> <b>ASAP</b>	<b>7. C. S. OR OTHER LEGAL AUTHORITY</b> <i>18 June 1955</i>																
<b>8. POSITION (Specify whether establish, change grade or title, etc.)</b>		<b>9. APPROVED</b> <i>John Caldwell</i> <i>18 June 1955</i>																	
<b>From:</b> <b>Area Ops. Officer RFF 1627-15</b> <b>GS-0136.01-15 \$10,800 p/a</b> <b>DDP/PE</b> <b>China Mission</b> <b>Office of Chief</b> <b>Yokosuka, Japan</b>		<b>To:</b> <b>Area Ops. Officer(Dr.Ch.) RFF 161</b> <b>GS-0136.01-15 \$10,800 p/a</b> <b>DDP/PE</b> <b>Branch 2, China</b> <b>Office of Chief</b> <b>Washington, D.C.</b>																	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> BUREAU <b>10. FIELD OR BUREAU</b>		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> BUREAU <b>11. FIELD OR BUREAU</b>																	
<b>12. REMARKS (Use reverse if necessary)</b> <p>W-1 Form attached. Please transfer subject from unvouchered to vouchered funds.</p> <p>Field Fitness Report noted in PI, 5 April 1955.</p>																			
<b>13. APPROVAL BY</b> <b>Henry T. ULLMAN, Personnel Officer, PE</b> <small>G. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)</small> <b>Jama Paper, Extension 385</b>		<b>14. REQUEST APPROVED BY</b> <b>Approved: AS/OSR Office</b> <small>H. Signature</small> <b>R. Ledford</b>																	
<b>15. STANDARD FORM FILED</b> <table border="1"> <tr> <td>NAME</td> <td>GRADE</td> <td>OTHER RPT.</td> <td>NUMBER</td> </tr> <tr> <td>X</td> <td></td> <td></td> <td></td> </tr> </table>		NAME	GRADE	OTHER RPT.	NUMBER	X				<b>16. POSITION CLASSIFICATION ACTION</b> <table border="1"> <tr> <td>TYPE</td> <td>GRADE</td> <td>CLASS</td> <td>PERIOD</td> </tr> <tr> <td>M</td> <td></td> <td></td> <td></td> </tr> </table>		TYPE	GRADE	CLASS	PERIOD	M			
NAME	GRADE	OTHER RPT.	NUMBER																
X																			
TYPE	GRADE	CLASS	PERIOD																
M																			
<b>17. APPROVAL NUMBER</b> <b>Recd. 5-3715-55-167</b> <b>5-3700-20</b>		<b>18. APPROVAL TO USE SECURITY INFORMATION</b> <b>Yes</b>																	
<b>19. DATE OF REPORT</b> <b>18 APR 1955</b>		<b>20. PLACE OF SERVICE</b> <b>STATE: Va.</b>																	
<b>21. STANDARD FORM 50 REMARKS</b> <i>Reassigned to China by John Caldwell 6 Dec 1955</i>																			
<b>C. CLERK'S INITIALS</b> <b>A.</b>		<b>B. CIV. OR POS. CONTROL</b> <i>18-1201-1</i>																	
<b>C. CLASSIFICATION</b> <b>D. PLACEMENT ON EMPL.</b> <b>E.</b>		<b>F. DATE</b> <i>18-1201-1</i>																	
<b>G. APPROVED BY</b> <i>John Caldwell</i>																			

SECRET

William V. BRICE

EXPERIENCE PRIOR TO CIA:

Firestone Tire and Rubber, Budget Mgr., Aug 39-May 41  
General Motors, Auto Financing, May 41-Nov 41  
FBI, Mar 42-May 48

AGENCY EXPERIENCE:

Ex. App't June 48. Ops Of. OCO, COPO, GS-13  
Prom. Aug 50, GS-13, CGO, ~~GS~~ Division  
Reassignment Feb 51. OGO, ~~GS~~, I.O. (chief), GS-13, Manila  
App't, Jul 51. Station Chief, Manila.  
Prom., Oct 51, GS-14  
Reassignment, June 53, Deputy Chief of Mission, **Yokosuka**  
Prom. GS-15. Area Ops Officer, **Yokosuka**

SECRET

COURIER

FJYA-6055

SECRET  
S April 1954

Senior Representative, North Asia

Chief, China Mission

INFO: Chief, NE

Administrative/Personnel

William V. BROE - Recommendation for Promotion.

1. Subject is a superior senior CIA official whose maturity and experience are constantly reflected in his work.
2. He has performed his duties as Deputy Chief, ~~PRO~~, and later as Deputy Chief, China Mission in an outstanding manner. It is believed that his performance would be equally good in any equivalent position within the DO/P complex.
3. Subject frequently is Acting Chief of Mission in Mr. Morton's absence and on many occasions acts on behalf of him in conferences with MA or elsewhere. His handling at all times is commendatory.
4. Since Mr. BROE is a GS-14 in a GS-16 position and since he has been in grade since 15 October 1951, an early promotion to GS-15 is recommended.

/s/ Chief of Mission

INDIVIDUAL CERTIFICATE      SUSP 26 June 1953  
 DATE 26 June 1953

I Certify that attached order: DIF C 6 - 128 8727th AAC

1. Will not be used to:
  - a. Provide basis for reimbursement or funds obligation of any kind.
  - b. Secure relief from or in connection with any civil obligation.
2. Will not knowingly be compromised by me in any way.
3. Will be used only for the purpose issued, as indicated below:
  - a. To obtain AOO Identification Card.  YES  NO
  - b. To obtain **State Department** passport.  YES  NO
  - c. To provide cover documentation when required enroute to destination indicated.  YES  NO
- d. Other Uses (Specify) NO ONE OTHER THAN CIA AIRPORT

OR MIL VEHICLE, otherwise

I understand that if unavoidable circumstances cause any use not authorized above, or other compromise of this order, I will notify CHIEF, Military Personnel Division, C I A, in writing of full extent and circumstances of such compromise by fastest practical means available to me.

WITNESSSED:

NAME WILLIAM V PRICE RANK 12-L

OFFICIAL NUMBER

SIGNATURE William V. Price

1st Ind

Central Processing Branch, Central Intelligence Agency, Washington 25, DC  
 TO: Military Personnel Division, Central Intelligence Agency, Washington 25, D. C.

Certificate returned to I P D for individual's 201 File.

FOR THE CHIEF, CENTRAL PROCESSING BRANCH

INITIAL WV

MFD-5 18 May 1953 R

FORM NO. 35-85  
NOV 1951

## CLASSIFIED MESSAGE

CENTRAL INTELLIGENCE AGENCY

17 APR 53

SECRET

SECURITY INFORMATION

III 10d08

ROUTINE

TO: DIRECTOR, CIA  
FROM: SR REP. MANILA

ROUTINE

ACTION: FE 6

INFORMATION: FI/OPS, FI/ADMIN, DD/P-ADMIN, CFD 3, CPB, TDS 2, POD 2.  
FI/RI 2

MAIL 4484

TO: DIR

CITE: SWAN

ADMIN:

RE: DIR 42182 (OUT 91080)

BROE, WILLIAM VINCENT

1. [REDACTED] SUBMITTED RESIGNATION ADDRESSED 13 APRIL, EFFECTIVE  
ON OR ABOUT 10 MAY.2. REQUEST APPROVAL FOLLOWING ITINERARY FOR SELF AND  
DEPENDENTS: DEPART HANOI FOR HONG KONG 14 MAY, HONG KONG TO YOKO 19 MAY,  
TWO WEEKS TDY YOKO WITH CAREW AS HC PLANS DEPART YOKO 30 JUNE,  
PRIOR [REDACTED] RETURN YOKO, DEPART YOKO FOR STATES ON OR ABOUT 3 JUNE.

END OF MESSAGE

*am Party*

SECRET

SECURITY INFORMATION

COPY NO.

IT IS FORBIDDEN TO MAKE A COPY OF THIS MESSAGE

(48)

STANDARD FORM NO. 64

Office Memorandum • UNITED STATES GOVERNMENT

TO : DD/P-ADMIN  
FROM : Chief, PE  
SUBJECT: Assignment of William V. BROZ

DATE: 20 March 1953

The assignment of William V. BROZ as Deputy Chief of Mission, **PAU/TEC**, has been concurred in by the Chief of Mission, **PAU/TSC**, and the Senior Representative at Tokyo.

*George E. Aurell*  
George E. Aurell  
Chief, PE

Originator: Bernhard von Ammon

This is in line with job discussions at which I have been present and at which this assignment was explained to the S.R.

*Floyd George*  
Dep. S.R., NHC

*C. D. T.*  
Information

~~SECRET~~

SED

3 January 1951

Chief, FDZ

Transfer of Personnel

1. Request is made that Mr. William V. Bros be transferred from Slot #1, Branch IV, FDZ/SEA, to Slot #1, Manila Research Unit. Mr. Bros will replace Mr. Lynn Boyer who is now in Manila.

2. It is requested that Miss Carterette Cheetam, recently transferred to FDZ/SEA from Staff C, be placed in Slot #2, Manila Research Station, to replace Miss Roberta Meyer.

3. Request is made that Mr. John M. Mansell be transferred from Slot #2, Branch IV, FDZ/SEA, to Slot #3, ~~Manila State~~ Station. Mr. Mansell will occupy one of the new slots opened in compliance with FDZ's memorandum of 30 November 1950.

---

Lloyd George  
Chief, FDZ

Originators

Virginia Pryor

---

Harry W. Little, Jr.

✓ P.P. (P.P.)  
L.M. (L.M.)

**SECRET**

DEC 22 1960

MEMORANDUM FOR THE **SECRETARY OF STATE**

ATTENTION: **Mr. W. Park Armstrong, Jr.**

Subject : Request for Appointment in the  
**Foreign Service as Attaché at**  
**Manila for Mr. William Vincent**  
**Broe**

Enclosure: a. Biographical Sketch, William Vincent Broe  
b. Form DDP-34

1. It is requested that Mr. William Vincent Broe be appointed  
in the **Foreign Service** with the title of **Attaché, FES-3**, \$7,710.00,  
for duty in the American Embassy at Manila, Republic of the Philippines.

2. Mr. Broe received his B.A. Degree from Bowdoin College. He  
has had approximately two years and six months of experience as an  
intelligence officer in Government service. It is believed that he  
possesses the professional qualifications for the duties planned for  
him, and, in addition, has the representative qualifications expected  
of an American official serving abroad. Mr. Broe will receive **Drea**  
**CLA** a basic salary of \$7,600.00 per annum.

3. Mr. Broe will replace Mr. Frank M. Chapin, for whom a request  
for clearance for return will be submitted at a later date.

4. There is transmitted herewith a biographical sketch on Mr.  
Broe which sets forth in detail pertinent information on him and on  
his special qualifications for the duties it is intended that he  
assume at Manila.

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE:

**RICHARD A. SCHLES**  
Assistant Director

**SECRET**

**SECRET****WILLIAM VINCENT BROE**

<b>PERSONAL DATA</b>	:	Date of Birth	=	24 August 1913
		Place of Birth	=	Amesbury, Massachusetts
		Citizenship	=	U.S.A., by birth
		Legal Residence	=	832 LeMelle Walk, Falls Church, Virginia
<b>PARENTAGE</b>	:	Name of Father	=	John James Broe (Deceased)
		Date of Birth	=	21 May 1878
		Place of Birth	=	Amesbury, Massachusetts
		Citizenship	=	U.S.A., by birth
	:	Name of Mother	=	Agnes Dorothy Broe
		Date of Birth	=	8 November 1888
		Place of Birth	=	Boston, Massachusetts
		Citizenship	=	U.S.A., by birth
<b>MARITAL STATUS</b>	:	Married		
	:	Name of Wife	=	Jean Currier Broe
		Date of Birth	=	4 March 1920
		Place of Birth	=	Bethel, Massachusetts
		Citizenship	=	U.S.A., by birth
	:	Name of Daughter	=	Barbara Jean Broe
		Date of Birth	=	17 September 1945
		Place of Birth	=	Youngstown, Ohio
		Citizenship	=	U.S.A., by birth
	:	Name of Daughter	=	Barbara Griffith Broe
		Date of Birth	=	28 December 1947
		Place of Birth	=	Washington, D. C.
		Citizenship	=	U.S.A., by birth
	:	Name of Daughter	=	Kathleen Elizabeth Broe
		Date of Birth	=	11 April 1950
		Place of Birth	=	Washington, D. C.
		Citizenship	=	U.S.A., by birth
<b>EDUCATION</b>	:	1936-1936 - Governor Dummer Academy, South Byfield, Massachusetts 1936-1939 - Bowdoin College, Brunswick, Maine (B.A. Degree)		
<b>OCCUPATIONAL EXPERIENCE</b>	:	August 1939-May 1941 - Budget Sales Manager, Firestone Tire and Rubber Company, Boston, Massachusetts May 1941-November 1941 - Credit Manager, General Motors Acceptance Corporation, Boston, Massachusetts March 1942-May 1948 - Special Agent, Department of Justice, Federal Bureau of Investigation, Washington, D. C.; Detroit, Michigan; Cleveland and Youngstown, Ohio		

**SECRET**  
**CLASSIFIED**

**SECRET**

OFFICE MEMORANDUM

TO: Chief, IAS Staff.

DATE:

FROM: Employee Division

19 December 1950

SUBJECT:

William V. Brock #05706

1. This is to advise your office that the subject has been granted permission to file application for employment with the Department of State.

2. In the event an offer of employment is made to the subject, this office will interpose no objection to the release.

3. For the convenience of the Department of State, it is requested that the appropriate security certification be prepared and forwarded to the Department of State as soon as possible.

**SECRET**

THE C. CLINCHSCAMP

XXXXXXXXXXXX

SECRET

30 November 1950

TO: OVERSEAS DIVISION, PERSONNEL BRANCH  
FROM: FDZ/SEA  
SUBJECT: REQUEST FOR APPOINTMENT

It is requested that the Overseas Division, Personnel Branch, take the necessary steps to obtain a Foreign Service appointment for the following employee:

- a. Name Mr. William V. Broe

b. Station of Assignment Mosela, P. R.

c. Foreign Service title requested Attoche

d. Employee is a replacement for Mr. Frank M. Chapin  
who formerly had a Foreign Service title of Attoche.

e. If not as a replacement, justification for additional title

f. Availability date for departure \_\_\_\_\_

Signature

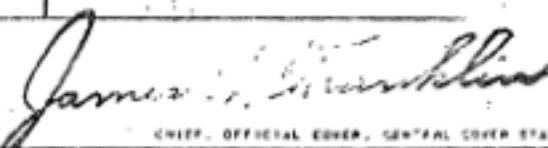
SECRET

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKUP			DATE	FILE NO.
TO: (CCP+4)	<input checked="" type="checkbox"/>	CHIEF, CONTROL DIVISION, OP	21 May 1973	943
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION, OP	ID NUMBER 032-01-8164	EMPLOYEE NUMBER 056735
	<input checked="" type="checkbox"/>	CHIEF, OPERATING COMPONENT (For action) IG	ID CARD NUMBER	

ATTN: <b>Chief Administrative Officer</b>	OFFICIAL COVER	ESTABLISHED
REF: <b>Retirement (Abs)</b>		<input checked="" type="checkbox"/> DISCONTINUED
SUBJECT  <b>BRUCE, William V.</b>	UNIT	

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

ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____		<b>EFFECTIVE DATE: EOD</b> <input checked="" type="checkbox"/> SUBMIT FORM 3254 CIA #2 TO BE ISSUED: (NMBR 30-73)	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TOF</u> OTHER (Specify) _____		SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY: (NMBR 30-73)	
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY: (NMBR 30-73)		NA: CATEGORY I      CATEGORY II	
SUBMIT FORM 3254 #2 TO BE ISSUED: (NMBR 30-73)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
SUBMIT FORM 642 TO CHANGE AFFECTING THIS COVER: (NMBR 30-73)		SUBMIT FORM 2688 FOR HOSPITALIZATION CARD NA	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY: (NMBR 30-73)		DO NOT WRITE IN THIS BLOCK	
NA: CATEGORY I      CATEGORY II			
SUBMIT FORM 2688 FOR HOSPITALIZATION CARD			
<b>Subject will be acknowledged as CIA            for entire period of employment and            is not to reveal specific places or            locations of cover assignments.</b>			
<b>FORWARDING ADDRESS:</b> 4317 Saul Road Kensington, Md 20707 <b>EMPLOYMENT ADDRESS:</b> None			
DISTRIBUTION: COPY 1: CC: SA-CB COPY 2: OPERATING COMPONENT COPY 3: GS-SACO COPY 4: DCI/PA COPY 5: GES-FILE		 CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF	

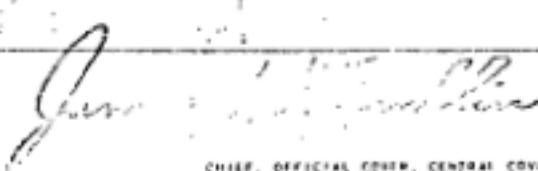
FORM 155 | USE PREVIOUS EDITION  
1-73

SECRET

E.O. 14176 CL BY DDCI-22

113-10-430

SECRET

<b>NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP</b>			DATE <b>1 JUNE 1969</b>
TO: (CCS&CS)	<input checked="" type="checkbox"/> CHIEF, RECORDS AND CONTROL		FILE NUMBER <b>943</b>
	CHIEF, CONTRACT PERSONNEL DIVISION		EMPLOYEE NUMBER <b>156735</b>
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) WH		ID CARD NUMBER
ATTR: <b>CHIEF SUPPORT STAFF</b>		OFFICIAL COVER	BACKSTOP ESTABLISHED
REF: FORM: 1322 DATED: 26 MAY 1969			<input checked="" type="checkbox"/> DISCONTINUED
SUBJECT		UNIT	
BROE, WILLIAM V.		<b>DEPARTMENT OF STATE</b>	
<b>KEEP ON TOP OF FILE WHILE COVER IN EFFECT</b>			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (FORM 20-800-113)		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (FORM 20-800-113)	
A. TEMPORARILY FOR _____ DAYS - EFFECTIVE DATE-COB _____		DATE <b>1 JUNE 1969</b>	
B. CONTINUING AS OF COB			
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HRB 20-7)		SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HRB 20-7)	
ASCERTAIN THAT _____ W-2 BEING ISSUED. (HRB 20-7)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS.	
SUBMIT FORM 1327 FOR ANY CHANGE AFFECTING THIS COVER. (HRB 240-7#)		DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HRB 240-7#)			
SUBMIT FORM 2508 <input checked="" type="checkbox"/> FOR HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY			
<b>COVER HISTORY:</b> JUN 48 - FEB 51 HQ/OVERT FEB 51 - MAY 53 PHILIPPINES/STATE MAY 53 - MAY 61 HQ/OVERT MAY 61 - JUN 65 TOYKO/STATE JUN 65 - PRESENT HQ/STATE			
DISTRIBUTION: COPY 1 - HQ COPY 2 - OPERATING COMPONENT COPY 3 - CCS COPY 4 - HQ/RELIEVE COPY 5 - CCS - CORDS COPY 6 - CCS - FILE		 RP/gj	
JOHN 1551 - NO PREVIOUS EDITION 8-68		SECRET	
		CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF	

SECRET

19 May 59.

(Date)

File: 943

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

SUBJECT : William V. BROE

1. **Cover** arrangements ~~xxxxxxxxxxxxxx~~ have been completed for the above-named Subject.

2. Effective immediately, it is requested that your records be properly ~~xxxxxx~~ **reopened** to ~~xxxx~~ acknowledge Subject's current Agency employment to an external inquirer.

3. Operating component must take necessary action to ~~xxxxx~~ reopen telephone locator by submitting the Personnel Information Card, "Office File Copy," Form No. 642, to Machine Records Division, Office of the Comptroller, Room 107 Curie Hall, Attention: Miss Wenkenbach.

4. This memorandum confirms an oral request of 19 May 59 by Mr. E. C. Davies, Room 1608, "L" Building, Extension 2420.

*Paul R. Stewart*  
for HARRY W. LITTLE, JR.  
Chief, Central Cover Division

cc: SSO/OS  
Operating Division

THIS MEMO MUST REMAIN  
ON TOP OF FILE

14-12-463

AT

SECRET

25 March 1959

(Date)

File: 943

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

SUBJECT : William V. BROK

1. **Cover** arrangements ~~xxxxxxxxxxxxxx~~ have been completed for the above-named Subject.

2. Effective 30 March 1959, it is requested that your records be properly **blocked** ~~xxxxxxxx~~ to deny ~~xxxxxxxx~~ Subject's current Agency employment to an external inquirer.

3. Operating component must take necessary action to **block** ~~xxxxxxxx~~ telephone locator by submitting the Personnel Information Card, "Office File Copy," Form No. 642, to Machine Records Division, Office of the Comptroller, Room 107 Curie Hall, Attention: Miss Wenkentbach.

4. This memorandum confirms an oral request of 25 Mar 59 by Mr. E. C. Davies, Room 1608 "L" Building, Extension 2420.

*Paul P. Staudt*  
HARRY W. LITTLE, JR.  
Chief, Central Cover Division

cc: SSO/OS  
Operating Division

SECRET

THIS MEMO IS FOR OFFICIAL USE ONLY

Form 1580  
GSA GEN. REG. NO. 2  
1-64

74-118-40

27

[SECRET]

20 June 1957

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

THROUGH : Personnel Security Division  
Office of Security

SUBJECT : Mr. William V. Broe

1. **Cover** arrangements have been completed for the above named subject. Subject returned from TDY on 12 June 1957.
2. Effective immediately, it is requested that your records be properly **re-opened to acknowledge** subject's current Agency employment by an external inquirer.

*Edward J. Boston*  
For JOSEPH M. ADAMS  
Chief, Official Cover & Liaison, CCB

CC: PSD/OS

*Mr. Ed J. Boston  
cc: PSD/OS*

[SECRET]

S E C R E T

8 April 1957

(Date)

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

THROUGH : Personnel Security Division  
Office of Security

SUBJECT : Mr. William V. BROE

1. **Cover** arrangements have been completed for the above named subject. for TDY trip to FE area.

2. Effective immediately, it is requested that your records be properly **(block)** (REDACTED) to **(deny)** (REDACTED) subject's current Agency employment by an external inquirer.

xxxxxx

T.A.S.

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

cc: PSD/CS

THIS MESSAGE MUST REMAIN  
ON TOP OF FILE

S E C R E T

*JW*

SECRET  
(When Filled In)

BEG: 28 MAY 70

## NOTIFICATION OF PERSONNEL ACTION

OCC

1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)		
056735	BROE WILLIAM V		
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
CONVERSION FROM <b>FSR</b> STATUS		15 JUN 70	REGULAR
6. FUNDS ➡	V TO V	V TO CP	7. Financial Analysis No. Charged to 8. CSC OR OTHER LEGAL AUTHORITY
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0135-0620 (0000) 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
DDP WH OFFICE OF THE CHIEF		WASH., D.C.	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER DIV CH		0001	D
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP
GS		0136.01	13 1
17. SALARY OR RATE			
35505			

18. REMARKS  
WASH., D.C.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION	20. Status	21. OFFICE CODE	22. STATION CODE	23. INSTRUMENT CODE	24. Hires Date	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF DEI	28. SECURITY REG. NO.	29. SECURITY REG. NO.	30. SECURITY REG. NO.
56	10	510501	WH	75013	1	05 24 13					
31. REFERENCE		32. RETIREMENT DATA		33. SEPARATION DATA CODE	34. Commission / Classification Data				35. SECURITY REG. NO.		36. SECURITY REG. NO.
37. PAY PREFERENCE		38. SERV. COMP. DATA		39. CARRIER CARD DATA	40. MEDICAL / HEALTH INSURANCE				41. SOCIAL SECURITY NO.		
42. PRE-CDS CIVILIAN GOVERNMENT SERVICE		43. LEAVE DATA		44. MEDICAL TAX DATA		45. STATE TAX DATA					
46. CDS PAYROLL SERVICE		47. LEAVE CATE		48. MEDICAL TAX DATA		49. STATE TAX DATA					
48. CDS PAYROLL SERVICE		49. LEAVE CATE		50. MEDICAL TAX DATA		51. STATE TAX DATA					
52. BREAK IN SERVICE LESS THAN 1-45		53. LEAVE CATE		54. MEDICAL TAX DATA		55. STATE TAX DATA					
55. BREAK IN SERVICE MORE THAN 1-45		56. LEAVE CATE		57. MEDICAL TAX DATA		58. STATE TAX DATA					

SIGNATURE OR OTHER AUTHENTICATION

POSTED

EXCISE POST ALIAS  
ADMINISTERING AND  
CONTROLLING

SECRET

Page 31 At 17:55

**NOTIFICATION OF PERSONNEL ACTION**

~~POSTED~~

9-9.65 "u

FORM 145  
11-43

## **Use Previous Edition**

SECRET

**Table I**  
Estimated Mean Estimates  
of Sampling Error  
of Estimated Parameters

(When I See You)



SECRET  
(When Filled In)

ARE: 21 JULY 1961

## NOTIFICATION OF PERSONNEL ACTION

OOF

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)		3. EFFECTIVE DATE		4. CATEGORY OF EMPLOYMENT	
056735		BROE WILLIAM V.		07 23 61		REGULAR	
5. NATURE OF PERSONNEL ACTION				6. GRADE CENTER NO. CHANGING		7. GSC OR OTHER LEGAL AUTHORITY	
PROMOTION				2137 7351 1000		50 USC 403 a	
8. FUNDS				9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
				DOP FE FE/JAO TOKYO STATION OFFICE OF THE CHIEF		TOKYO, JAPAN	
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
1ST SEC POL OFF CHIEF OF STATION				3002		D	
14. CLASSIFICATION NUMBER (SEL NO. NO.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
FSR GS		0136.01		02 0		15255 16530	
18. REMARKS							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION	20. Grade	21. OFFICE CODE	22. Station	23. Interim	24. Rank	25. Date of Birth	26. Date of Grade
22	10	56300 FE	37587	1	3	08 24 13	07 23 61
28. ETC DATA	29. GRADE	30. GRADE	31. GRADE	32. GRADE	33. GRADE	34. GRADE	35. GRADE
36. RETIREMENT	37. SERV COMP DATE	38. GIVE COMP DATE	39. MIL SERV CRDIT TO 20	40. MEDICAL/HEALTH INSURANCE		41. SOCIAL SECURITY NO.	
FROM	MM DD YY	MM DD YY	MM DD YY	U - TEE	L - TEE	U - WORKER	WORKERS COMP
				E - NO	E - NO	E - NO	
42. PREVIOUS GOVERNMENT SERVICE DATA	43. LEAVE PAY	44. RETIRE TAX DATA	45. STATE TAX DATA				
FROM	CODE	FROM EXECUTIVE PAY	46. TAX EXEMPTION	FROM EXECUTIVE	CODE	IND TAX	STATE TAX
1. NO PREVIOUS SERVICE		1. NO EXECUTIVE PAY	1. NO TAX EXEMPTION	1. NO		1. NO	1. NO
2. NO BREAK IN SERVICE		2. NO EXECUTIVE PAY	2. NO TAX EXEMPTION	2. NO		2. NO	2. NO
3. BREAK IN SERVICE (NAME AND DATE)		3. NO EXECUTIVE PAY	3. NO TAX EXEMPTION	3. NO		3. NO	3. NO
4. BREAK IN SERVICE (NAME AND DATE)		4. NO EXECUTIVE PAY	4. NO TAX EXEMPTION	4. NO		4. NO	4. NO
SIGNATURE OR OTHER AUTHENTICATION							
POSTED <i>ad/02/01 71K</i>							

SECRET  
(When Filled In)

BWS: 8 MAY 1961

## NOTIFICATION OF PERSONNEL ACTION

ODF

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)				
056735	BROE WILLIAM V				
3. NATURE OF PERSONNEL ACTION					
INTEGRATION - DEPT. OF STATE					
4. PUNDS	5. TO 10 Y	6. TO 10 D			
	OF 10 Y	X OF 10 D			
7. ORGANIZATIONAL DESIGNATIONS					
DOP FE FE/JAO - TOKYO STATION OFFICE OF THE CHIEF					
TOKYO, JAPAN					
11. POSITION TITLE					
1ST SEC POL OFF CHIEF OF STATION					
12. POSITION NUMBER					
3002					
13. CARRIER SERVICE DETERMINATION					
0					
14. CLASSIFICATION SCHEDULE GS, RS, etc.					
FSR GS					
15. OCCUPATIONAL SERIES					
0136.01					
16. GRADE AND STEP					
02-0					
17. SALARY OR RATE					
15255 15515					
18. REMARKS ALL SICK AND 118 HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE DEPT. OF STATE. SUBJECT IS TO BE PAID THE DIFFERENCE BETWEEN CIA SALARY OF \$15515 AND FSR SALARY OF \$15255 TO BE PAID BY DEPT. OF STATE AND ALLOWANCES IN ACCORDANCE THEREWITH.					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION	20. ENLIST. DATE	21. SERVICE DIVISION	22. STATION	23. INDIGENEE CODE	24. Grade Code
4800	55 10	56300 FE	37587	I	03 24 13
25. RTE EXPIRES	26. SPECIAL REQUIREMENTS	27. RETIREMENT DATA	28. SEPARATION DATA CODE	29. CORRECTION/CANCELATION DATA	30. SECURITY DATA
					RIO NO
31. RET. PREFERENCE	32. SERV. COMP. DATE	33. LONG. COMP. DATE	34. MIL. SERV. CREDIT/LOSS	35. MEDICAL/HEALTH INSURANCE	36. SOCIAL SECURITY NO.
0000	NO 24 17	NO 24 17	0-100 0-20	0-WWII 0-Vietnam	
37. PREVIOUS GOVERNMENT SERVICE DATA	38. LEAVE CODE	39. FEDERAL TAX DATA	40. STATE TAX DATA		
0000	0- NO PREVIOUS SERVICE 1- NO SERVICE IN SERVICE 2- BREAK IN SERVICE - LESS THAN 10 MONTHS 3- BREAK IN SERVICE - MORE THAN 10 MONTHS	CODE	40- INDIVIDUAL TAX CODE 40- EXEMPTIONS 40- EDUCATED 40- NO TAX EXEMPT	CODE CODE CODE CODE	40- STATE TAX CODE 40- STATE EXEMPT
SIGNATURE OR OTHER AUTHENTICATION					
HOSTED 05/10/61 JK					

STANDARD FORM 50  
MAY 1942 EDITION  
PREVIOUS EDITIONS ARE OBSOLETE  
U. S. CIVIL SERVICE COMMISSION  
CHAPTER 16, FEDERAL PERSONNEL REGULATIONS

## ALL INTELLIGENCE AGENCIES

## NOTIFICATION OF PERSONNEL ACTION

EWS

1. NAME (MR - MRS - MISS - ONE ADDITIONAL, IF APPLICABLE, WHICH IS NOT APPROVED)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
MR. WILLIAM V. BRAKE	26 Aug 1913		17 June 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	19 Jun 1955	50 USCAB 403 J	
FROM		TO	
Area Ops Officer SFV-1689 11 GIC GS-0136.01-15 \$107,300.00 per annum	8. POSITION TITLE	Area Ops. Officer (Sr. Ch.) SF-161 11 GIC GS-0136.01-15 \$107,300.00 per annum	
DDP/7B China Mission Office of the Chief	9. SERVICE, SENIOR GRADE, SALARY	DDP/7B Branch 2, China Office of Chief	
Tokorozawa, Japan	10. ORGANIZATIONAL DESIGNATIONS	Washington, D. C.	
11. HEADQUARTERS		12. FIELD OR DEPTL.	
<input checked="" type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION	
HOME <input type="checkbox"/> WORK <input type="checkbox"/> OTHER <input type="checkbox"/> PFT <input checked="" type="checkbox"/> CURRENT DISABILITY RATING		NEW <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> REAL	SD-01
<input checked="" type="checkbox"/>			
15. RACE	16. APPROPRIATION	17. SUBJECT TO C. S. ALIGNMENT ACT CPL-NYC Yes	18. DATE OF APPROPRIATION DRAFT AFFIDAVITS (ACCORDING TO LAW) STATE: VP
W	FROM 5-3715-55-167 5-3700-80		
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.			
J. C. T. D. 24 JUN 1955			
Transfer TO Vouchered funds FROM Unvouchered funds.			
ENTRANCE PERFORMANCE RATING: Director of Personnel			
4. PERSONNEL FOLDER COPY			

777 6/22/55

U. S. GOVERNMENT PRINTING OFFICE: 1953 - 5300-1

~~SECRET~~

7019  
10/25/84

**REQUEST FOR PERSONNEL ACTION**

UNIVERSITY OF TORONTO LIBRARIES

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. REPORTING STA.	4. DATE OF RECEIPT			
Mr. William V. ERICK		24 Aug 1913		7 Sept 54			
5. REASON OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, presentation, separation, etc.)		6. EFFECTIVE DATE A. PREFERENCE:  Reassignment  ASAP					
		B. APPROVED: OCT 10 1954					
7. POSITION (Specify whether establish, change grade or rate, etc.)							
<b>FROM:</b> Area Ops Officer BFF1126-15 GS-0135.01-15 \$10,600 p/a DDP/PK China Mission Office of the Chief <b>Yokosuka, Japan</b>		<b>8. POSITION TITLE AND NUMBER</b> <b>B. SERVICE, GRADE, AND SALARY</b> <b>C. ORGANIZATIONAL DESIGNATIONS</b> <b>D. INSTRUCTIONS</b>	<b>TO:</b> Area Ops Officer BFF1129 GS-0135.01-15 \$10,600 p/a DDP/PK China Mission Office of the Chief <b>Yokosuka, Japan</b>				
<input checked="" type="checkbox"/>	FIELD	<input type="checkbox"/>	DEPARTMENTAL	<input checked="" type="checkbox"/>	FIELD	<input type="checkbox"/>	DEPARTMENTAL

#### A. REASSES (One response if necessary)

*Robert McNamee*  
C. CLIMENTAINE, PARIS-ORLÉANS, FRANCE

www.english-test.net

For additional information call 800-999-4636 or telephone extension 7000.

卷之三

13. VIETNAM PROBLEMS

**III. POSITION CLASSIFICATION ACTION**

#### 3.1. 計算機輔助工程和運算模型

11610.00

POSTED

18. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. GEN. GR POS CONTROL		17 Sept 51	
C. CLASSIFICATION			
D. PLACED	AB	11/11/51	22 Sept 51
E.			
F. APPROVED	Ralph S. Pollard		MEL 001 17 Sept 51

Spiral

Zoltan  
44  
Bard

STANDARD FORM 52 FEDERAL GOVERNMENT USE ONLY U. S. GOVERNMENT PRINTING OFFICE: 1954 GSA GEN. REG. NO. 27, 1954 GSA GEN. REG. NO. 27, 1954		D-6									
<b>REQUEST FOR PERSONNEL ACTION</b>		UNNUMBERED									
<b>REQUESTING OFFICE:</b> 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 date on reverse.											
<b>1. NAME (Mr. - Miss - Mrs. -- Give given name, initials(s), and surname)</b> <b>Mr. William V. ROCHE</b>		<b>2. DATE OF BIRTH</b> <b>26 Aug. 1913</b>	<b>3. GRADE OR RANK</b> <b>ASAP</b>								
<b>4. DATE OF ACTION REQUESTED</b> <b>A. PROMOTION (Specify whether appointment, promotion, separation, etc.)</b> <b>Demotion</b>		<b>5. EFFECTIVE DATE &amp; PROPOSER</b> <b>ASAP</b>	<b>6. C. S. OR OTHER LEGAL AUTHORITY</b> <b>AUG 1 1954</b>								
<b>B. POSITION (Specify what was established, change grade or rank, etc.)</b> <b>I. O. (Deputy Chief) S-2 GS-132-14 \$9800 DDP/FE YOKOYAMA (Field) Office of Chief of Mission Yokosuka, Japan</b>		<b>7. POSITION TITLE AND NUMBER</b> <b>Area Ops Officer DPP 1126-15/10 GS-0132-01-15 \$10,800 DDP/FE China Mission Office of Chief Yokosuka, Japan</b>									
<input type="checkbox"/> <b>REGULAR</b> <input type="checkbox"/> <b>DEPARTMENTAL</b>		<input type="checkbox"/> <b>REGULAR</b> <b>DEPARTMENTAL</b>									
<b>8. REMARKS (Give reasons if necessary)</b> <b>Personnel Data Sheet, Recommendation, and Position Description attached.</b>											
<b>9. APPROVING OFFICER SIGNATURE</b> <b>H. C. GLENNISTER, Jr. Personnel Officer</b>		<b>10. APPROVAL APPROVED BY</b> <b>Signature: G. Keith Reid</b> <b>Title: DDP/Palmer</b>									
<b>11. FOR ADDITIONAL INFORMATION, CODE (Name and telephone extension)</b> <b>Thomas A. Johnson, Ext. 2105</b>		<b>12. POSITION CLASSIFICATION ACTION</b> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">NEW</td> <td style="text-align: center;">VIEK</td> <td style="text-align: center;">L.A.</td> <td style="text-align: center;">REPL.</td> </tr> <tr> <td colspan="4" style="text-align: center;">SD FT</td> </tr> </table>		NEW	VIEK	L.A.	REPL.	SD FT			
NEW	VIEK	L.A.	REPL.								
SD FT											
<b>13. VETERAN PREFERENCE</b> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">REG</td> <td style="text-align: center;">O&amp;P</td> <td style="text-align: center;">S-PF</td> <td style="text-align: center;">10 POINT</td> </tr> <tr> <td colspan="4" style="text-align: center;">SEPARATE</td> </tr> </table>		REG	O&P	S-PF	10 POINT	SEPARATE				<b>14. TITLE: 1 TO 5 ELIGIBILITY PERIOD (1950-1960)</b> <b>15. GRADE: 5-3715-55-167</b> <b>16. APPROVAL DATE: JUN 17 1954</b> <b>17. APPROVAL APPROVING COMMITTEE: CAREER SERVICE BOARD</b> <b>18. APPROVAL APPROVING COMMITTEE: CAREER SERVICE BOARD</b>	
REG	O&P	S-PF	10 POINT								
SEPARATE											
<b>19. STANDARD FORM 50 REMARKS</b> <div style="border: 1px solid black; padding: 10px; text-align: center;"> <b>POSTED</b>  <i>Am</i>      <b>6 AUG 1954</b> </div>		<b>19. APPROVAL APPROVING COMMITTEE: CAREER SERVICE BOARD</b> <b>20. APPROVAL APPROVING COMMITTEE: CAREER SERVICE BOARD</b>									
<b>21. CLEARANCES</b> <b>A.</b>		<b>INITIAL OR SIGNATURE</b> <b>Initials: M. J. R. 54</b>									
<b>B. ECR. OR POS. CONTROL</b> <b>C. CLASSIFICATION</b> <b>D. PLACEMENT OR EMPL.</b> <b>E.</b>		<b>DATE</b> <b>JUN 17 1954</b>									
<b>F. APPROVED BY</b> <i>Joseph B. Rogers</i>											

STANDARD FORM 52 REPRODUCED BY THE U. S. GOVERNMENT PRINTING OFFICE FOR THE USE OF THE ARMY AND NAVY 1950 EDITION GSA GEN. REG. NO. 27, 1950		SECRET	7/19/57 Sear								
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 date on reverse.											
1. NAME (Mr. - Miss - Mrs. - One given name, middle initial, and surname) <b>Mr. William V. BROWN</b>		2. DATE OF BIRTH <b>24 Aug. 1913</b>	3. REQUEST NO. <b></b>								
4. DATE OF REQUEST <b>19 May 1954</b>		5. APPROVAL DATE <b>7 June 1953</b>	6. DATE OF RELEASER <b></b>								
7. NATURE OF ACTION REQUESTED: A. POSITION (Specify whether appointment, promotion, separation, etc.) <b>Reassignment(Correction)</b> B. POSITION (Specify whether established, change grade or title, etc.)		8. EFFECTIVE DATE <b>A. PROPOSED:</b>	9. C. S. OR OTHER LEGAL AUTHORITY <b></b>								
10. POSITION TITLE AND NUMBER <b>Chief of Station 5-476</b> GS-132-14 \$9800.00 per annum DDP/FZ FM → External Unit A  Manila, R. P.		11. SERVICE GRADE AND SALARY <b></b> 12. ORGANIZATIONAL Designations <b></b> 13. HEADQUARTERS <b></b>	14. O. (Deputy Chief) 8-52 GS-132-14 \$9800.00 per annum DDP/FZ FRU/FEC (FM) Office of Chief of Mission <b>Tokosuka, Japan</b>								
15. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		16. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL									
A. REMARKS (Use reverse if necessary)											
B. REQUESTED BY (Name and Grade) <b>Position Control</b>		C. REQUEST APPROVED BY Signature: _____ Title: _____ <i>Wm. J. BROWN 7 JUN 1954</i>									
D. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Audrey Meadows, Ext. 8657</b>											
E. VETERAN PREFERENCE <input checked="" type="checkbox"/> HOME <input type="checkbox"/> WORK <input type="checkbox"/> OTHER <input type="checkbox"/> P.T. <input type="checkbox"/> DEFENT <input checked="" type="checkbox"/> TITLE OTHER <b>X</b>		F. POSITION CLASSIFICATION ACTION <table border="1"><tr><td>SAW</td><td>VAC</td><td>I.A.</td><td>REAL</td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></table>		SAW	VAC	I.A.	REAL				
SAW	VAC	I.A.	REAL								
G. SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE <b>M</b>		H. APPROPRIATION <b>4-3780-55-006 4-3715-55-004</b>									
I. PAY <b>FM</b>		J. APPROPRIATION ACT 1. APPROPRIATION ACT 2. APPROPRIATION ACT <b>Yes</b>									
K. STANDARD FORM 50 REMARKS  "This action corrects Reassignment notification dated 26 Feb. 53, to delete the <b>FSS</b> Status, previously shown. This action also corrects Item's 4B and 10, to show the correct position title previously shown as Chief(Intelligence Officer) and to show the correct breakdown, previously shown as DDP/FZ, Manila-Air Attaché, External Unit A on the "From" side of the action."		L. DATE OF APPROVEMENT M. LOCAL PREFERENCE <input type="checkbox"/> CLAIMED <input checked="" type="checkbox"/> PROVED STATE: <b>Va.</b>									
N. CLEARANCES		O. INITIAL OR SIGNATURE									
P. APPROVAL BY <b>F</b>		Q. DATE									
R. CCL. OR POS. CONTROL		S. CLASSIFICATION									
T. PLACEMENT OR EMPL.		U. REMARKS									
V. APPROVAL BY <b>F</b>		W. DATE									
X. CLASSIFICATION											
Y. PLACEMENT OR EMPL.											
Z. APPROVAL BY <b>F</b>											

Tolson  
6/11/53  
gj F1

<small>STANDARD FORM 52 FEBRUARY 1948 G-1, CIVIL SERVICE COMMISSION REGULATIONS--PERSONNEL REPRINTED--FEBRUARY, 1950 REFERS TO: REGULATIONS CIVIL SERVICE COMMISSION APPROVED BY THE CIVIL SERVICE COMMISSION APRIL 1948</small>															
<b>REQUEST FOR PERSONNEL ACTION</b>		UNVOUCHERED													
<b>REQUESTING OFFICE:</b> 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., Mrs., or Miss; one given name, initials, and surname) <b>BROS, William V., Mr.</b>		2. DATE OF BIRTH <b>24 Aug. 1913</b>	3. RESUME NO. <b>26 Feb 1953</b>												
4. NATURE OF ACTION REQUESTED: A. PROMOTION (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b> B. PAY RATE (Specify whether establish, change grade or rate, etc.)		5. EFFECTIVE DATE <b>19 June 53</b>	6. C. S. OR OTHER <small>LEGAL AUTHORITY</small> <b>IT</b>												
		7. APPROVED: <b>J. C. Tolson, Chief, FBI</b>													
FROM— <b>Chief (Intelligence Officer)</b> ( #176 ) <b>ATTACHE (POLOFF)</b> GS-14 \$9600.37800 <b>TSS-3 THO</b> DD/P/E/C <b>IN HANNAH-AN-ATTACHE</b> <b>EXTERNAL UNIT #1</b> Manila, P. R.		8. POSITION TITLE AND <small>NUMBER</small> <b>SERGEANT</b> GS-11 \$9600.37800 <b>SAME</b> DD/P/E/C <b>IN-THO/SEC (FIO.)</b> Office of Chief of Mission <b>Tokosuka, Japan</b>	TO— <small>Position, Grade, and Number</small> <b>Office of Chief of Mission</b> <b>(#177)</b> <b>(GS-14)</b> <b>SERGEANT</b> GS-11 \$9600.37800 <b>SAME</b> DD/P/E/C <b>IN-THO/SEC (FIO.)</b> Office of Chief of Mission <b>Tokosuka, Japan</b>												
9. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		10. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/>	11. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL												
12. RESUMES (Use reverse if necessary)															
<i>Approved DD/P/Career Service Board 21 Apr. 53 Re-durrected for immediate funds in returning PC &amp;</i>															
13. APPROVALS <b>Bernard von Arnim, Ext. 2185</b>		APPROVED BY <b>FBI CAREER SERVICE BOARD</b> DATE: 19 March 53 Signature: <i>B. von Arnim</i> Title: <i>FBI/Po.</i>													
14. VETERAN PREFERENCE <table border="1"> <tr> <th>ONE</th> <th>WIFE</th> <th>OTHER SP.</th> <th>10 POINT</th> </tr> <tr> <td>X</td> <td></td> <td></td> <td>ONE 10 POINT</td> </tr> </table>		ONE	WIFE	OTHER SP.	10 POINT	X			ONE 10 POINT	15. POSITION CLASSIFICATION ACTION <table border="1"> <tr> <th>NEW</th> <th>VICE</th> <th>I.A.</th> <th>REL.</th> </tr> </table>		NEW	VICE	I.A.	REL.
ONE	WIFE	OTHER SP.	10 POINT												
X			ONE 10 POINT												
NEW	VICE	I.A.	REL.												
16. SEX: <input checked="" type="checkbox"/> RACE: <input checked="" type="checkbox"/> FROM: <b>3780-55-004</b> TO: <b>3715-55-004</b>		17. SUBJECT TO C. S. <small>PROMOTION ACT (1950-51)</small>													
18. DATE OF APPOINTMENT <small>AFFILIATION (RECESSIONS ONLY)</small>		19. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <i>Virginia</i>													
20. STANDARD FORM 50 REMARKS <i>MAY</i>															
21. CLEARANCES		INITIAL OR SIGNATURE DATE <b>REMARKS</b>													
A. B. CIV. OR POS. CONTROL C. CLASSIFICATION D. PLACEMENT OR ENPL E.															
22. APPROVED BY <b>John T. Tolson 6/5/53</b>															
<b>POSTED</b> <i>10/10/53</i> <b>SECURITY CONCERNED</b> <i>W. A. Schaefer 6/5/53</i> <i>per MBS</i>															
<b>CORRIS</b>															

STANDARD FORM 52 DRAFTED BY THE U. S. GOVERNMENT PRINTING OFFICE JULY 1947, RE-ISSUED 1950. GENERAL REGULATIONS FEDERAL GOVERNMENT		<b>SECRET</b>	Security Information	<i>J. L. B. 16 May 53</i>
<b>REQUEST FOR PERSONNEL ACTION</b>		<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 date on reverse.				
1. NAME (Mr. — Mrs. — Miss — One given name, initial(s), and surname)		2. DATE OF BIRTH		3. REQUEST NO.
Mr. William V. Broe		24 August 1913		24 June 53
4. NATURE OF ACTION REQUESTED: A. PROMOTION (Specify whether appointment, promotion, separation, etc.)		5. EFFECTIVE DATE A. PROMOTED:		6. C. S. OR OTHER LEGAL AUTHORITY
<i>Conversion from 153 Status</i>		C.O.B. 16 May 53		<i>153</i>
B. POSITION (Specify whether establish, change grade or title, etc.)		8. APPROVED:		<i>C. O. B. 16 May 1953</i>
<b>FROM:</b> Chief of Station <i>S-176</i> <b>Attache (POLOFF)</b> GS-14      \$9800.00 p/a <i>no change</i> <b>PSS-3</b> <i>\$8421.00</i> p/a DDP/PS <i>770</i> <del>Nonresident Attache (External Unit)</del> FE-4 <i>Set 4</i> Manila, R. P.		<b>TO:</b> Chief of Station <i>S-176</i> GS-14      \$9800.00 p/a <i>no change</i> DDP/PS Nonresident Attache (External Unit) FE-4 <i>Set 4</i> Manila, R. P.		<b>10. POSITION TITLE AND NUMBER</b> <b>11. GRADE AND SALARY</b> <b>12. ORGANIZATIONAL DESIGNATION</b> <b>13. HEADQUARTERS</b> <b>14. FIELD OR DEPARTMENTAL</b>
7. REMARKS (Use reverse if necessary) This is a conversion from the Dept. of State cover Subject's employment with Dept. of State terminated C.O.B. 16 May 1953 Branch 3 - Philippines, Australia, and New Zealand      Slot #176		9. REQUEST APPROVED BY Signature: <i>Davis B. Powell</i> Title: <i>F-1/CMO</i> <i>J. L. B. 16 May 53</i> <i>DDP/PS/DMW</i> <i>25 June 53</i>		
15. APPROVAL FOR ADDITIONAL INFORMATION (Name and telephone extension) Dr. E. D. Dustin, Ext. 3472		16. POSITION CLASSIFICATION ACTION NEW      VEC      T.S.      SEAL <i>-40- PT</i> 17. PLACEMENT ALT (EVS-500) Yes		
18. STANDARD FORM 50 REMARKS  <i>16 May 53 J. L. B.</i>		19. DATE OF APPROVAL APPROVED BY FI CAREER SERVICE BOARD DATE: JUN 25 1953  <i>Thurston 6/25/53</i>		
20. CLEARANCES      INITIAL OR SIGNATURE      DATE A. B. GEN. OR POS. CONTROL C. CLASSIFICATION D. PLACEMENT OR ENPL. E.		21. SECURITY INFORMATION SECRET Security Information		
F. APPROVED BY <i>16 May 53 J. L. B.</i>		22. APPROVAL BY SECRET Security Information		

SECRET

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME	William Vincent Broe	
NATURE OF ACTION	Promotion	
	DATE FROM	DATE TO
	2 August 1951	14 October 1951
TITLE	ATTACHE (Pal Off) Chief (Intelligence Officer)	
GRADE AND SALARY	PSS-3 \$7710.00 08-13 \$7600.00	
OFFICE	OSO	
DIVISION	FDZ	
BRANCH	IV Sp Ops Unit	
OFFICIAL STATION	Manila, P. R.	
APPROVAL		
QUALIFICATION	FOR ASSISTANT DIRECTOR	EXECUTIVE
<i>D. Murchale</i> 10-2-51 F.G.C. <i>Robert G. Stuckless S. C. Christopher</i>	<i>Asst Dir</i> SPECIAL OFFICER	
POST CONFIDENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS	<input type="checkbox"/> YES	<input type="checkbox"/> NO
PATH OF OFFICE AND NO STRIKE APPROVED EXECUTED ON		
SECURITY CLEARED ON		
OVERSEAS AGREEMENT SIGNED		
ENTITLED ON DUTY		
SIGNATURE OF AUTHENTICATING OFFICIAL		
REMARKS:	Pursuant to DCL 1 Entitled to \$7710.00 Entitled to \$8800.00 Effective date of last promotion: 6 August 1950 132 Difference between \$8800.00 and \$7710.00 to be paid by CIA	
COPY IN PAYROLL FILES CONFIDENTIAL FUNDS BOARD		

SECRET

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME <b>BROE, William Vincent</b>		DATE 21 June 1951
NATURE OF ACTION <b>Transfer</b>		EFFECTIVE DATE <b>22 July 51</b>
TITLE <b>Attache (Polit. Off.)</b> (Intelligence Officer - Chief)	FROM <b>FSS-3, \$7,710.00</b> (GS-13, \$7,600.00)	TO <b>Attache (Polit. Off.)</b> (Chief of Station, Man. Reg. B. <b>FSS-3, \$7,710.00</b> (GS-13, \$7,600.00))
	GRADE AND SALARY * <b>GS-13, \$7,600.00</b>	OFFICE <b>OSO</b>
DIVISION <b>FDI/SEA</b>	DIVISION <b>FDI/SEA</b>	BRANCH <b>Branch IV, Slot #1</b>
OFFICIAL STATION <b>Manila, Philippine Islands(R.U.)</b>	Branch IV, Slot #179 <i>Sy Spesia</i>	
APPROVAL		
QUALIFICATIONS <b>R/Gay Hart</b> CLASSIFICATION 15 July 51 F-605 <b>Thomas M. Gahan</b>	FOR ASSISTANT DIRECTOR <b>Cross</b> PERSONNEL OFFICER <b>D. McNeely 17 1951</b>	EXECUTIVE
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> <input checked="" type="checkbox"/>		
DATH OF OFFICE AND NO STRIKE ATTENDANT EXECUTES OR _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
CONSTATUTION OF AUTHORITY FOR THIS OFFICER		
REMARKS:  * Subject integrated into the Department of State as FSS-3 with a salary of \$7,710.00. No differential is to be paid since subject's authorized CIA grade and salary is GS-13, \$7,600.00.		/SO  <i>EST 21 Feb 51 CONFIDENTIAL PERIOD - 3 - 22 JULY 51</i>  <i>JL</i>

SECRET

Copy to Mission Heads

7/16,  
1951

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME <b>BROOF, William Vincent</b>		DATE <b>20 February 1951</b>
CATEGORY OF ACTION <b>Integration</b>		EFFECTIVE DATE <b>21 February 1951</b>
TITLE  GRADE AND SALARY  OFFICE  DIVISION  BRANCH  OFFICIAL STATION	From	To
	Intell. Off. (Chinf) GS-13	Attache (Political Officer)
	GS-13 \$7,600.00	PSS-3 \$7,710.00
	OSO	OSO
	FBI/SPA	FBI/SEA
	Manila (Research Unit)	Manila (Research Unit)
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	<i>KWJ/BL</i>
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER		
REMARKS:		
<ul style="list-style-type: none"> <li>* Subject <b>Integrated into the Department of State as PSS-3</b> with a salary of \$7,710.00. No differential is to be paid since subject's authorized CIA grade and salary is GS-13, \$7,600.00.</li> </ul> <p>Subject is due a lump sum payment for annual leave to be paid up to 20 February 1951.</p>		
<div style="text-align: center; border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <b>POSTED</b>  <i>OK 27 Feb</i> </div>		

SECRET

GPO 43-540539

27-11-1-25

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT : BROE, William V. (1 April 1964 - 31 March 1965)

1. Mr. Broe's performance as Chief of Station, Tokyo during the reporting period is best described as outstanding.
2. For over two years, Mr. Broe has struggled with the problems in Japan of reducing the size of the Agency's mission and of developing appropriate areas of clandestine concentration. During the past year, he has effectively gotten the whole mechanism to work, with a marked increase in foreign intelligence and an unprecedented emergence of the Station, through contacts he and his associates have developed, as a channel for political action. Through his skillful assistance to and cultivation of the **Ambassador**, Mr. Broe has placed CIA in a position in Japan where the Station Chief and the Agency are accepted by the top levels of the **Japanese Government** as a useful channel and as a dependable organization for collaboration. This high level connection is of tremendous value in advancing political intelligence objectives as well as an essential tool for indirect and unofficial manipulation of situations of key interest to both the **Japanese** and the U.S. governments.
3. In the management of the Station, Mr. Broe continues to be his old effective self. He is able to get a good deal of mileage out of the personnel assigned to him and to increase their effectiveness through his own personal leadership. In all this, he has displayed an excellent sense of cost consciousness in the management of the Station.
4. In sum, Mr. Broe has brought Tokyo Station under his tenure to a new role appropriate to the changing times. CIA along with the U.S. Government is now in a better position to deal with an **independent Japan** which is now looking at **Asia** through its own eyes.

*Robert J. Myers*  
Deputy Chief, Far East Division

This fitness report will be shown  
to Mr. Broe when he returns to  
Headquarters.

\_\_\_\_\_ Date \_\_\_\_\_

C

SECRET

9 May 1964

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: BROE, William V. (12 February 1963 - 31 March 1964)

1. Mr. Broe's performance as Chief of Station, Tokyo for the period 12 February 1963 to 31 March 1964 can be characterized as strong.
2. Mr. Broe has effectively directed the operations of a station with many targets. He has concentrated the potential represented by the personnel under his authority on the most important targets and firmly discarded marginal activities. In his supervision of the work of the sub-units of his station, such as the China section, Soviet section and Korean section, he has been effective in encouraging them to vigorous activity but has also asserted the necessary control and guidance from his level. Mr. Broe has maintained excellent relationships with other American services and his coordination process is a model. He has at the same time maintained personal contacts with leading Japanese, both official and unofficial, and has used these both for intelligence and for action purposes. He has wisely targeted the covert action potential of the station toward critical targets and deliberately eliminated marginal efforts. Mr. Broe has on his own initiative made certain recommendations for the reduction of the personnel and expenditures of his station to help meet crises in other areas. In all of this activity, Mr. Broe has reaffirmed his qualities of leadership and supervisory capacity and has demonstrated a full consciousness of the importance of cost.

*W.F. Colby*  
William F. Colby  
Chief, Far East Division

This fitness report will be shown to Mr. Broe when he returns to Headquarters.

*William V. Broe May 3 1964*  
Date

SECRET



Etd

MEMORANDUM FOR: Director of Personnel  
SUBJECT: Fitness Report - Mr. William V. Broe

AS-1

1. This memorandum in lieu of Fitness Report is submitted on Mr. William V. Broe, Chief of Station, Tokyo to cover the period 1 June 1961 to 11 February 1963.

2. Mr. Broe has directed one of the most complicated and important stations in the Far East area with his accustomed skill, intelligence and delicacy. He has conducted a major reorganization of the Agency's activities in Japan and substantially reduced its total commitment there. At the same time he has kept a firm eye on the need for coverage of important targets and has been particularly severe with non-essential or marginal activities. In the Station itself he has directed a complicated structure, with perhaps the largest number of **outside cover** cases (with all the difficulties they bring) in the area. He has maintained the Station's relationship and contacts with the Ambassador and the Embassy in an excellent manner, and it is now considered a full partner in **Japanese** affairs by the Ambassador. He has maintained extensive and important **liaison** contacts with **Japanese** agencies and at the same time kept a high degree of effort on the **unilateral targets** in the area. He has been particularly effective in managing our relationships with the U.S. military intelligence Headquarters covering the Far East which are **concentrated in Japan**. In all of these he has been firm and intelligent in his approach.

19 MAR 1963

DNC

SECRET

RECORDED  
CSRD

26 JUL 1960

MEMORANDUM FOR: Director of Personnel

SUBJECT: Memorandum in lieu of Fitness Report  
of Mr. William V. Broe, GS-16,  
covering period from March 1959  
through 25 July 1960.

Subject is Deputy Chief of the Far East Division and has served in that capacity during the entire 23 months of my tenure as Chief of the Division as well as for some months under my predecessor. He also served as my deputy in 1954-1955 at the **China Base at Yokosuka, Japan.** I have, therefore, had ample opportunity to appraise subject's performance under a great variety of circumstances, both in the field and at Headquarters.

Subject is an outstanding manager in the Clandestine Services field. His operational judgment is wholly reliable, he grasps and retains complex details and produces sound and intelligent solutions to operational problems. He is very strong in administration and is particularly adept at personnel management. He has a deep and encyclopedic knowledge of the people in the Far East Division; his approach is personal and sympathetic but his hand is firm when firmness is required. He has been particularly successful in solving personnel assignment problems by matching capabilities to requirements.

In his present job as Deputy Chief of an area division, I do not believe that subject has an equal. This would entitle him, in my opinion, to a rating of "7" in Section B of the Fitness Report form.

SECRET

7-18-60 8242

RECORDED  
CS19

26 JUL 1960

**MEMORANDUM FOR: Director of Personnel**

**SUBJECT:** Memorandum in lieu of Fitness Report  
of Mr. William V. Broe, GS-16,  
covering period from March 1959  
through 25 July 1960.

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7/28/60

SECRET  
*(Do not print)*37 ✓  
T-27

## FIELD FITNESS REPORT

~~COPED~~

- The Fitness Report is an important factor in organization personnel management.  
 1. The organization selection board will information of value when considering the utilization of an individual for membership in the career staff; and  
 2. A periodic record of job performance is an aid to the effective utilization of personnel.

## INSTRUCTIONS

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

TO THE FIELD 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

exercised by this day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisor 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, or that in a general way he has been where he ~~should~~ *is* ~~been~~ *now*.

*Rod 5/18/55*

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

## SECTION I

LEAVE BLANK - FOR HEADQUARTERS USE ONLY	1. DATE OF BIRTH	2. SEX	3. SERVICE DESIGNATION
WILLIAM VINCENT FITZGERALD	24 Aug. 1913	M	<del>SP4</del> D1 ✓

4. GRADE      5. STATION DESIGNATION (Current)  
**GS-15**      **China Mission Headquarters (Tokoguka)**

6. DUE DATE OF THIS REPORT      7. PERIOD COVERED BY THIS REPORT (Inclusive dates)  
**30 November 1954**      **23 June 1954 to 30 November 1954**

## SECTION II (To be completed by field supervisor)

8. CURRENT POSITION      9. DATE ASSUMED RESPONSIBILITY FOR POSITION  
**Deputy Chief of Mission**      **01 Dec. 1954**      **15 December 1953**

10. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)

Deputy Chief, China Mission. Subject acts as general manager of the Mission Headquarters and in the absence of the Chief of Mission subject acts as Chief of Mission.

## SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

## AUTHENTICATION OF REPORT AND SIGNATURES

1. NAME OF RATER (Type)	2. NAME OF REVIVING OFFICIAL IN FIELD (Type)
<b>WILLIAM FITZGERALD</b>	<b>HAROLD E. O'LEARY</b>
3. THIS REPORT <input checked="" type="checkbox"/> WAS <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.	
4. DATE REPORT AUTHENTICATED AT HQS.	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE FITNESS REPORT AND SIGNATURES
<b>25 March</b>	<b>Frank J. Williams</b>

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

Off

**Recommendation for Honor or Merit Award**  
**William V. Broe, Distinguished Intelligence Medal**

After an active and successful career as a Special Agent in the FBI, Mr. Broe entered the Agency in June 1948 and was assigned as the Southeast Asia Branch Chief in the Far East Division. His ability to make decisions, work effectively with both supervisors and subordinates, plus his dependability, initiative and attention to the broader aspects of his work were soon noted and have continued to characterize his long and productive career in the CIA.

In recognition of his long range potential, Mr. Broe was assigned to Manila in 1951 as the Chief of Station. In 1953 he was transferred to the important post of Deputy Chief of the China Mission **In Japan**. Here his leadership qualities were fully demonstrated. His skill in directing an imaginative, aggressive, operational program, while at the same time tempering his actions with mature judgment and smooth management talent, marked him as an officer who could assume even greater responsibilities. At this time his outstanding strength of dealing with people became clearly evident. Mr. Broe was assigned to the Chief of the China Branch in FE Headquarters in 1955. He successfully managed the large, complex branch with a high degree of skill. His enthusiasm for his work was an example for his subordinates.

His superior performance of duty was recognized with his being named the Deputy Chief of the FE Division in 1958. The late Desmond Fitzgerald in evaluating Mr. Broe's performance of duty in this position, made the following comments which subsequent supervisors continued to agree with:

"Mr. Broe is an unusually strong supervisor. His flair for warm but impartial relationships with subordinates has enabled him to develop a first hand understanding of the capabilities, shortcomings and problems of a very large proportion of all FE Division personnel. His direction does not lack firmness but is expressed in such a way that feelings are considered and best results are achieved."

CONFIDENTIAL

SECRET

(When Filled In)

## QUALIFICATIONS UPDATE

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

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

Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

## SECTION I

## BIOGRAPHIC AND POSITION DATA

EMP. SER. NO.	NAME (Last-First-Middle)	DATE OF BIRTH	SS
054735	Browne William O.	Aug 1912	0

## SECTION II

## EDUCATION

## HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	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	NO. SEM/PTS. HRS. (Semester)
	MAJOR	MINOR				

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

## OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

## SECTION III

## MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY

2. NAME OF SPOUSE (Last) (First) (Middle) (Position)

3. DATE OF BIRTH 4. PLACE OF BIRTH (City, State, Country)

5. OCCUPATION 6. PRESENT EMPLOYER

7. CITIZENSHIP 8. FORMER CITIZENSHIP COUNTRY(S) 9. DATE U.S. CITIZENSHIP ACQUIRED

## SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
<input type="checkbox"/> ADD X <input checked="" type="checkbox"/> Bellerie Bonnie J.	Daughter	17 September 1945	USA	Kensington, Maryland
<input type="checkbox"/> ADD X <input checked="" type="checkbox"/> Bellerie Susan C.	Daughter	28 December 1947	USA	Solon, Ohio

SECRET

(Former Policy 60)

<b>REQUEST FOR MEDICAL EVALUATION</b>		<b>DATE OF REQUEST</b> <b>22 March 1966</b>
<b>1. NAME (Last, First, Middle)</b> <b>BROE, William V.</b>	<b>2. POSITION TITLE</b> <b>Ops Officer/Cb. Mgr</b>	<b>3. GRADE</b> <b>GS-10</b>
<b>4. OFFICE, DIVISION, BRANCH</b> <b>DDP/HM/Chief</b>	<b>5. EMPLOYEE'S CAT.</b> <b>S103</b>	
<b>6. PURPOSE OF EVALUATION</b>		
<input checked="" type="checkbox"/> <b>PRE-Employment</b> <input type="checkbox"/> <b>ENTRANCE ON DUTY</b> <input type="checkbox"/> <b>TDY STANDBY</b> <input type="checkbox"/> <b>SPECIAL TRAINING</b> <input type="checkbox"/> <b>ANNUAL</b> <input type="checkbox"/> <b>RETURN TO DUTY</b> <input type="checkbox"/> <b>FITNESS FOR DUTY</b> <input type="checkbox"/> <b>MEDICAL RETIREMENT</b>		
<input checked="" type="checkbox"/> <b>OVERSEAS ASSIGNMENT</b> <div style="border: 1px solid black; padding: 5px;"> <b>6TD</b>  <b>29 April - 13 May 1966</b>  <b>STATION</b>  <b>See comment &amp;</b>  <b>TDY OR PCS</b>  <b>TDY</b>  <b>TYPE OF COVER</b>  <b>State</b>  <b>NO. OF DEPENDENTS TO ACCOMPANY</b>    <b>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (IF ANY ATTACHED)</b> </div>		
<input type="checkbox"/> <b>RETURN FROM OVERSEAS</b> <div style="border: 1px solid black; padding: 5px;"> <b>6TD</b>  <b>STATION</b>  <b>NO. OF DEPS</b> </div>		
<b>7. APPROVAL FOR TRAVEL AND STANDBY TIME</b> (Checkmark must be checked) <div style="text-align: right; margin-right: 100px;"> <input checked="" type="checkbox"/> YES  <input type="checkbox"/> NO       </div> <div style="text-align: right; margin-top: 10px;"> <i>Marshall</i>  <i>Harry G. Leming</i>  <small>FROM DD FORM 1 15 SEP 64</small> </div> <div style="float: right; margin-top: 10px;"> <small>EXPIRES</small>  <b>6815</b> </div>		
<b>8. CONFINES</b>		
<b>9. DESTINATIONS</b> <i>Rio de Janeiro, Montevideo, Santiago, Asuncion, Buenos Aires.</i>		
<b>10. REPORT OF EVALUATION</b> <div style="text-align: center;"> <b>QUALIFIED FOR TDY STAN</b>  <b>UNTIL 1st 16 April</b> </div>		
<b>DATE</b>	<b>11. SIGNATURE CHIEF OF MEDICAL STAFF</b>	

SECRET

**SECRET**

## Supplement to Staff Employee Personnel

Action for Integration of William V. BrosEffective 27 April 1961

The purpose of this memorandum is to call your attention to existing policies which are particularly material to you while you are integrated and to set forth certain rights and obligations which are incident to your status as an appointed employee. It is hereby agreed and understood that:

1. As an employee of this organization, at the present grade and salary of OC-16 \$15,515 per annum, you will accept cover employment with another instrumentality of the Government (hereinafter referred to as "your cover facility") effective as of 27 April 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 PSA-2 and salary of \$15,255 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**

3. Travel to your post of duty overseas and your return travel to the United States, as well as travel performed overseas which is consistent with your cover designation, will normally be at the direction of your cover facility. Such travel will be accomplished in conformance with applicable regulations of your cover facility except when you are directed for operational reasons to perform travel in accordance with the regulations of this organization.

4. Salary and (except as provided in paragraph three (3) above) allowances paid by your cover facility shall be retained by you to the extent that they are less than or equal to the salary and allowance payments due on the basis of your grade level with this organization. If such cover payments are less than the amount due, the difference will be credited to your payroll account with this organization. If such cover payments exceed the amount due, the overage will be remitted to this organization at designated intervals, presently \_\_\_\_\_.  
Computations hereunder will be made on the basis of the aggregate gross due and received provided, however, that in computing remittances for overage Federal and, if applicable, District of Columbia income taxes withheld by your cover facility against the overage may be deducted. To assure timely accuracy in your payroll account with this organization you are expected to immediately report cover facility payroll changes.

5. Your status as an employee of this organization will continue in full force and effect during your period of duty with your cover facility and you will continue to be entitled to all rights, benefits and emoluments of such status. Certain variations in procedure will be required, however, to preserve the security of your cover position.

a. Upon integration into your cover facility, you will continue to be covered by the provisions of the Civil Service Retirement Act, as amended, and at your personal expense you will be subject to payroll deductions for retirement purposes (now six and one-half per cent) on the basis of your cover salary or your salary from this organization, whichever is the greater.

b. If you receive taxable income from both your cover facility and this organization, necessary adjustments for Federal, and if applicable, District of Columbia income tax purposes will be made in conformance with instructions received from this organization.

c. Consistent with your cover activity, you will continue to be responsible for compliance with the rules and regulations of this organization.

d. You are not assured upon the completion of your period of duty with your cover facility of any status with your cover based on your services performed with that organization at the request of this organization.

**SECRET**

**SECRET**

e. A portion of your annual leave and all the sick leave which has accrued to your credit at the time of your integration shall be transferred to your cover facility. The remainder of your leave will be held by this organization in escrow pending the completion of your integration. If the sum of your accumulated annual leave with your cover facility and this organization exceeds the maximum accumulation entitlement afforded you under the regulations of this organization, the excess will be forfeited. If possible, such forfeiture will be accomplished by reducing the leave credit in your escrow account with this organization. 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 lumpsum payment for accrued annual leave, you will be required to pay the gross amount thereof to this organization including 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 1940, 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 Robert J. Price  
Personnel Office

ACCEPTED:

William L. Rose

3

## CONFIDENTIAL

T&amp;R

(When Filled In)

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's emergency. The original of this form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) <i>Roe</i>	(First) <i>William</i>	(Middle) <i>V.</i>	SOCIAL SECURITY NUMBER <i>None</i>
3. RESIDENCE DATA			
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED <i>Silver Spring, Maryland</i>	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)		
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <i>1317 Saul Road, Kensington, Md.</i>	HOME LEAVE RESIDENCE		
4. MARITAL STATUS (Check one)			
<input checked="" type="checkbox"/> SINGLE	<input type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED
IF MARRIED, PLACE OF MARRIAGE <i>South Weymouth, Mass.</i>			DATE OF MARRIAGE <i>21 Nov. 52</i>
IF DIVORCED, PLACE OF DIVORCE DECREE			DATE OF DECREE
IF WIDOWED, PLACE SPOUSE DIED			DATE SPOUSE DIED
5. IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)			
6. MEMBERS OF FAMILY			
NAME OF SPOUSE <i>Jean Barbara Roe</i>	ADDRESS (No., Street, City, Zone, State) <i>1317 Saul Road, Kensington, Md.</i>	TELEPHONE NO. <i>Whitehall 2-3106</i>	
NAMES OF CHILDREN	ADDRESS <i>8808 8808 8808 8808</i>	SEX <i>F F F F</i>	DATE OF BIRTH <i>17 Sept 55 29 Dec 47 11 Apr 50 31 Oct 55</i>
NAME OF FATHER (Or male guardian) <i>Decceased</i>	ADDRESS	TELEPHONE NO.	
NAME OF MOTHER (Or female guardian) <i>James H. Roe</i>	ADDRESS <i>1317 Saul Road, Kensington, Md.</i>	TELEPHONE NO. <i>Whitehall 2-3106</i>	
NOTE: If you have more than one family unit, include each unit on your application with the organization of contacts by marking the appropriate box.			
7. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Ms.) <i>Mrs. Jean Barbara</i>	RELATIONSHIP <i>wife</i>		
HOME ADDRESS (No., Street, City, Zone, State) <i>1317 Saul Drive, Kensington, Maryland</i>	HOME TELEPHONE NUMBER <i>Whitehall 2-3106</i>		
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE <i>None</i>	BUSINESS TELEPHONE & EXTENSION <i>None</i>		
8. IS THE INDIVIDUAL NAMED ABOVE NOTIFYING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of agency he believes you work for.)			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
9. 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.)			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
10. DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in Item 6.)			
<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.			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

Manila, March 25, 1953

Dear Colonel Gabriels:

In connection with your letter of February 27, 1953, I am sending you herewith a letter of appreciation, addressed to Mr. William Vincent Bros, **Civil Affairs Attaché of the Embassy** of the United States.

Sincerely yours,

LUCAS V. MADAMBA  
Assistant Executive Secretary

IR 'ang

Encl.

Col. A. G. Gabriel  
Coordinator, National Intelligence  
Coordinating Agency  
Manila

SECRET

AGREEMENT

AGREEMENT made this 20th day of February, 1951, of  
effective the 21st day of February, 1951, by and between the  
United States of America (hereinafter referred to as the Government), as repre-  
sented by the Central Intelligence Agency, and William Vincent Bros  
(hereinafter referred to as the Employee).

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A. The Government desires the services of the Employee for CIA under  
circumstances requiring the Employee to receive a Foreign Service Staff Corps  
designation from the Department of State and proposes to send the Employee  
overseas to Manila, Republic of the Philippines for operations  
in the general area of \_\_\_\_\_.

B. The Employee desires as an employee of the Government to serve CIA  
abroad under the supervision and control of the Assistant Director for Special  
Operations, CIA, (ADSO) and is willing to accept a designation in the Foreign  
Service Staff Corps with the obligations thereof.

In consideration of the premises, the mutual covenants and promises herein  
contained, and for other good and valuable considerations, the parties hereto  
agree as follows:

ARTICLE I. Relationship of Employee to the Department of State. The  
Employee, in so far as possible, shall abide by all the rules, regulations,  
and customs of the Foreign Service of the United States which affect personnel  
of the Foreign Service Staff Corps in order to appear as a normal member of  
the Foreign Service establishment.

1. The Employee shall rigidly comply with the provisions of Title X,  
Part A of the Foreign Service Act of 1946, prohibiting officers and employees  
of the Foreign Service from:

- (a) Wearing uniforms;
- (b) Accepting presents from foreign governments;
- (c) Engaging in business abroad;
- (d) Correspondence on affairs of foreign governments;
- (e) Political, racial, religious, or color discrimination.

2. The Chief of the Foreign Service establishment and certain other  
key members of his staff will know about the Employee's status and relation-  
ship under the terms of the TOP SECRET agreement between the Department of  
State and CIA. Other personnel may discover that there are certain irregulari-  
ties in travel orders, position numbers, pay accounts, and other internal ad-  
ministrative procedures of the Foreign Service. Nevertheless, the Employee  
shall not divulge his relationship to CIA except with the expressed approval of  
the ADSO. While serving abroad, he shall for normal administration be under  
the control of the Chief of the Foreign Service establishment to which he is  
attached, but for operations, including travel as specified below, he shall be  
under the control of CIA.

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3. The travel of the Employee shall be governed as follows:

(a) For temporary duty outside the continental limits of the United States within or beyond the Employee's stipulated area, he shall perform CIA operational travel as directed by the ADSSO or his designee with the consent of the Chief of the Foreign Service establishment involved. TD travel customary and necessary in the performance of routine Foreign Service Staff functions may be performed without clearance from the ADSSO.

(b) For any travel to the United States, either temporary duty or permanent change of station, the Employee shall travel only at the direction of the ADSSO after clearance has been arranged through the State Department in Washington.

(c) All travel will be directed and performed in accordance with Foreign Service rules and regulations.

4. Although the Employee's Foreign Service Staff Corps title, location, appointment, Foreign Service class, and other pertinent information may be published in the Foreign Service list and other publications of the Department of State, such listings shall not affect his employment and the obligations and duties stipulated in this contract.

5. All payments to be made under this contract, including reimbursement for travel expenses, shall be made to the Employee by the Department of State except payments referred to in ARTICLE II, Section 4.

ARTICLE III: Relationship of Employee to CIA. Although for all intents and purposes it will appear as though the Employee is employed by the Department of State as indicated in ARTICLE I above, he shall in fact be employed by and under the operational control of CIA. In so far as possible, he will be expected to abide by the rules, regulations, customary practices, and courtesies of the Foreign Service, but his ultimate responsibility will be to CIA. In the event of any conflict of authority in the field between the Department of State and CIA, the matter shall be referred to the ADSSO for resolution.

1. The line of authority for the Employee shall be as follows:

- (a) Senior Representative of OSO at Foreign Service establishment.
- (b) OSO Foreign Branch Chief in Washington.
- (c) Chief of Operations, OSO.
- (d) ADSSO
- (e) Director of CIA.

2. All travel shall be directed by the ADSSO in accordance with ARTICLE I, Section 3. The Employee shall request appropriate Foreign Service clearance for travel through the Senior OSO Representative at the Foreign Service establishment, who shall be responsible for arranging such clearance.

3. It is understood and agreed that the Employee's overseas assignment is to be for a minimum period of two years from the date of his arrival at his overseas post of duty, unless terminated by the Government for its convenience. If the assignment is terminated in less than twenty-four months at the Employee's request, the following shall prevail:

(x) If the Employee arrives in less than twelve months from the date of his arrival at his overseas port of duty, he shall reimburse CIA for all travel expenses involved in the transportation of himself, his immediate family, household goods, and personal effects to the foreign station, and may call such expenses for return to the United States. Such expenses for return to the United States and amounts expended by the Government on account of such travel and transportation shall be considered a debt due by the Employee to the United States.

(y) If the Employee desires to terminate between the twelfth and twenty-fourth month from the date of his arrival at his overseas port of duty, he shall pay all expenses for the travel and transportation of himself, his immediate family, household goods, and personal effects to the United States.

(z) If deemed necessary by CIA, the Employee may be reimbursed or advanced funds for operational expenses. Such amounts must be advanced or reimbursed in accordance with CIA regulations, which require a full accounting of the amounts expended by the Employee. Therefore, the Employee will be required to account fully for any such funds advanced or disbursed in accordance with CIA regulations.

**ARTICLE III. Overseas Allowances and Transportation Expenses.** When specifically authorized by the ADSS, the expenses of travel and transportation of the Employee, his immediate family, household goods and effects, including personally owned automobile and other allowances, will be paid the Employee in accordance with the Foreign Service Act of 1948 and regulations issued thereunder by the Department of State. When authorized by the ADSS, the Employee shall be paid a quarters allowance, cost of living allowance, or special foreign living allowance in accordance with the Foreign Service Act of 1948 and regulations issued thereunder. The amount of quarters and cost of living allowances and the special foreign living allowance is set forth in Annex of the Budget Circular AD-8, which is annexed hereto to reflect adjustments in rates made in the AD-8. This Annex will be revised to reflect any changes in rates made in the AD-8.

**ARTICLE IV. Annual and SickLeave.** The employee will be entitled annual leave, sick leave, and leave of absence in accordance with Title III, Part D of the Foreign Service Act of 1948. Under such Act, the employee may be granted not to exceed thirty calendar days annual leave of absence with pay in each year. Annual leave which the employee may receive and which is not used in any one year shall be accumulated for successive years until it totals 180 days. Sick leave with pay may be granted to the employee at the rate of fifteen calendar days each calendar year and may be accumulated for successive years until it totals 180 days.

If the employee is transferred from another Government agency to the position, any annual leave time remaining to be used in such agency, may be transferred, if appropriate, in accordance with E.O. 11040, 27 March 1947, to and pursuant to Section 911 of the Foreign Service Act of 1948.

**ARTICLE V. Retirement and Disposition.** The employee will be ordered to the United States on the date of his date of retirement or date of termination upon completion of ten years continuous service which may commence immediately thereafter.

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**ARTICLE VI. Retirement.** The Employee receives a pension within the purview of the Civil Service Retirement Act. Accordingly, deductions shall be made at the rate provided by law (presently 5%) from the Employee's basic salary and a sum in the Civil Service Retirement Fund. The employee may not avail himself of the provisions of the Foreign Service Retirement and Disability System, provided for in Title VIII of the Foreign Service Act of 1946.

**ARTICLE VII. Medical Care and Rehabilitation:** In the event of illness or injury to the Employee requiring hospitalization not the result of vicious habit, intemperance, or misconduct on his part, and incurred in the line of duty while on leave abroad, the expenses of treatment of such illness or injury at a suitable hospital or clinic, and transportation expenses to such hospital or clinic may be paid by the Government in accordance with Title IX, Part E of the Foreign Service Act of 1946. Under appropriate regulations, a physical examination of the Employee will be made, together with necessary inoculations, or vaccinations, or the expense thereof will be paid to the Employee.

1. In the event of the death or disability of the Employee, the Employee or his dependents shall be afforded the benefits of the United States Employees' Compensation Act of September 1916, as amended.

**ARTICLE VIII. Equipment.** The Employee may be furnished technical equipment and supplies to assist in the conduct of services hereunder, including an automobile where necessary. The employee shall be responsible for such equipment and supplies issued to him by CIA in accordance with CIA Property Regulations. All such material shall remain the property of the Government regardless of any subsequently conflicting ownership or the manner of acquisition.

**ARTICLE IX. Salary.** The Employee shall receive a basic salary of \$7,710.00 PGS-3 per year in accordance with Section 115 of the Foreign Service Act of 1946. Incidental expenses shall be granted to the Employee in accordance with regulations established by the Department of State under Title IV, Chapter 1, Section 101, of the Foreign Service Act of 1946; other than as in Article III, shall be made only in the officially authorized name of the AD U.

**ARTICLE X. Continuance of Pay and Allowances.** If the Employee is determined by CIA to be absent in a status of "Absent in Action", "Interned in a Central Country", "Captured by an enemy", "Detained", or "Rehearsed" he shall for the period so determined to be in any such status be entitled to receive or to have credited to his account the basic pay and allowances to which he was entitled at the beginning of such period of absence. Continuance of pay and allowances as specified above shall be as prescribed in the "Foreign Service Act of 1942 (50 U.S.C.A., 2041d(d)(5), 7 March 1942).

complaints, all demands. The Employee shall comply with the following provisions, and violation thereof by the Employee shall be deemed a breach of this contract:

1. Participation in the programs and activities of any private organization. The Employee shall make it clear that the Employee has no official connection with such organization and that it does not sponsor or sanction the viewpoints which he may express. In general, his relations with private organizations shall be governed by applicable Foreign Service Regulations.

2. Neither the Employee nor the members of his family shall act as correspondent for American or foreign newsmen, press syndicates, or associations unless special authorization has been obtained in advance from the ADSS. He shall not write for publication any article or other communication on political or controversial subjects. Articles or manuscripts on nonpolitical or noncontroversial subjects shall be submitted to the ADSS for review and approval prior to their submission to a publisher.

3. Neither the Employee nor member of his family shall correspond privately or personally or other official matters with members of Congress, or officers in the Department of State, CIA, or other Governmental agencies.

4. Members of the Employee's family shall not be employed in the same Foreign Service office parent during peace emergencies or when special authorization has been obtained in advance of appointment from both the Department of State and FBI.

5. Before maintaining marriage with a person of foreign nationality, the Employee shall report to and obtain permission from the ADSS consular officials in both the Department of State and FBI. Any such marriage with an alien without obtaining necessary permits for shall be deemed a breach of this contract and shall result in termination of service with the Government.

6. If the Employee marries an individual from another Foreign Service overseas, he shall submit a written application addressed to the ADSS, who will take appropriate steps to clear the matter with the Department of State.

ARTICLE XII. Security. This contract contains information affecting the national defense of the United States within the meaning of the espionage Act (46 USC 7, 18 and 19, as amended). Its transmission or the revelation of its contents in any manner to an unauthorized person is prohibited by law. Violation of this Article or any security agreement signed by the Employee with the Government shall result in immediate disciplinary action, which may include declassification, separation from Government service, and may subject the Employee to criminal prosecution under the espionage Act.

1. The termination of this contract will not release the Employee from the provisions of any security agreement which he may be required to sign by CIA.

2. The Employee shall not publish, transmit, or divulge in any manner, information received by him as the result of his employment by the Government under this contract without specific written authority from the Director, CIA.

ARTICLE XIII. ~~EMPLOYEE'S DUTIES~~. Duties and obligations imposed by the Employer upon its employee shall be those set forth in the following definition, which may be varied by the Employer. No promise or commitment to the Employee of any nature whatsoever, regard had to the terms hereof, shall be valid on the Government's behalf and unless such promise or commitment is reduced to writing and approved by an authorized official of CIA, and such writing placed with this contract there-by becoming an amendment hereunto.

ARTICLE XIV. Amendments. The Government may at any time amend this contract and may terminate this contract upon thirty day prior notice to the Employee. If the Government proposes to amend this contract by reducing the salary provided for in ARTICLE IX (including class promotions, or other authorized increments, if any) and such reduction is unacceptable to the Employee, resignation by the Employee for such reason shall be considered as a termination of this contract for the convenience of the Government. Where the Employee is directed to proceed to a place not in a permanent class of station by the AGOV, it is contract will be deemed to have been breached to the extent of such change.

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ARTICLE IV. Special Provisions. The following special provisions shall apply to the Employee under this contract:

Part (a) of Section 3 of ARTICLE II shall not apply to employees who have served in a departmental position with CIA or who have served an overseas tour of duty with CIA, and in such case, part (b) of Section 3 of ARTICLE II shall be deemed intended to read as follows: "(b) If the Employee desires to terminate or return to the United States prior to the expiration of twenty-four months from the date of his arrival at his overseas post of duty, he shall pay all expenses for the travel and transportation of himself, his immediate family, household goods and personal effects to the United States."

A lump sum payment for annual leave is to be paid up to 20 February 1951. Sick leave is to be held in escrow until such time as subject reverts to GS-Status, at which time, accrued sick leave will be credited.

In the event any of the provisions in this Article are inconsistent with the provisions of any other Article in this contract, the provisions of this Article IV, shall govern and be determinative of the rights and obligations under this contract.

UNITED STATES OF AMERICA

By:   
William L. Bore  
CHIEF, PERSONNEL DIVISION  
(Employee)

WITNESS:

Harold H. Phelps  
CIA, OVERSEAS OFFICE

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<b>FORM DS-1</b> DEPARTMENT OF STATE FORMERLY FS-372 <b>APPLICATION FOR EMPLOYMENT</b> IN THE FOREIGN SERVICE OF THE UNITED STATES		ST. PETERSBURG NO. 47-8421, E APPROX. EXPIRES APRIL 30, 1968 THIS SPACE FOR OFFICE USE ONLY		
<b>INSTRUCTIONS</b> —Answers to all questions must be typed or printed. All questions must be answered fully. If sufficient space has not been provided for your answer to any question, complete your answer under Item # 37.		PREVIOUS <input type="checkbox"/> CANDIDATE <input type="checkbox"/> ACKNOWLEDGED INDEXED <input type="checkbox"/> INVESTIGATED <input type="checkbox"/> ACTION COPIED <input type="checkbox"/> OTHER <input type="checkbox"/>		
DATE OF APPLICATION <b>7 December 1960</b>		POSITION APPLIED FOR <b>Foreign Service Staff Officer</b>		
THIS SPACE FOR OFFICE USE ONLY	1. NAME (Last) (First) (Middle) (Initial, if any) <b>DEBO, William Vincent</b>		2. HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAMES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS YES, GIVE FULL DETAILS UNDER ITEM #37.	
	3a. PERMANENT ADDRESS (Place from which transportation will be authorized if required. Street number and name) <b>602 Lebella Walk</b>		4. STATE OF WHICH YOU ARE A LEGAL RESIDENT <b>Virginia</b>	
	3b. CITY, POSTAL ZONE, STATE <b>Falls Church, Virginia</b>		5. PRESENT ADDRESS IF DIFFERENT FROM ABOVE <b>PRESENT BUSINESS PHONE</b> <b>703-7983</b>	
	6. DATE OF BIRTH (Month, day, year) <b>26 August 1913</b>		7. PLACE OF BIRTH (Country, state, or country) <b>American, Massachusetts, U.S.A.</b>	
	8a. IF BORN OUTSIDE U.S., HOW WAS CITIZENSHIP ACQUIRED? <b>B. A.</b>		8b. IF A NATURALIZED CITIZEN, PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE <b>B. A.</b>	
	9. SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	10. HEIGHT <b>6 ft. 0 in.</b>	11. WEIGHT <b>160 LBS.</b>	12. MARITAL STATUS <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED
13. WHAT IS THE LOWEST BASE SALARY, EXCLUSIVE OF ALLOWANCES YOU WILL ACCEPT? <b>\$ 12,000.00 PER ANNUM</b>				
14. WHAT RESTRICTIONS ARE THERE IF ANY ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD?				
15. FULL NAME OF HUSBAND/WIFE (if wife, maiden name) <b>Jean Barbara Conroy</b>		16. DATE OF BIRTH <b>6 March 1930</b>	17. PLACE OF BIRTH (Country, state, or country) <b>Wellesley, Massachusetts</b>	
18. IF BORN OUTSIDE U.S., HOW WAS CITIZENSHIP ACQUIRED? <b>B. A.</b>		19. IF NATURALIZED, PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE <b>B. A.</b>		
20. DEPENDENTS				
NAME <b>Eloise, William V. Debo</b> <b>Mrs. Agnes M. Debo</b> <b>Bonnie Jean Debo</b> <b>Dawn Garrith Debo</b> <b>Kristine Elizabeth Debo</b>		RELATIONSHIP <b>Sister</b> <b>Mother</b> <b>Daughter</b> <b>Daughter</b> <b>Daughter</b>	DATE OF BIRTH <b>4 March 1920</b> <b>8 November 1883</b> <b>17 September 1945</b> <b>20 December 1947</b> <b>11 April 1950</b>	
21. WHICH DEPENDENTS WOULD YOU WISH TO ACCOMPANY YOU ABROAD? <b>All</b>				
22. FATHER'S NAME <b>John Jones Debo</b>		23. PLACE OF BIRTH <b>American, Massachusetts</b>	24. OCCUPATION <b>Deceased</b>	
25. PRESENT ADDRESS <b>B. A.</b>		26. IF BORN OUTSIDE U.S., DID FATHER EVER OBTAIN U.S. CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>B. A.</b>		
27. MOTHER'S MAIDEN NAME <b>Agnes Kara Longfellow</b>		28. PLACE OF BIRTH <b>Boston, Massachusetts</b>	29. OCCUPATION IF ANY <b>Nope</b>	
30. PRESENT ADDRESS <b>602 Lebella Walk, Falls Church, Virginia</b>		31. IF BORN OUTSIDE U.S., DID MOTHER EVER OBTAIN U.S. CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>B. A.</b>		
32. CAN YOU TAKE CRYPTOGRAPHY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>W.P.M.</b>	33. ARE YOU A STENOGRAPHER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>W.P.M.</b>	34. CAN YOU TYPE OR TOUCH TYPE? IF YES, NAME OTHER OFFICES MACHINES YOU OPERATE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>W.P.M.</b>		

21. MILITARY STATUS				
a. IF YOU HAVE BEEN IN THE ARMED FORCES OR U.S. MARINE CORPS, NAME IN WHAT SERVICE AND BRANCH DID YOU SERVE? (e.g. U.S. Army, Field Artillery)		b. SERVICE OR CAPITAL NUMBER		
b. DATE OF ENTRY ON ACTIVE DUTY		c. RATE OR RANK AT TIME OF ENTRY		d. DATE OF HONORABLE DISCHARGE OR SEPARATION
e. RATE OR RANK AT TIME OF DISCHARGE OR SEPARATION			f. PRESENT RATE OR RANK IF ON ACTIVE DUTY	
22. WHAT PERTINENT FEDERAL CIVIL SERVICE EXAMINATIONS HAVE YOU TAKEN? (Date, year, title, and grade received)				
g. DO YOU HAVE A PERMANENT CIVIL SERVICE STATUS IN THE FEDERAL GOVERNMENT?		h. IF NOW EMPLOYED IN THE FEDERAL GOVERNMENT GIVE PRESENT GRADE AND DATE OF LAST CHANGE IN GRADE <b>GS-13, July 1960</b>		
i. HAVE YOU EVER APPLIED FOR A POSITION UNDER THE DEPARTMENT OF STATE OR TAKEN AN EXAMINATION FOR A POSITION UNDER THE DEPARTMENT OF STATE?				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    IF ANSWER IS "YES" GIVE PARTICULARS UNDER ITEM #27.				
j. HAVE YOU EVER HELD A POSITION UNDER A FOREIGN GOVERNMENT (including service in the Armed Services of a Foreign power?)				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    IF ANSWER IS "YES" GIVE DETAILS UNDER ITEM #27.				
26. OUTLINE YOUR TRAVEL OR RESIDENCE ABROAD GIVING DATES, PURPOSE, AND PLACES. (If not while in the Armed Forces give number, date, and place of issuance of American passport.)  None				
27. EDUCATION				
a. GRADE SCHOOL — CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7				
b. HIGH SCHOOLS OR PREPARATORY SCHOOLS		NAME AND ADDRESS	DATES ATTENDED	YEARS COMPLETED
Agesbury High School Agesbury, Massachusetts			1937	1938
Governor Dummer Academy South Dummer, N.H.			1934	1936
c. COLLEGES OR UNIVERSITIES		Bowdoin College Brunswick, Maine	1938	1939
d. OTHER EDUCATIONAL INSTITUTIONS OR TRAINING SCHOOLS				
28. EMPLOYMENT				
INSTRUCTIONS: (In the spaces provided below describe every position which you have held since you first began to work. Start with present position and work back to the first position which you held. Account for all periods of unemployment and state reasons of any unemployment indicated). Use continuation sheet if more space is required.				
PRESENT POSITION				
DATES OF EMPLOYMENT (Month, year) FROM: <b>21 June 1948</b> TO: <b>present</b>		EXACT TITLE OF YOUR PRESENT POSITION <b>Analyst</b>	SALARY OR EARNINGS <b>Starting \$600 per yr. Current \$7000 per yr.</b>	
PLACE OF EMPLOYMENT (City, state) <b>Washington, D.C.</b>		DESCRIPTION OF YOUR WORK <b>Supervision of personnel processing and collating intelligence received from various government agencies.</b>		
NAME AND ADDRESS OF EMPLOYER <b>Central Intelligence Agency</b>				
NAME AND TITLE OF YOUR IMMEDIATE SUPERVISOR <b>Walter Bedell Smith</b>				
REASON FOR DESIRING TO CHANGE EMPLOYMENT <b>Desire to enter foreign service</b>		IF CURRENTLY EMPLOYED <b>No</b>		
DO NOT APPROACH PRESENT EMPLOYER				

DATE OF EMPLOYMENT (month, year)		EXACT TITLE OF YOUR POSITION		SALARY OR EARNINGS
From May 30, 1943 To May 30, 1948		Special Agent Supervisor		STARTING \$ 3200 PER YE. FINAL \$ 6400 PER YE.
PLACE OF EMPLOYMENT (city, state)		DESCRIPTION OF YOUR WORK		
Cleveland, Ohio; Youngstown, Detroit, Michigan; Washington, D. C.		Investigations of violations of laws within the jurisdiction of the FBI in the field.		
NAME AND ADDRESS OF EMPLOYER		Supervising such investigations at Head- quarters, Washington, D. C.		(4)
Federal Bureau of Investigation				
NAME AND TITLE OF IMMEDIATE SUPERVISOR		EXACT TITLE OF YOUR POSITION		SALARY OR EARNINGS
D. A. Ladd, Assistant Director		Credit Manager		STARTING \$ 1800 PER YE. FINAL \$ 1800 PER YE.
REASON FOR LEAVING Desire to enter interna- tional intelligence field		DESCRIPTION OF YOUR WORK		
DATE OF EMPLOYMENT (month, year)		Processing credit applications and supervis- ing collections.		
From May 1941 To November 1941				(5)
PLACE OF EMPLOYMENT (city, state)				
Boston, Massachusetts				
NAME AND ADDRESS OF EMPLOYER		EXACT TITLE OF YOUR POSITION		SALARY OR EARNINGS
General Motors Acceptance Corporation		Budget Sales Manager		STARTING \$ 1200 PER YE. FINAL \$ 1200 PER YE.
NAME AND TITLE OF IMMEDIATE SUPERVISOR		DESCRIPTION OF YOUR WORK		
4 field representatives		Directing the retail budget sales in a Fire- stone Sales and Service store. Handling credit applications and collections.		
NAME AND TITLE OF IMMEDIATE SUPERVISOR				(6)
REASON FOR LEAVING Reduction in forces due to curtailment of automobile production.				
DATE OF EMPLOYMENT (month, year)		EXACT TITLE OF YOUR POSITION		SALARY OR EARNINGS
From August 1939 To May 1941		Budget Sales Manager		STARTING \$ 1200 PER YE. FINAL \$ 1200 PER YE.
PLACE OF EMPLOYMENT (city, state)		DESCRIPTION OF YOUR WORK		
Portland, Maine; Quincy, Massachusetts		Processing credit applications and supervis- ing collections.		
NAME AND ADDRESS OF EMPLOYER		EXACT TITLE OF YOUR POSITION		SALARY OR EARNINGS
Firestone Tire and Rubber Company Crockline Avenue, Boston, Massachusetts		Budget Sales Manager		STARTING \$ 1200 PER YE. FINAL \$ 1200 PER YE.
NAME AND TITLE OF IMMEDIATE SUPERVISOR		DESCRIPTION OF YOUR WORK		
1 assistant; 1 clerk		Directing the retail budget sales in a Fire- stone Sales and Service store. Handling credit applications and collections.		
NAME AND TITLE OF IMMEDIATE SUPERVISOR				(7)
REASON FOR LEAVING				
No advance myself.				
E. OTHER POSITIONS HELD FOR LESS THAN THREE MONTHS AND IN ADDITION TO THE POSITIONS LISTED BEGINNING WITH ITEM NUMBERED				
DURATION		POSITION	NAME AND ADDRESS OF EMPLOYER OR PERSON FOR UNEMPLOYMENT	STARTING AND FINAL SALARY PER ANNUM
From Nov 1941 To 1942	To 1942	Unemployed	Auditing appointment to F. B. I.	
F. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? *				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
If answer is "YES" give full details under item A7.				
G. HAVE YOU EVER HAD ANY PHYSICAL DEFECTS OR DISABILITIES WHATSOEVER?		H. HAVE YOU EVER BEEN UNDER TREATMENT FOR A MENTAL OR EMOTIONAL DISORDER?		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
I. WITHIN THE PAST TWELVE MONTHS, HAVE YOU FREQUENTLY HAD INTOXICATING DRINKS TO EXCESS?		J. HAVE YOU EVER HAD TUBERCULOSIS?		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
K. WERE YOU EVER MEDICALLY DISCHARGED FROM THE ARMED FORCES?		L. IF ANY OF YOUR ANSWERS TO ANY OF THE ABOVE IS "YES" GIVE FULL PARTICULARS UNDER ITEM A7.		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				

14. DURING THE PAST FIVE YEARS HAVE YOU EVER BEEN AN EMPLOYEE OF A GOVERNMENT CONTRACTOR? IF YES, LIST THE NAME AND ADDRESS OF EACH CONTRACTOR, THE AMOUNTS DUE TO EACH, AND DATE ON WHICH THE CONTRACT WAS CONCLUDED.

15. DO YOU AFFILIATE OR HAVE YOU EVER AFFILIATED WITH ANY POLITICAL PARTY OR ORGANIZATION THAT ADVOCATES THE SUBVERSION OF THE GOVERNMENT OF THE UNITED STATES BY FORCE OR VIOLENCE?

16. RES. 16 NO. IF ANSWER IS "YES" GIVE FULL DETAILS DURING ITEM 15.

17. HAVE YOU EVER BEEN ARRESTED OR DETAINED BY CIVIL OR MILITARY AUTHORITIES IN THE UNITED STATES OR IN ANY OTHER COUNTRY (EXCEPT FOR minor traffic violations where the fine did not exceed \$500). IF SO, STATE UNDER ITEM 17 THE NAME AND LOCATION OF THE COURT, DATES AND DETAILS OF PROSECUTION, AND DISPOSITION.

18. LIST THOSE COMPETENT AND RESPONSIBLE PERSONS IN THE UNITED STATES NOT RELATED TO YOU BY BLOOD OR MARRIAGE AND ARE PARTICULARLY QUALIFIED TO SUPPLY DEFINITE INFORMATION REGARDING YOUR CHARACTER AND ABILITY (DO NOT GIVE NAMES OF superiors listed in answer to questions no. 20 or 21).

NAME	ADDRESS	OCCUPATION
B. W. Conner	42 Ralph Talbot Street South Seymour, Massachusetts	Engineer
E. E. Riley	2108 Dexter Avenue, Silver Spring, Maryland	F. B. I.
G. D. DeLoach	Morningside Drive, Alexandria, Virginia	F. B. I.

19. MENTION ANY OTHER SPECIAL QUALIFICATIONS OR ACHIEVEMENTS NOT COVERED ELSEWHERE IN THIS APPLICATION, INCLUDE DATA SUCH AS ANY BOOKS OR ARTICLES YOU HAVE WRITTEN, SPECIAL RESEARCH WORK, TECHNICAL CAPABILITIES, HONORABLE OR PROFESSIONAL SOCIETY MEMBERSHIPS, AND ANY OTHER INFORMATION YOU CONSIDER PERTINENT. YOU MAY INCLUDE ANY PERTINENT RELIGIOUS, CHARITY, WELFARE, OR ORGANIZATIONAL ACTIVITY WHICH YOU HAVE PERFORMED EITHER WITH OR WITHOUT COMPENSATION, SHOWING THE NUMBER OF HOURS PER WEEK AND NUMBER OF WEEKS PER YEAR IN WHICH YOU WERE ENGAGED IN SUCH ACTIVITY.

20. USE THIS SPACE FOR COMPLETING ANSWERS TO ANY OF THE FOREGOING QUESTIONS, SUBJECTING ANSWER TO CORRESPONDENCE WITH QUESTIONS. USE EXTRA SHEETS OF PAPER IF NECESSARY.

#### CERTIFICATION

*False Statement on this application is cause for dismissal.*

I DO SOLEMNLY AFFIRM THAT THE INFORMATION CONTAINED HEREIN IS COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

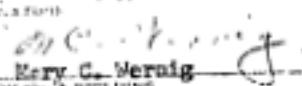
*12 Dec. 1950*  
DATE

*William J. Rose*  
NAME AS USUALLY WRITTEN AND WILL BE VIEWED AS OFFICIAL SIGNATURE

500 010 2-288

SECRET

FBI-HQ-Bulletin Form

<b>REQUEST FOR MEDICAL EVALUATION</b>		<b>1. DATE OF REQUEST</b> 18 Oct 1968
<b>2. NAME (Last, First, Middle)</b> <b>BRIDE, William V.</b>	<b>3. POSITION TITLE</b> <b>Ops Officer</b>	<b>4. GRADE</b> <b>CS-18</b>
<b>5. OFFICE, DIVISION, BRANCH</b> <b>DDP/MR/Chief</b>	<b>6. EMPLOYEE'S CAT.</b> <b>5103</b>	
<b>7. PURPOSE OF EVALUATION</b>		
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> TDY STANDBY Latin America <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"/> HQDS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT		
<b>8. TDY</b> <hr/> <b>STATION</b> <hr/> <b>TDY OR PCS</b> <hr/> <b>TYPE OF COVER</b> <div style="text-align: center;"><b>State</b></div> <hr/> <b>NO. OF DAYS ALLOWED TO RECOMPANY</b> <hr/> <b>NO. OF DAYS ALLOWED TO REPORTS OF MEDICAL INSTITUTE AND ATTACHMENT</b> <hr/>		
<b>9. RETURN FROM OVERSEAS</b>		
<b>10. TDY</b> <hr/> <b>STATION</b> <hr/> <b>NO. OF DAYS</b> <hr/>		
<b>11. APPROVING OFFICER</b> <div style="text-align: center;">   <b>Mary C. Wernig</b>  <small>ASST CHIEF OF MEDICAL STAFF</small> </div>		
<b>12. COMMENTS</b> <div style="text-align: center;"> <b>QUAL. O FOR TDY STANDBY</b>  <b>UNTIL May 20</b>  <b>DONALD TARACEY</b> </div>		
<b>13. REPORT OF EVALUATION</b> <div style="text-align: center;"> <small>SECRET</small> </div>		
<b>DATE</b> 10-18-68	<b>SIGNATURE FOR CHIEF OF MEDICAL STAFF</b>	

SECRET

(Former Edition 259)

<b>REQUEST FOR MEDICAL EVALUATION</b>		<b>E. DATE OF REQUEST</b> 17 Oct 1968
<b>D. NAME (Last, First, Middle)</b> <b>BROE, William V.</b>	<b>E. POSITION TITLE</b> <b>One. Officer</b>	<b>F. GRADE</b> <b>O3-18</b>
<b>G. OFFICE, DIVISION, BRANCH</b> <b>DDP/M/Chief</b>	<b>H. EMPLOYEE'S RANK</b> <b>S103</b>	
<b>I. PURPOSE OF EVALUATION</b>		
<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		
<b>J. TDY</b> <b>24 Oct - 31 Oct 68</b> <b>STATION</b> <b>London</b> <b>TDT OR PCS</b> <b>K. TTY</b> <b>L. TYPE OF COVER</b> <b>State</b> <b>M. NO. OF DEPENDENTS TO ACCOMPANY</b> <b>N. NO. OF PREVIOUS REPORTS OF MEDICAL HISTORY (OF 30) ATTACHED</b>		
<b>L. RETURN FROM OVERSEAS</b>		
<b>M. ETA</b> <b>STATION</b> <b>NO. OF DEPS</b>		
<b>N. COMMENTS</b> <b>QUALIFIED FOR PROPOSED TDY</b> <b>DONALD FARLEY</b>		
<b>O. REPORT OF EVALUATION</b>		
<b>P. DATE</b> 10 23 68	<b>Q. SIGNATURE FOR CHIEF OF MEDICAL STAFF</b>	

SECRET

(This form is numbered)

REQUEST FOR MEDICAL EVALUATION		DATE OF REQUEST	
1. NAME (Last, First, Middle) <b>BROE, William V.</b> 2. OFFICE, DIVISION, BRANCH <b>DDP/WB/ Chief</b>		3. POSITION TITLE <b>C/WK (Ops, Off.)</b> GS-18 4. GRADE <b>5103</b>	
		5. 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 checked="" type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT <b>REX HART</b>		<input type="checkbox"/> INJURIES <input type="checkbox"/> OVERSEAS ASSIGNMENT	
		6. FTD <b>27 Nov - 1 Dec. 1967</b> 7. STATION <b>London, England</b> 8. TYPE OF PCS <b>TDY</b> 9. TYPE OF CONVOY <b>State</b> 10. NO. OF PERIODS TO ACCOMPANY	
		11. NO. OF PLANNED DAYS OF MEDICAL 12. NO. OF PLANNED DAYS OF MEDICAL	
		13. RETURN FROM OVERSEAS	
<b>QUALIFIED FOR PROPOSED</b> <b>TDY</b>		<b>14.</b> <b>15.</b> <b>16.</b>	
<b>17.</b> <b>18.</b>		19. PLANNING OFFICER <b>Mary G. Wernig</b> 20. NO. OF CHILDREN <b>3</b> EXT. <b>4516</b>	
21. COMMENTS		<i>(already scheduled)</i>	
22. REPORT OF EVALUATION		23. SIGNATURE FOR CHIEF OF MEDICAL STAFF	
DATE			

SECRET

SECRET

(This is Filled In)

REQUEST FOR MEDICAL EVALUATION			1. DATE OF REQUEST 1 May 1967	
2. NAME (Last, First, Middle) <b>BPOF, William V.</b>		3. POSITION TITLE <b>Cpo Officer/AB Chief</b>		4. GRADE <b>GS-13</b>
5. OFFICE, DIVISION, BRANCH <b>DDP/HM/</b>		6. EMPLOYMENT <b>S103</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/TOT <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 5px;"> <b>KTD</b>  <b>15 - 18 May 1967</b>  <b>STATION</b>  <b>Panama City</b>  <b>TOT OR PCS</b>  <b>TDY</b>  <b>TYPE OF COVER</b>  <b>State</b>  <b>NO. OF DEPENDENTS TO ACCOMPANY</b>  <b>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (IF ANY) ATTACHED</b> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <b>RETURN FROM OVERSEAS</b>  <b>STA</b>  <b>STATION</b>  <b>NO. OF DEP.'S</b> </div>		
8. WHETHER PREVIOUSLY QUARANTINED (Check if applicable) <input type="checkbox"/> YES <input type="checkbox"/> NO		9. CHIEF OF MEDICAL STAFF SIGNATURE <b>MARY S. VERNIG</b> ROOM NO. & BUILDING <b>JTS313</b> <span style="float: right;"><b>6015</b></span>		
10. COMMENTS				
<b>CHIEF OF MEDICAL STAFF</b> <b>TDY</b>				
11. REPORT OF EVALUATION		<b>REVIEWED</b> <b>REMARKS</b> <b>DATE</b> <b>SIGNATURE FOR CHIEF OF MEDICAL STAFF</b>		

REQUEST FOR MEDICAL EVALUATION <small>(When Filled In)</small>		I. DATE OF REQUEST 9 January 1967												
A. NAME (Last, First, Middle) <b>BFOE, William V.</b> B. OFFICE, DIVISION, BRANCH <b>DDP/HM/Chief</b>		C. POSITION TITLE <b>Ops Officer</b> D. GRADE <b>CS-18</b> E. EMPLOYEE'S SET. <b>5103</b>												
II. PURPOSE OF EVALUATION														
<input checked="" 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"/> HQ/OUTTDY <input type="checkbox"/> OVERSEAS ASSIGNMENT												
<table border="1" style="width: 100%;"> <tr> <td style="padding: 2px;">ETO</td> <td style="padding: 2px;"><b>29 Jan - 25 February 1967</b></td> </tr> <tr> <td style="padding: 2px;">STATION</td> <td style="padding: 2px;"><b>See comments *</b></td> </tr> <tr> <td style="padding: 2px;">TDY OR PCS</td> <td style="padding: 2px;"><b>TDY</b></td> </tr> <tr> <td style="padding: 2px;">TYPE OF COVER</td> <td style="padding: 2px;"><b>State</b></td> </tr> <tr> <td colspan="2" style="padding: 2px;">NO. OF DEPENDENTS TO ACCOMPANY</td> </tr> <tr> <td colspan="2" style="padding: 2px;">NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 174) ATTACHED</td> </tr> </table>			ETO	<b>29 Jan - 25 February 1967</b>	STATION	<b>See comments *</b>	TDY OR PCS	<b>TDY</b>	TYPE OF COVER	<b>State</b>	NO. OF DEPENDENTS TO ACCOMPANY		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 174) ATTACHED	
ETO	<b>29 Jan - 25 February 1967</b>													
STATION	<b>See comments *</b>													
TDY OR PCS	<b>TDY</b>													
TYPE OF COVER	<b>State</b>													
NO. OF DEPENDENTS TO ACCOMPANY														
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 174) ATTACHED														
<input type="checkbox"/> RETURN FROM OVERSEAS														
<table border="1" style="width: 100%;"> <tr> <td style="padding: 2px;">ETA</td> </tr> <tr> <td style="padding: 2px;">STATION</td> </tr> <tr> <td style="padding: 2px;">NO. OF DEP.'S</td> </tr> </table>			ETA	STATION	NO. OF DEP.'S									
ETA														
STATION														
NO. OF DEP.'S														
F. OVERSEAS PLACEMENT EVALUATION (One block must be checked)		G. REQUESTING OFFICER												
<input type="checkbox"/> YES <input type="checkbox"/> NO		<small>2/25/67</small> <b>Mary G. Morris, Jr.</b> <small>ROOM NO. 4 BUILDING</small> <span style="float: right;">EXT.</span> <b>305313</b> <span style="float: right;">6615</span>												

H. COMMENTS	
<p><b>Panama City, San Jose, Managua, Tegucigalpa, San Pedro Sula, San Salvador, Guatemala City.</b></p>	
I. REPORT OF EVALUATION	
QUALIF. FOR PROPOSED <b>TDY</b> <b>REX HART</b> <small>SIGNATURE FOR CHIEF OF MEDICAL STAFF</small>	
DATE	<small>1241</small> <small>AL</small>

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### **SECRET**

*(When Faded)*

REQUEST FOR MEDICAL EVALUATION			1. DATE OF REQUEST 23 August 1965												
2. NAME (Last, First, Middle) <b>Bros, William Vincent</b>		3. POSITION TITLE <b>C/MR Operations Off.</b>	4. GRADE <b>GS-18</b>												
5. OFFICE, DIVISION, BRANCH <b>C/MR/O</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 checked="" type="checkbox"/> HOOS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT													
<table border="1"> <tr><td>ETO</td><td>7 Sept. 1965</td></tr> <tr><td>STATION</td><td>Santo Domingo, Dom. Rep.</td></tr> <tr><td>TDY OR PERIOD</td><td>TDY</td></tr> <tr><td>TYPE OF COVER</td><td>TDY</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td><td>State</td></tr> <tr><td colspan="2">NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 88) ATTACHED</td></tr> </table>				ETO	7 Sept. 1965	STATION	Santo Domingo, Dom. Rep.	TDY OR PERIOD	TDY	TYPE OF COVER	TDY	NO. OF DEPENDENTS TO ACCOMPANY	State	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 88) ATTACHED	
ETO	7 Sept. 1965														
STATION	Santo Domingo, Dom. Rep.														
TDY OR PERIOD	TDY														
TYPE OF COVER	TDY														
NO. OF DEPENDENTS TO ACCOMPANY	State														
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 88) ATTACHED															
<table border="1"> <tr><td>RETURN FROM OVERSEAS</td></tr> <tr><td>ETO</td></tr> <tr><td>STATION</td></tr> <tr><td>NO. OF DEPL'S</td></tr> </table>				RETURN FROM OVERSEAS	ETO	STATION	NO. OF DEPL'S								
RETURN FROM OVERSEAS															
ETO															
STATION															
NO. OF DEPL'S															
8. OVERSEAS PREGNANCY - INDICATE WHETHER PREGNANT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO															
9. COMMENTS <p style="text-align: center;">QUALIFIED FOR PROPOSED TDY</p> <p style="text-align: center;">JOE W. CLINE</p>															
10. REPORT OF EVALUATION															
DATE 19-8-65		SIGNATURE FOR CHIEF OF MEDICAL STAFF													

SECRET

(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		<b>DATE OF REQUEST</b>
<b>1. NAME (Last, First, Middle)</b> BROK, William V.		<b>2. POSITION TITLE</b> Ops Officer/MH/Chief
<b>3. OFFICE, DIVISION, BRANCH</b> DDP/HM/Chief		<b>4. GRADE</b> OS-17
		<b>5. EMPLOYEE'S PAY:</b> \$103
<b>6. PURPOSE OF EVALUATION:</b>		
<input checked="" 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"/> HODS/TOT <input type="checkbox"/> OVERSEAS ASSIGNMENT		
<b>6TD</b> 13 Jan - 3 Feb 1966 <b>STATION</b> SUB COMMANDER <b>TDY OR PCS</b> <b>TOT</b> <b>TYPE OF COVER</b> State <b>NO. OF DEPENDENTS TO ACCOMPANY</b>  <b>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</b>		
<input type="checkbox"/> RETURN FROM OVERSEAS  <b>ETA</b>  <b>STATION</b>  <b>NO. OF DEP'TS</b>		
<b>8. OVERSEAS PLANNING EVALUATION (One Above must be checked)</b>		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
<b>9. REQUESTING OFFICER</b> SIGNATURE: <i>James C. Morris</i> RANK NO. & BUILDING: GS-56 GAT: 6615		
<b>10. COMMENTS</b>		
*Caracas, Venezuela; Quito, Ecuador; Bogota, Colombia; La Paz, Bolivia and Lima, Peru.		
<b>11. REPORT OF EVALUATION</b>		
<b>QUALIFIED FOR TDY STAYS BY</b> UNTIL 7 MARCH 1966 <b>SIGNATURE FOR CHIEF OF MEDICAL STAFF</b> <i>Rex Hard</i>		
<small>FORM 10-59 259 USE PREVIOUS EDITIONS.</small>		

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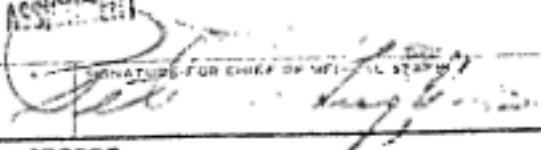
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(When filled in)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 7 October 1965
2. NAME (Last, First, Middle) <b>BRIG.</b> William V.	3. POSITION TITLE Operations Officer	4. GRADE OS-10
5. OFFICE, DIVISION, BRANCH DDP/MC/Chief of Division	6. EMPLOYEE'S EXT. 5103	
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 checked="" type="checkbox"/> HQO&TOT <input type="checkbox"/> Overseas Assignment	<b>8TD</b> <b>23 - 26 October 65</b> <b>STATION</b> <b>Panama City, Panama</b> <b>TDY OR PCS</b> <b>TUI</b> <b>TYPE OF COVER</b> <b>State</b> <b>NO. OF DEPENDENTS TO ACCOMPANY</b> <b>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (IF BY ATTACHED)</b>
<input type="checkbox"/> RETURN FROM OVERSEAS <b>9TA</b> <b>STATION</b> <b>NO. OF DEPTS</b>		
10. OVERSEAS PLANNING EVALUATION (One block must be checked)		11. REQUESTING OFFICER
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE <i>Mary C. Harnig</i> ROOM NO. & BUILDING <b>CH-56</b> EXT. <b>6075</b>
12. COMMENTS		
13. REPORT OF EVALUATION <b>QUALIFIED FOR TDY STAND BY</b> <b>UNTIL</b> <i>Feb 67</i> <b>S-REX HART</b>		
DATE <b>10-13-65</b>		14. SIGNATURE FOR CHIEF OF MEDICAL STAFF <i>Rex Hart</i>

SECRET

(When Filled In)

<b>REQUEST FOR MEDICAL EVALUATION</b>		<b>DATE OF REQUEST</b> 14 Feb 1961												
<b>C. NAME (Last, First, Middle)</b> <b>SROS, William V.</b>	<b>D. POSITION TITLE</b> <b>Operations Officer</b>	<b>E. GRADE</b> <b>GS-16</b>												
<b>F. OFFICE, DIVISION, BRANCH</b>		<b>G. EMPLOYEE'S EXT.</b>												
<b>H. PURPOSE OF EVALUATION</b>														
<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"/> HOME/TDY TDX <input checked="" type="checkbox"/> OVERSEAS <del>EXPERIENCE</del>														
<table border="1"> <tr> <td>RTD</td> <td>1 March 1961</td> </tr> <tr> <td>STATION</td> <td>Tokyo</td> </tr> <tr> <td>TDY OR PCS</td> <td>TDY</td> </tr> <tr> <td>TYPE OF COMB</td> <td>State Depart.</td> </tr> <tr> <td>NO. OF DEPENDENTS TO ACCOMPANY</td> <td>0</td> </tr> <tr> <td colspan="2">NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td> </tr> </table>			RTD	1 March 1961	STATION	Tokyo	TDY OR PCS	TDY	TYPE OF COMB	State Depart.	NO. OF DEPENDENTS TO ACCOMPANY	0	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	
RTD	1 March 1961													
STATION	Tokyo													
TDY OR PCS	TDY													
TYPE OF COMB	State Depart.													
NO. OF DEPENDENTS TO ACCOMPANY	0													
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED														
<input type="checkbox"/> RETURN FROM OVERSEAS														
<table border="1"> <tr> <td>RTD</td> </tr> <tr> <td>STATION</td> </tr> <tr> <td>NO. OF DEPNTS</td> </tr> </table>			RTD	STATION	NO. OF DEPNTS									
RTD														
STATION														
NO. OF DEPNTS														
<b>I. OFFICIALS BEING ADVISED &amp; VALUES FROM WHICH THEY MAY BENEFIT</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO														
<b>J. CONSULTING OFFICER</b> R.E. O'Halloran, CMC/PS/PMS-PLA ROOM NO. 8 BUILDING 2303 J 1002														
<b>K. COMMENTS</b>														
<b>L. REPORT OF EVALUATION</b> <b>QUALIFIED FOR DEPARTMENTAL DUTIES</b> <b>AND PROPOSED TDY Q/S ASSESSMENT</b>														
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF													
1 MAR 1961														

**SECRET**  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		F. DATE OF REQUEST 6 Dec 1960																		
G. NAME (Last, First, Middle) <b>ERICK, William V.</b>		H. POSITION TITLE <b>COS, Tokyo</b>																		
I. OFFICE, DIVISION, BRANCH <b>DPF/PE/JAO</b>		J. GRADE <b>GS-16</b>																		
K. PURPOSE OF EVALUATION																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;"><input type="checkbox"/> PRE-EMPLOYMENT</td> <td style="width: 50%; padding: 5px;"><input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> ENTRANCE ON DUTY</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> OVERSEAS RETURN</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> TDY STANDBY</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIAL TRAINING</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> ANNUAL</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> RETURN TO DUTY</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> FITNESS FOR DUTY</td> <td style="padding: 5px;"></td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> MEDICAL RETIREMENT</td> <td style="padding: 5px;"></td> </tr> </table>			<input type="checkbox"/> PRE-EMPLOYMENT	<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT	<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	
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<input type="checkbox"/> MEDICAL RETIREMENT																				
L. OVERSEAS PLANNING EVALUATION (One & Only One To Be Checked)		M. REQUESTING OFFICER																		
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE: <i>Edward M. Collier</i> <b>EDWARD M. COLLIER</b> DPF/PE/JAO ROOMING # 3010 2133 J 0509																		
<b>QUALIFIED FOR PROPOSED PCS O/S ASSIGNMENT</b>																				
DATE: <i>15-3-1960</i> SIGNATURE FOR CHECK BY MEDICAL STAFF: <i>John G. Johnson</i>																				

SECRET

Urban Grids 51

~~SECRET~~

14 MAR 1961

MEMORANDUM FOR: The Director of Intelligence and Research  
Department of State

SUBJECT: Mr. Eroe, William Vincent  
Request for Appointment in the Foreign Service  
and Assignment at Tokyo, Japan

REFERENCE: Annex P-3 to Memorandum dated 23 November 1961,  
Subject, Representation in Foreign Service  
Missions

1. It is requested that Mr. Eroe, GS-16, \$15,515, be appointed in the Foreign Service with the title First Secretary, PIS-7, \$15,525 for duty in the Political Section of the American Embassy at Tokyo, Japan. Mr. Eroe will occupy position number 1 of Annex P-3.
2. It is requested that Mr. Eroe arrive at his destination on or about 1 July 1961.

PER DIRECTOR OF INTELLIGENCE

*(initials)*  
William E. McRaven

9 March 1961

Distribution:

2 - MacLean  
1 - CPR  
1 - CCL

L1 - W/PC/JAO  
Y2 - W/JAO/DSU/MS

Enclosures:

1. Application Forms 57 and DS-34
2. Occupational History Supplement
3. Proposed biography

PROPOSED BIOGRAPHY

ZFOS, William T., - b. Haco., August 24, 1911; Bowdoin  
College, A. B., 1939; budget sales manager, retail store, 1939-41;  
credit manager, finance company, 1941; special agent, FBI, 1942-48;  
area operations officer, Department of Defense, 1948-51; app. 708-3,  
attaché, Manila, Feb. 21, 1951; resigned May 13, 1953; area plans  
officer, Department of Defense, 1953-61; married.

<p>Form DS-14 1-15-55</p> <p align="center"><b>DEPARTMENT OF STATE SUPPLEMENT TO STANDARD FORM 57</b></p> <p>If more space is required, use additional sheets of paper. Write on each sheet your name, address and date of birth. Identify each item, and attach to this application.</p>	<p align="right">Form Approved Budget Bureau No. 47-10017</p> <p>F. 1. NAME OF APPLICANT <b>William J. Bros</b></p> <p>F. 2. DATE OF BIRTH <b>August 26, 1913</b></p> <p>F. 3. ADDRESS <b>4317 Soul Road, Kensington, Md.</b></p>																																																										
<p><b>F. USE OF APPLICATION - CHECK BELOW TO INDICATE TYPE OF EMPLOYMENT FOR WHICH YOU WISH TO BE CONSIDERED</b></p> <p><input checked="" type="checkbox"/> FOREIGN SERVICE ONLY      <input type="checkbox"/> DEPARTMENTAL ONLY      <input type="checkbox"/> FOREIGN SERVICE AND DEPARTMENTAL</p>																																																											
<p><b>G. PERMANENT ADDRESS (PLACE THIS WHERE YOU WILL ACCEPT TRANSPORTATION OF SELF AND HOUSEHOLD EFFECTS, IF ANY, OR APPPOINTMENT TO THE FOREIGN SERVICE)</b></p> <p align="center"><b>4317 Soul Road, Kensington, Md.</b></p>																																																											
<p><b>H. IF BORN OUTSIDE THE UNITED STATES, HOW HAS CITIZENSHIP ACQUIRED? IF A NATURALIZED CITIZEN, GIVE PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE (CHECK # ON STANDARD FORM 57)</b></p>																																																											
<p><b>I. ARE YOU NOR INVOLVED IN ANY LITIGATION OR SEPARATION AGREEMENT?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><b>J. DO YOU KNOW OF ANY PROSPECTIVE LITIGATION IN WHICH YOU MAY BE INVOLVED? (TYPE DETAILS, IF ANSWER IS "YES" TO A. OR B.)</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>																																																											
<p><b>K. IF DIVORCED, GIVE NAME OF COURT, LOCATION, DECREE, AND DATE FINAL DECREE GRANTED</b></p>																																																											
<p><b>L. IF APPLYING FOR OVERSEAS EMPLOYMENT WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? (EXCLUDES OF OVERHEAD ALLOWANCES)</b> <b>\$ 1,000.00 PER YEAR</b></p>																																																											
<p><b>M. IF OFFERED APPOINTMENT IN THE FOREIGN SERVICE WHAT RESTRICTIONS ARE THERE ON YOUR AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD?</b></p> <p align="center"><b>None</b></p>																																																											
<p><b>N. FULL NAME OF SPOUSE (IF WIFE, GIVE MIDDLE NAME)</b></p> <p align="center"><b>John Barbara Conroy</b></p>																																																											
<p><b>O. DATE OF BIRTH</b></p> <p align="center"><b>March 6, 1920</b></p>																																																											
<p><b>P. PLACE OF BIRTH (CITY, STATE OR PROVINCE, AND COUNTRY)</b></p> <p align="center"><b>Wichita, Kansas</b></p>																																																											
<p><b>Q. IF BORN OUTSIDE THE UNITED STATES, HOW HAS CITIZENSHIP ACQUIRED?</b></p>																																																											
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FORM GSF-10 - T-10000			PAGE 21
18. RELATIVES BY BLOOD OR MARRIAGE NOW RESIDING IN FOREIGN COUNTRIES			
NAME	RELATIONSHIP	ADDRESS	
19. LIST PRESENT OR FORMER FOREIGN CONNECTIONS:			
A. BUSINESS			
B. EMPLOYMENT			
C. FINANCIAL			
D. POLITICAL			
E. SOCIAL			
F. RELIGIOUS			
G. LEISURE			
H. OTHER			
19. DOES YOUR PRESENT FINANCIAL POSITION PERMIT DISCHARGE OF ALL CURRENT DEBTS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (IF "NO", STATE INFORMATION REQUESTED BELOW)			
NAME OF CREDITOR		AMOUNTS DUE	DATES ON WHICH OBLIGATIONS WERE CONTRACTED
20. HAVE YOU EVER BEEN MEDICALLY DISCHARGED FROM THE ARMY SERVICES?			
21. HAVE YOU EVER BEEN UNDER TREATMENT FOR A MENTAL OR EMOTIONAL DISORDER? (IF "YES", GIVE DETAILS IN ITEM 30 OF STANDARD FORM 87)			
22. PRESENT MILITARY STATUS			
23. ARE YOU REGISTERED WITH A SELECTIVE SERVICE BOARD? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (IF "YES", STATE BELOW THE NUMBER AND ADDRESS OF THE BOARD, AND YOUR CLASSIFICATION)			
24. DO YOU HAVE A MILITARY RESERVE STATUS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (IF "YES", STATE BELOW, THE BRANCH OF SERVICE, YOUR SERIAL NUMBER, YOUR ORGANIZATION UNIT, AND HEADQUARTERS)			
25. LIST DECORATIONS (EXCLUSIVE OF SERVICE BADGES), CITATIONS, AND OFFICIAL LETTERS OF COMMENDATION RECEIVED FOR SERVICE IN THE ARMY FORCES.			
26. LIST OTHER NAMES, IF ANY, BY WHICH YOU HAVE BEEN KNOWN INCLUDING MARRIED NAMES. IF MARRIED MORE THAN ONCE, GIVE DATES DURING WHICH NAMES WERE USED.			
27. REFERENCES. LIST FIVE PERSONS, EXCLUSIVE OF SUPERVISORS, LIVING IN THE UNITED STATES WHO ARE NOT RELATED TO YOU AND WHO HAVE AN INFLUENTIAL KNOWLEDGE OF YOUR QUALIFICATIONS AND FITNESS FOR THE POSITION FOR WHICH YOU ARE APPLYING. INCLUDE NAMES LISTED IN ITEM 28, STANDARDS FORM 10 AND THE ADDITIONAL REFERENCES.			
FULL NAME		PRESENT BUSINESS OR HOME ADDRESS (INCLUDE CURRENT ADDRESS, INCLUDING STREET AND NUMBER)	BUSINESS OR OCCUPATION
Mr. Lawrence Robbins		3322 Glencridge, Kensington, Md.	Int. Monetary Fund
Mr. G. Impeach		107 Hesingholt St., Alex., Va.	FBI
Mr. J. D. Bell		2500 Q St., N.W. Washington, D.C.	Dept. of State
General Edward Leundale		4923 MacArthur Blvd., Wash., D.C.	USAID
Mr. R. T. Carpenter		4921 Soul Roads, Kensington, Md.	ODA
28. HAVE YOU EVER BEEN UNDER THE CIVIL SERVICE RETIREMENT SYSTEM? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		29. SOCIAL SECURITY NO., IF ANY	
30. DO YOU HAVE CIVIL SERVICE STATUS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> I do not know (IF ANSWER IS "YES", STATE NAME OF AGENCY AND DATE ACQUIRED)			
31. IF you believe the information you have supplied on this application does not fully show your qualifications for Departmental or Foreign Service employment, state in Item 34 of Standard Form 87 or on a separate sheet, any additional appropriate data that you wish to be considered.			
DATE	SIGNATURE		
7 March 1961	<i>William J. Bryan</i>		

STANDARD FORM 57 REVISED MAY 1964 U. S. CIVIL SERVICE COMMISSION		APPLICATION FOR FEDERAL EMPLOYMENT																																																									
<b>APPLICATION NO.</b>  <b>ANNOUNCEMENT</b>	1. Kind of position applied for or name of examination			<b>DO NOT WRITE IN THIS BLOCK</b> For Use of Civil Service Commission Only <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Appoint.</td> <td style="width: 15%;">Manual</td> <td style="width: 15%;">Exempt Regime</td> </tr> <tr> <td><input type="checkbox"/> Appoint.</td> <td><input type="checkbox"/> Selected</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Nonapp.</td> <td><input type="checkbox"/> Renewed</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center;">Notations:</td> </tr> <tr> <td colspan="3" style="text-align: center;">App. Review</td> </tr> <tr> <td colspan="3" style="text-align: center;">Approved:</td> </tr> <tr> <td style="text-align: center;">Option</td> <td style="text-align: center;">Grade</td> <td style="text-align: center;">Exam. Required</td> <td style="text-align: center;">Reflex. Score</td> <td style="text-align: center;">Actual Score</td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 5 Points (Total)</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> 10 Points Comp. Div.</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Other 10 Points</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Direct</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Being Evaluated</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: center;">Initials and Date</td> <td colspan="2"></td> </tr> </table>			Appoint.	Manual	Exempt Regime	<input type="checkbox"/> Appoint.	<input type="checkbox"/> Selected		<input type="checkbox"/> Nonapp.	<input type="checkbox"/> Renewed		Notations:			App. Review			Approved:			Option	Grade	Exam. Required	Reflex. Score	Actual Score				<input type="checkbox"/> 5 Points (Total)					<input type="checkbox"/> 10 Points Comp. Div.					<input type="checkbox"/> Other 10 Points					<input type="checkbox"/> Direct					<input type="checkbox"/> Being Evaluated		Initials and Date				
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2. Grade(s) (if mentioned in examination announcement)																																																											
3. Place of employment applied for (City and State) Arlington, VA 22204																																																											
4. (First name) (Middle) (Last), if any (Last) Mr. William Vincent																																																											
5. Street and number or R. D. number 1234 1/2 Main Street																																																											
6. City or post office (including postal zone) and State Arlington, VA 22204																																																											
7. Place of birth Maryland																																																											
8. State or foreign country																																																											
9. Date of birth (month, day, year) August 24, 1931																																																											
10. Height without shoes 5' 10" inches																																																											
11. Weight 125 pounds																																																											
12. Home phone	13. Legal or mailing residence (State) Office phone	14. If you have ever been employed by the Federal Government, indicate last grade Date of hire 7/23/1950 From To Present																																																									
15. AVAILABILITY INFORMATION. A. Indicate the lowest salary you will accept. You will not be considered for any position with a lower entrance salary.																																																											
B. If you are now a Federal employee, indicate the lowest grade you will accept																																																											
C. Will you accept appointment for: <input type="checkbox"/> 1 to 3 months? <input type="checkbox"/> 3 to 6 months? <input type="checkbox"/> 6 to 12 months?																																																											
Acceptance or refusal of a short-term appointment will not affect your qualification for another appointment.																																																											
D. Are you willing to travel <input type="checkbox"/> Overseas? <input type="checkbox"/> Foreign? <input type="checkbox"/> Domestically?																																																											
E. Will you accept appointment <input type="checkbox"/> In State capital, D. C.? <input type="checkbox"/> Anywhere in United States? <input type="checkbox"/> Outside U. S.?																																																											
F. If you will accept appointment only in certain locations, list them: <b>No preference</b>																																																											
G. VETERAN PREFERENCE. A. If you claim veteran preference based on wartime military service, indicate																																																											
Date(s) of entry into active service	Date(s) of separation	Branch of service (Army, Navy, Air Force, etc.)	Serial number. If none, give grade or rating at separation																																																								
B. Do you claim 3-point preference as a peacetime campaign veteran? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																											
C. Do you claim 16-point preference? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																											
D. Have you ever been granted 10-point veteran preference or 5-point preference as a peacetime campaign veteran by the U. S. Civil Service Commission? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If so, indicate below the office which granted this preference to you. Attach your notice of preference allowances if available. It will be submitted to you.																																																											
Name of U. S. Civil Service Commission office or name of Board of U. S. Civil Service Examiners		Address of Commission office or Board of Examiners																																																									
City _____		State _____																																																									
THIS SPACE FOR USE OF APPOINTING OFFICER ONLY. The information contained in answer to question 15 has been verified with the discharge certificate, which shows that the separation was under honorable conditions.																																																											
Signature _____			Agency _____																																																								
Title _____			Date _____																																																								
(Continued on next page)																																																											

(4) EXPERIENCE. (Start with your present position and work back)					
<b>① Date of employment (month, year)</b> From <u>21</u> Feb 1961 To <u>20</u> Oct 1963		<b>Exact title of your position</b> ANALYST ATTACHE			
<b>Salary or earnings</b> Starting <u>\$ 111</u> per month Final <u>\$ 111</u> per month		<b>Classification Grade</b> GS-16 <small>(if in Federal service)</small>	<b>Place of employment</b> City <u>Washington, D.C.</u> State <u>D. C.</u> Zip <u>20540</u>		<b>Kind of business or organization</b> <small>Manufacturing, Marketing, Service, etc.</small> Govt. - Government
<b>Name and address of employer (firm, organization, etc.)</b> <u>Department of Defense, Defense Operations</u> <u>Washington, D.C.</u>		<b>Name and title of immediate supervisor</b> <u>Robert W. Hanke</u>			
<b>Reason for leaving</b> <u>TO GO TO FOREIGN SERVICE AS ATTACHE FOR GOVERNMENT</u> <b>Description of work</b> <u>PERFORMED AS AN ATTACHE IN THE DEFENSE DEPARTMENT, DOD, IN THE FIELD OF POLITICAL AFFAIRS IN U.S. FOREIGN POLICY PLANNING, USAINING INFORMATION GAINED FROM POLITICAL TRENDS OR POLITICAL EXPERTS AND INDIVIDUALS FOR ASSISTANCE TO THE DEFENSE DEPARTMENT</u>					
<b>② Date of employment (month, year)</b> From <u>21</u> Feb 1961 To <u>20</u> Oct 1963		<b>Exact title of your position</b> ATTACHE			
<b>Salary or earnings</b> Starting <u>\$ 111</u> per month Final <u>\$ 111</u> per month		<b>Classification Grade</b> GS-16 <small>(if in Federal service)</small>	<b>Place of employment</b> City <u>Washington, D.C.</u> State <u>D. C.</u> Zip <u>20540</u>		<b>Kind of business or organization</b> <small>Manufacturing, Marketing, Service, etc.</small> Govt. - Government
<b>Name and address of employer (firm, organization, etc.)</b> <u>Department of Defense, Defense Operations</u>		<b>Name and title of immediate supervisor</b> <u>Robert W. Hanke</u>			
<b>Reason for leaving</b> <u>TO GO TO FOREIGN SERVICE AS ATTACHE</u> <b>Description of work</b> <u>PERFORMED AS AN ATTACHE IN THE DEFENSE DEPARTMENT, DOD, IN THE FIELD OF POLITICAL AFFAIRS IN U.S. FOREIGN POLICY PLANNING, USAINING INFORMATION GAINED FROM POLITICAL TRENDS OR POLITICAL EXPERTS AND INDIVIDUALS FOR ASSISTANCE TO THE DEFENSE DEPARTMENT</u>					
<b>③ Date of employment (month, year)</b> From <u>21</u> Feb 1961 To <u>20</u> Oct 1961		<b>Exact title of your position</b> ANALYST ATTACHE OFFICER			
<b>Salary or earnings</b> Starting <u>\$ 114</u> per month Final <u>\$ 114</u> per month		<b>Classification Grade</b> GS-16 <small>(if in Federal service)</small>	<b>Place of employment</b> City <u>Washington, D.C.</u> State <u>D. C.</u> Zip <u>20540</u>		<b>Kind of business or organization</b> <small>Manufacturing, Marketing, Service, etc.</small> Govt. - Government
<b>Name and address of employer (firm, organization, etc.)</b> <u>Department of Defense, Defense Operations</u>		<b>Name and title of immediate supervisor</b> <u>Robert W. Hanke</u>			
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## ATTACH SUPPLEMENTAL SHEETS OR FORMS HERE

<b>10</b> Date of employment (Year, month, day) From <b>30</b> , <b>1922</b> to <b>25</b> , <b>1940</b>		<b>11</b> Exact title of your position <b>STORY TELLER</b>	
<b>12</b> Salary or earnings Income <b>\$ 375.</b> per <b>month</b> Total <b>\$ 375.</b> per <b>month</b>		<b>13</b> Classification Grade of the highest award <b>C-1-15</b>	
<b>14</b> Place of employment City <b>Washington, D. C.</b> State <b>D. C.</b>		<b>15</b> Kind of business or organization Manufacturing, wholesaling, advertising, etc. <b>Use Government</b>	
<b>16</b> Name and address of employer (firm, organization, etc.) <b>Federal Bureau of Investigation, Washington, D. C.</b>		<b>17</b> Name and title of immediate supervisor <b>DeLoe Coffey, Acting Director</b>	
<b>18</b> Reason for leaving To work for the Federal Bureau of Investigation			
<b>19</b> Description of work Investigator			
<b>20</b> Length of time in present job 1940			
<b>21</b> Length of time in all previous jobs 1922			
<b>22</b> Length of time in all previous occupations 1922			
<b>23</b> If you need additional experience blocks, use supplemental sheet. <b>See INSTRUCTION SHEET.</b>			
<b>24. SPECIAL QUALIFICATIONS AND SKILLS.</b>			
<b>(a)</b> License and Certificates.—Indicate the kind of license or certificate and the State or other licensing authority which granted it; for example, pilot's license, chemist, lawyer, radio operator, C.P.A., etc.		<b>(b)</b> Give any special qualification not stated elsewhere in your application, such as: (1) Your most important publications. (Do not submit copies unless requested). (2) Your military or domestic experience. (3) Public speaking and platform relations experience. (4) Professional or promotional activities in scientific, academic, etc. (5) Honors and fellowships received.	
<b>(c)</b> Approximate number of words per minute in Typing <b>.....</b> Standard			
<b>25. EDUCATION.</b>			
<b>A.</b> Give the highest elementary or high school completed <b>High School</b> If you completed High school, give date <b>1939</b>			
<b>B.</b> Name and location of high school attended <b>Academy High School, Anchorage, Alaska, Governor Dunbar Acad., So. Tyfield, Illinois</b>			
<b>C.</b> Name and location of college or university <b>Brigham College</b>		Dates attended      Years completed      Credit hours      Degrees received <b>1939 - 1940</b> <b>Day</b> <b>Night</b> <b>Semester or Quarter</b> <b>A.B.</b>	
<b>D.</b> Chief undergraduate college subjects		<b>E.</b> Chief graduate college subjects	
<b>Chemistry</b> <b>Biology</b>		Credit hours      Semester or Quarter <b>6</b> <b>8</b>	
<b>F.</b> Other schools or training, such as trade, vocational, Armed Forces, or business. Give for each name and location of school, dates attended, subjects studied, certificates/paid any other pertinent data: <b>None</b>			
<b>G.</b> Have you lived or traveled in any foreign countries? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<b>H.</b> Indicate your knowledge of Reading      Speaking      Understanding      Writing English      French      Spanish      German      Chinese Italian      Portuguese      Dutch      Russian      Czech	
If answer is "Yes," give in from 100 names of countries, dates, and length of time spent there and reason of purpose (military service, business, education, or vacation).			

21. REFERENCES.—List three persons living on the United States or Territory of the United States who are NOT RELATED TO YOU AND WHO HAVE KNOWN LONG ENOUGH OF your qualifications and services for the position for which you are applying. Do not repeat names of supervisors listed under Item 16, EXPERIENCE.																																																																																																																																																																																																																																																					
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<p>22. (a) Are you a citizen of the United States of America, or (b) If a citizen of America, do you have citizenship in the United States of America?</p>																																																																																																																																																																																																																																																					
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<p>25. Are you now or have you ever been a member of any foreign government or organization, or any party, or any association, or combination of persons, which is Communist, Fascist, Fascination, or Subversive, or which has adopted, or openly, a policy of advocating or approving the dissemination of acts of force or violence to deny other persons their rights under the Constitution of the United States, or which seeks to alter the form of government of the United States by unconstitutional means?</p>																																																																																																																																																																																																																																																					
<p>If your answer to question 23, 24, or 25 above is "Yes," state on a separate sheet to be attached to and made a part of this application the names of all such organizations, associations, associations, groups, or combinations of persons and dates of your membership. Give complete details of your activities therein, and any information or advice regarding your membership or activities. (See instruction sheet.)</p>																																																																																																																																																																																																																																																					
<p>26. Does the United States Government employ in a civilian capacity any relative of yours (brood or married) with whom you live or have lived within the past 24 months?</p>																																																																																																																																																																																																																																																					
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<p>If more space is required, use paper the same size as this print. Write on each sheet your name, date of birth, and examination date. Attach several of these questions.</p>																																																																																																																																																																																																																																																					
<p>ATTENTION: If you are appointed, all facts you give will be subject to investigation including a check of your fingerprints. Before signing and applying, go back over it to make sure you have answered all questions correctly and fully, so that your statements can be checked on the basis of all the facts. Additional unfavorable information about such matters as arrest or discharge 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 cancellation of your application or your dismissal after appointment and is punishable by law.</p>																																																																																																																																																																																																																																																					
<p>I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.</p>																																																																																																																																																																																																																																																					
Date _____	 Signature of applicant																																																																																																																																																																																																																																																				



16. COMPANY		Job or title of your present position	Salary or monthly earnings
From 5-30-42	To 5-14-42	<b>Special Agent CAF-9 to 12</b>	<b>Starting \$ 3200 per yr.</b>
Name and title of employer (firm, organization, or person): a Federal, state department, bureau or establishment, and division:		Description of your work: Execution & supervision of investigations of violations of Federal Statutes	
<b>Federal Bureau of Investigation</b>			
Kind of business or occupation (e.g., wholesale etc., insurance agency, etc. of books etc.):			
<b>Investigation</b>			
Number and title of employees supervised by you:			
Name and title of immediate supervisor:			
Reason for leaving:			
<b>Resigned to obtain more preferable work</b>		Job or title of your previous position	
From 5-14-42	To 11-41	<b>Field Representative</b>	<b>Starting \$ 1800 per yr.</b>
Name and title of employer (firm, organization, or person): a Federal, state department, bureau or establishment, and division:		Description of your work: Contacting dealers & the supervision of collection accounts	
<b>Boston, Massachusetts</b>			
Name and title of employer (firm, organization, or person): a Federal, state department, bureau or establishment, and division:			
<b>General Motors Accept. Corp., Boston, Mass.</b>			
Kind of business or occupation (e.g., wholesale etc., insurance agency, etc. of books etc.):			
<b>automobile financing</b>			
Number and title of employees supervised by you:			
Name and title of immediate supervisor:			
<b>F. A. Miller - Credit Mgr.</b>			
Reason for leaving:			
<b>Reduction in personnel</b>		Job or title of your position	
From 4-39	To 5-41	<b>Budget Manager</b>	<b>Starting \$ 1500 per yr.</b>
Name and title of employer (firm, organization, or person): a Federal, state department, bureau or establishment, and division:		Description of your work: Supervision of Budget Retail Sales & Collections	
<b>Quincy, Mass.</b>			
Name and title of employer (firm, organization, or person): a Federal, state department, bureau or establishment, and division:			
<b>Firestone Tire &amp; Rubber Co.</b>			
Kind of business or occupation (e.g., wholesale etc., insurance agency, etc. of books etc.):			
<b>Total sales &amp; service in automotive line</b>			
Number and title of employees supervised by you:			
Reason for leaving:			
<b>C. A. Hayes - Mgr.</b>			
<b>Resigned to obtain more preferable work</b>		Job or title of your position	
From 5-14-42	To 5-14-42	<b>Starting \$ per</b>	<b>per</b>
Name and title of employer (firm, organization, or person): a Federal, state department, bureau or establishment, and division:		Description of your work	
<b>General Motors Accept. Corp., Boston</b>			
Kind of business or occupation (e.g., wholesale etc., insurance agency, etc. of books etc.):			
Number and title of employees supervised by you:			
Name and title of immediate supervisor:			
Reason for leaving:			
It is your responsibility to report, on a monthly basis, to the Office of the Director, FBI, Washington, D.C., the results of your investigation. You must do this even if you are no longer employed by the FBI. If you are no longer employed by the FBI, you must still report to the Office of the Director, FBI, Washington, D.C., the results of your investigation. You must do this even if you are no longer employed by the FBI.			

**17. MILITARY EXPERIENCE**—In order to evaluate your effectiveness as a selected member in the Armed Services, tell us what you did with service abroad you have attended or completed as general or technical schools while in the service. Write in Item 6d "No special service schools" and indicate in Item 6c all changes in duty assignment, pay grade, date of each assignment.

18. First Spec. Service School attended.	19. What were you taught in First Spec. Service School?					
Location:						
Date attended (months, years): From _____ To _____						
Rating received at end of this training:						
20. Duty assignments or active other than training time, old important enough in duty assignment whether or not you attended a Service School(s):	21. What did you do during this assignment?					
Date of duty assignment (months, years): From _____ To _____						
Rating received at end of this training:						
22. Second Special Service School attended.	23. What were you taught in Second Special Service School?					
Location:						
Date attended (months, years): From _____ To _____						
Rating received at end of this training:						
24. Duty assignments other than training:	25. What did you do during this duty assignment?					
Date of duty assignment (months, years): From _____ To _____						
List on a separate sheet of paper your additional experience, training, service, or special duty assignments during military service or hospitalization.						
<b>16. EDUCATION</b> —Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 (12) Mark (x) the appropriate box to indicate satisfactory completion of:		26. Date, place and location of last high school attended: <b>Governor Dummer Acad. - So. Byfield Mass., Academy High School - Amosbury, Mass.,</b> All subjects included in high school which apply to position desired:				
<input type="checkbox"/> Elementary School <input checked="" type="checkbox"/> Junior High School <input checked="" type="checkbox"/> Senior High School						
27. Name and Location of College or University	Major	Dates Attended	Term Completed	Degree Obtained	Semester Hours Credit	
Bowdoin College	History	1935	1939	A.B.	6-39	
28. List Ten College Courses in Chronological Order: Biology, Chemistry, Anatomy, French, English						
29. Other training which was maintained, business, trade, career, group through the Armed Forces, business trade, etc., and location of school, or "Institutes" entering this Federal report:	Subjects Studied	Dates Attended	Term Completed			
FBI Acad., Quantico, Va.						
30. Indicate your knowledge of foreign languages:	READING	WRITING	LISTENING	31. Are you now or previously ever been employed in any field involving radio, television, or public relations, radio operator, technician, reporter, C.I.A., etc.		
31. How was your knowledge of foreign languages acquired?	Ex. Good	Ex. Good	Ex. Good	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Give kind of foreign language:		
32. If you have traveled or needed to use foreign languages, indicate (1) source of knowledge, (2) date and length of time spent there and (3) reason or purpose (e.g., business, pleasure, recreation):	33. Give license or certificate (name):					
34. List any special skills you possess and machines used in operation you can use, such as operators of chain saws, roofs, motorcars, compass, key punch, hand tools, amateur or professional dentist.	35. Give name of organization you belong to and address in your off-duty time such as: (a) local sports organizations you participate in (b) 4-H Club and other youth organizations (c) church (d) scouting (e) amateur radio (f) hobbies (g) musical (h) amateur or professional or scientific associations, etc.					
Appointments should be in words per minute by typewriter, standard size.						

PROPOSED BIOGRAPHY

BROE, William V.—b. Amesbury, Mass., Aug. 24, 1913;  
Amesbury High Sch., grad.; Governor Dummer Acad.; Bowdoin  
Coll., A.B. 1939; rubber co. 1939-41; U. S. Gov't 1942-51;  
app. For. Ser. Staff officer of class three and assigned as  
att. at Manila Feb. 21, 1941; married

SECRET

(When Filled In)

SECTION VIII		GEOGRAPHIC AREA KNOWLEDGE					
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE KNOWLEDGE GAINED AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR WORK ASSIGNMENT OTHER THAN ORGANIZATION EXPERIENCE. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE", INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, SOILS, HISTORY, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY				
			BEST-BEFORE	TRAVEL			
			STUDY	WORK ASSIGNMENT			
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE.							
3. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE GAINED KNOWLEDGE AS A RESULT OF ORGANIZATION ASSIGNMENT OR ACTIVITY.							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY				
			HOSTAGE ASSIGNMENT	FIELD ASSIGNMENT			
			TRAINING				
			Philippine Islands	Area knowledge	March 51 - May 53	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
			China	"	Aug 53 - April 55	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
			Japan	"	Aug 53 - April 55		<input checked="" type="checkbox"/>
SECTION IX							
TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (T.P.M.)	2. SHORTHAND (S.P.M.)	3. SHORTHAND SYSTEM USED - CHECK ONE APPROPRIATE ITEM					
		GREGG	SPERRY	STENOTYPE			
				Other (Specify)			
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Calculator, Micrograph, Card Punch, etc.)							
SECTION X							
SPECIAL QUALIFICATIONS							
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.							
2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK.							
3. EXCLUDING EQUIPMENT NOTED IN SECTION XI, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORROWAVE RADIO, MULTILEVEL, TURRET LATHES, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.							
4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Police, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, ETC.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTER NUMBER, IF KNOWN.							
5. EARLIEST LICENSE OR CERTIFICATE (Year of issue)		6. LATEST LICENSE OR CERTIFICATE (Year of issue)					

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(When Filled In)

## SECTION II CONTINUED FROM PAGE 4

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OR WHICH YOU ARE THE AUTHOR. DO NOT SUBMIT COPIES UNLESS REQUESTED.  
 INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (BIOGRAPHY, SCIENTIFIC ARTICLE, GENERAL INTEREST ARTICLES, NOVELS, NOVELS, SHORT STORIES, ETC.).

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED.

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE.

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

## SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
June 1948 to January 1951	GS-12/13	DD/P FBI Philippine Branch

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE
6	Acting Chief, Philippine Branch

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
January 1951 to May 1953	GS-14	DD/P FBI Philippine Islands

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE
10	Chief of Station, Philippines

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
May 1953 to April 1955	GS-15	DD/P FE China Branch

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE
125	Deputy Chief, FBI, Yokosuka

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
April 1955 to present	GS-15	DD/P FE China Branch

4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE
100	Chief of Branch

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
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4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE
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6. DESCRIPTION OF DUTIES

(Use additional pages if required)

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Form F-1744-2

SECTION III		CHILDREN AND OTHER DEPENDENTS					
A. NUMBER OF CHILDREN (INCLUDING STEPCHILDREN AND ADOPTED CHILDREN) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT STILL SUPPORTING.		<input checked="" type="checkbox"/>	1	B. NUMBER OF OTHER DEPENDENTS (INCLUDING SPWIFE, PARENTS, STEPPARENTS, SISTERS, ETC.) WHO DEPEND ON YOU FOR AT LEAST ONE-HALF THEIR SUPPORT, OR, EXCLUSIVELY OVER 21 YEARS OF AGE AND ARE NOT SELF-SUPPORTING.		<input checked="" type="checkbox"/>	2
C. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS							
NAME	RELATIONSHIP	YEAR OF BIRTH	SEX	CITIZENSHIP	ADDRESS		
Donnie J.	daughter	1944	X	U.S.	4317 Saul Road Kensington, N.H.		
Susan C.	#	1948	X	#	#		
Kristine E.	#	1950	X	#	#		
Barbara A.	#	1955	X	#	#		
Mrs. Jean B.	wife	1920	X	#	#		
Mrs. Agnes N.	mother	1882	X	#	#		
ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS							
BASIC COMPLETED	SIGNATURE OF EMPLOYEE			<i>William V. Cope</i>			
17 January 1958							

SECRET