

*E-7212*  
SECRET  
*(W was filled in)*

REQUEST FOR PERSONNEL ACTION				DATE REQUESTED			
1. REFERENCE 006102		2. NAME (Last-First-Middle) <i>William C. Cooley</i>		3 April 1972			
3. NATURE OF PERSONNEL ACTION <b>RESIGNATION</b>				4. EFFECTIVE DATE REQUESTED <i>MONTH DAY YEAR</i> 25 14 72	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>		
6. RANK <b>O-10 O</b>		7. TO V <b>O-10 O</b>		8. FINANCIAL ANALYSTS NO. <b>1036-1231</b>			
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/EUROPEAN DIVISION, FOREIGN FIELD FRENCH AREA PARIS STATION PARIS ANNEX</b>				10. LOCATION OF OFFICIAL STATION <b>PARIS, FRANCE</b>			
11. POSITION TITLE <b>OPS OFFICER</b>				12. POSITION NUMBER <b>0668</b>	13. CAREER SERVICE DESIGNATION <b>D</b>		
14. CLASSIFICATION SCHEME (GS, E.R., etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>15 8</b>	17. SALARY OR RATE <b>\$31,554</b>		
18. REMARKS <i>24045</i>							
19. SIGNATURE OF APPROVING OFFICER <i>William C. Cooley, C/E/Pers</i>			DATE SIGNED <i>8 Aug</i>	20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>C. L. Lutcher</i>			DATE SIGNED <i>9 Aug 72</i>
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACT/DET CODE <b>45 10</b>	22. INPUT CODE <b>ALPHABETIC</b>	23. STATUS CODE <b>CODE</b>	24. INTEREST CODE <b>CODE</b>	25. HOURS CODE <b>CODE</b>	26. DATE OF BIRTH <b>MO. DA. YE.</b> <i>5 14 1945</i>	27. DATE OF GRADE <b>MO. DA. YE.</b>	28. DATE OF HI <b>MO. DA. YE.</b>
29. RET. EXPENS <b>0000</b>	30. SPECIAL REFERRING <b>CODE</b>	31. RETIREMENT DATA <b>CODE</b>	32. TERMINATION DATA CODE <b>CODE</b>	33. LOCATION/CANCELLATION DATA <b>TYPE</b>	34. SECURITY REGD. <b>REG. NO.</b>	35. SEC. REC'D. <b>REC'D. NO.</b>	36. SEC. REC'D. <b>REC'D. NO.</b>
37. RET. PRESENT <b>0000</b>	38. MRY. COMP. CAT. <b>0000</b>	39. LONG. COMP. DATE <b>MO. DA. YE.</b>	40. CAREER HISTORY <b>CODE</b>	41. MEDICAL RECORDS <b>CODE</b>	42. MEDICAL RECORDS <b>CODE</b>	43. MEDICAL RECORDS <b>CODE</b>	44. MEDICAL RECORDS <b>CODE</b>
45. PREVIOUS DURING GOVERNMENT SERVICE <b>0000</b> 0-10 YEARS 1-10 YEARS 2-10 YEARS 3-10 YEARS		46. LEAVE CTR. CODE	47. FEDERAL TAX DATA FORM EXECUTED <b>CODE</b>	48. MED. TAX EXEMPTIONS <b>CODE</b>	49. STATE TAX DATA FORM EXECUTED <b>CODE</b>	50. MED. TAX EXEMPTIONS <b>CODE</b>	51. STATE TAX DATA FORM EXECUTED <b>CODE</b>
52. POSITION CONTROL CERTIFICATION <i>8-9-72</i>				53. O.P. APPROVAL <i>Don H. Lutcher</i>			54. DATE APPROVED <i>9 AUG 1972</i>

SECRET

DATE PREPARED

10 JULY 1970

## REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER <b>006102</b>	2. NAME, Last, first, middle initial <i>Allison, Robert W. 4/1/70</i>	3. NATURE OF PERSONNEL ACTION <b>EXTENSION OF PRA NTE 24 FEB 1971</b>	4. EFFECTIVE DATE REQUESTED <b>1136-1231</b>	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>		
6. RANKS <b>OF 10 W</b>	7. GRADE <b>XX</b>	8. PAY RATE <b>OF 10 W</b>	9. FINANCIAL ANALYSIS PRO CHARGEES <b>1136-1231</b>	10. LEGAL AUTHORITY / COMMISSION OR PERMIT NO. <b>10 JULY 1970</b>		
11. ORGANIZATIONAL DESIGNATIONS <b>DDP/EUR FOREIGN FIELD FRENCH AREA PARIS STATION PARIS ANNEX</b>			12. LOCATION OF OFFICIAL STATION <b>PARIS, FRANCE</b>			
13. POSITION TITLE <b>OPS OFFICER (14)</b>			14. POSITION NUMBER <b>0668</b>	15. CAREER SERVICE DESIGNATION <b>D</b>		
16. CLASSIFICATION SCHEDULE (GSA, F.S., or J) <b>GS</b>		17. OCCUPATIONAL SERIES <b>0136.01</b>	18. GRADE AND STEP <b>15.7</b>	19. SALARY OR RATE <b>\$ 27,463</b>		
20. REMARKS <b>cc: PAYROLL NTE 24 Feb 1971 PRA Pow HRC 20-17 e(a)(6)</b>						
21. SIGNATURE OF REQUESTING OFFICER <b>WILLFORD C. TAYLOR, C/E Paris</b>		22. DATE SIGNED <b>7/12/70</b>	23. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <b>John MacLean</b>			
24. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
25. ACTION CODE <b>32 LO</b>	26. EMPLOYEE NUMBER <b>44623</b>	27. STATUS CODE <b>5-164</b>	28. INTEGRITY CODE <b>3</b>	29. DATE OF BIRTH <b>04-04-19</b>	30. DATE OF GRADE <b>04-04-19</b>	31. DATE OF DEATH <b>04-04-19</b>
32. RETIREMENT CODE <b>0-10</b>	33. RETIREMENT DATE <b>0000</b>	34. SEPARATION DATA CODE <b>8-1</b>	35. SEPARATION DATA CODE <b>8-1</b>	36. SEPARATION DATA CODE <b>8-1</b>	37. SEPARATION DATA CODE <b>8-1</b>	38. SEPARATION DATA CODE <b>8-1</b>
39. RET. PERIOD CODE <b>0-10</b>	40. RET. COMP. DATE <b>00-00-00</b>	41. LONG. COMP. DATE <b>00-00-00</b>	42. LATER. CARRIER CODE <b>0-10</b>	43. RET. HLT. INSURANCE CODE <b>1-10</b>	44. RET. HLT. INSURANCE CODE <b>1-10</b>	45. MED. LIABILITY CODE <b>0-10</b>
46. PREVIOUS CARRIER GOVERNMENT SERVICE CODE <b>0-10</b>	47. USE TAX DATE <b>0000</b>	48. RETIRE. TAX DATE <b>0000</b>	49. STATE TAX DATA CODE <b>0-10</b>	50. STATE TAX DATA CODE <b>0-10</b>	51. STATE TAX DATA CODE <b>0-10</b>	52. STATE TAX DATA CODE <b>0-10</b>
53. POSITION CONTROL CERTIFICATION <b>2-23-70 m/w</b>			54. O.P. APPROVAL <b>R. C. P.</b>		55. DATE APPROVED <b>7/12/70</b>	

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED					
1. SERIAL NUMBER 006102		2. NAME (Last-First-Middle) <i>Alexander, (Signature)</i>		25 FEB 1969											
3. NATURE OF PERSONNEL ACTION <b>EXTENSION OF PRA</b>		4. DURATION MTD: 1 year		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>											
6. PAY RATES		V TO Y	V TO CF	7. FINANCIAL ANALYSIS NO. CHARGEABLE <b>9136 1231</b>											
		CF TO Y	XX	8. LEGAL AUTHORITY (Complaint to Other of Personnel)											
9. ORGANIZATIONAL DESIGNATIONS  <b>DUP/EUR FOREIGN FIELD CENTRAL REGION PARTS STATION</b>		10. LOCATION OF OFFICIAL STATION  <b>PARIS, FRANCE</b>		11. POSITION TITLE  <b>OPS OFFICER</b>											
12. POSITION NUMBER  <b>0668</b>		13. OCCUPATIONAL SERIES  <b>0136.01</b>		14. GRADE AND STEP  <b>15 8 7</b>		15. SALARY OR RATE  <b>2.37.34 - 123.075</b>		16. CAREER SERVICE DESIGNATION  <b>D</b>							
17. REMARKS  <i>None</i>															
18. SIGNATURE OF REQUESTING OFFICER  <i>WILLIARD C. TAYLOR, C/E/Pers</i>				DATE SIGNED  <i>3/16/69</i>		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER  <i>J. B. Smith</i>				DATE SIGNED  <i>3-4-69</i>					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
20. ACTION CODE CODE		21. OFFICE ADDRESS NUMBER ALPHABETIC <b>444 E. FUR 24065</b>		22. STATION CODE CODE		23. INACTIVE CODE CODE		24. HIRE DATE MO. DA. YE. <b>3 01 20 20</b>		25. DATE OF BIRTH MO. DA. YE. <b>3 01 20 20</b>		26. DUTY GRADE MO. DA. YE. <b>1 01 20 20</b>		27. DATE OF HI. MO. DA. YE.	
28. RETIREMENT CODE		29. RETIREMENT DATE NUMBER <b>1-0000</b>		30. SEPARATION DATE CODE CODE		31. COMMUNICANT DATA NAME PHONE MO. DA. YE.		32. COMMUNICANT DATA NAME PHONE MO. DA. YE.		33. SECURITY RATING CODE		34. SECURITY RATING CODE			
35. REF. PREFERENCE CODE		36. VISA COMP. DATE MO. DA. YE.		37. LONG. COMP. DATE MO. DA. YE.		38. CAREER CATEGORY CODE		39. MEDICAL HEALTH INSURANCE CODE		40. SOCIAL SECURITY NO		41. SOCIAL SECURITY NO			
42. PREVIOUS MILITARY SERVICE CODE		43. ISSUE CAT. CODE		44. FEDERAL TAX DATA FORM EXECUTED CODE		45. IND. TAX EXEMPTIONS CODE		46. STATE TAX DATA FORM EXECUTED CODE		47. IND. TAX STATE CODE EXEMPT					
48. POSITION CONTROL CERTIFICATION  <i>3-7-69</i>  <i>-21 wj</i>		49. O.P. APPROVAL  <i>R. J. Smith</i>		50. DATE APPROVED  <i>3/7/69</i>											

SECRET

(12 Feb 1967)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED																																																																																																													
<p><i>X-13</i></p> <p>1. SERIAL NUMBER 006102</p> <p>2. NAME OF PERSONNEL ACTION <b>REASSIGNMENT</b></p> <p>3. NAMES A T O V      A T O C C T O V      XX      C T O C</p> <p>4. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD CENTRAL REGION PARIS STATION</p> <p>5. ANNEX: PARIS</p> <p>6. POSITION NUMBER OPS OFFICER (14)</p> <p>7. CLASSIFICATION SCHEDULE (G.S. L.R. etc.) GS 0136.01</p> <p>8. REMARKS XRA-per HR-24c (2) for duration of present tour. 3/17/67</p> <p>Slotting for new T/O.</p>				<p>24 February 1967</p> <p>6. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 20 67</p> <p>7. FINANCIAL ANALYSIS NO. CHARGEABLE 7136-1231</p> <p>8. LOCATION OF OFFICIAL STATION PARIS, FRANCE</p> <p>9. POSITION NUMBER 0608</p> <p>10. GRADE AND STEP 15-6</p> <p>11. SALARY OR RATE \$ 20,585</p> <p>12. CAREER SERVICE DESIGNATION B</p>																																																																																																													
				<p>13. SIGNATURE OF REGISTERING OFFICER Richard J. Westover, CPT/Personnel</p> <p>14. SIGNATURE OF CAREER SERVICE APPROVING OFFICER D. M. L. [Signature]</p>																																																																																																													
				<p>15. DATE SIGNED 2 MAR 1967</p>																																																																																																													
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FITNESS REPORT				RATING LETTER
				2.02
<b>SECTION A</b>				
1. NAME:	John Doe	2. Grade:	3. Status:	4. Grade Next Step: 3.00
4. OFFICIAL POSITION/TITLE:	Ops Off	5. DATE OF ASSIGNMENT & CURRENT STATION:	1985-01-01 to 1990-01-01 / Paris	
6. CHECKLIST TYPE OF ASSIGNMENT:		TELECAVITY OF SUPPORT		
7. CARRIER:	TELECAVITY	8. SERVICE AREA:	PARIS	9. LINE EQUIPMENT/TECHNICAL SUPPORT
CARRIER INFORMATION: (See Instructions - Section C)				
10. DATE REPORT DUE IS 05/05/90		11. REPORTING PERIOD (From to To): 01-01-90 to 31-JULY-90		
<b>SECTION B PERFORMANCE EVALUATION</b>				
<u>Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to passing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
<u>Marginally</u>	Performance is deficient in some respects. The reason for assigning this rating should be stated in Section C and remedial actions taken or recommended should be detailed.			
<u>Professional</u>	Performance is satisfactory. Desired results are being produced in the manner expected.			
<u>Strong</u>	Performance is characterized by exceptional proficiency.			
<u>Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
<b>SPECIFIC DUTIES</b>				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (maximum number of subordinate supervisors).				
SPECIFIC DUTY NO. 1: Responsible for the day-to-day supervision of a Section				RATING LETTER
<b>Identified problem</b> due the lack of continuous developing account to clients' interests and requirements. In order the overall care of clients				O
SPECIFIC DUTY NO. 2: Responsible for the day-to-day supervision of a Section				RATING LETTER
Upon his cover to gain access to information from bank and credit bureaus on current income and expenditure's client's interest against the local market and pricing policies.				B
SPECIFIC DUTY NO. 3: Responsible for the day-to-day supervision of a Section				RATING LETTER
Detailed with accurate financial information about his client's contact client as occurs periodically to the client's business and general knowledge.				C
SPECIFIC DUTY NO. 4: Responsible for various vacation, compensations including Anticipative Month.				RATING LETTER
SPECIFIC DUTY NO. 5: Responsible for the day-to-day supervision of a Section				RATING LETTER
Reports on the above activities.				D
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, rapport with co-workers, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER



SECRET

(When Filed)

D.D.P. 16 AL 70

## NOTIFICATION OF PERSONNEL ACTION

OLE

1. SERIAL NUMBER 000102	2. NAME AND TITLE Richard A. [Signature]	3. EFFECTIVE DATE MO DA YE 16 14 70	4. CATEGORY OF EMPLOYMENT REGULAR
5. NATURE OF PERSONNEL ACTION VESTIGATION		5. Bureau of Alcohol, Tobacco and Firearms 3130 1231 0000	6. USE OF OTHER THAN AUTHORITY
7. FUNDS V TO V CF TO CF	8. LOCATION OF OFFICIAL STATION PARIS, FRANCE	9. ORGANIZATIONAL DESIGNATIONS DOP/EUROPEAN DIVISION FOREIGN FIELD FRENCH AREA PARIS STATION <b>PARIS Annex</b>	
10. POSITION TITLE OPS OFFICER	11. POSITION NUMBER 0505	12. SERVICE DESIGNATION O	13. GRADE AND STEP 15 G 31534
14. CLASSIFICATION SCHEME (G-1, G-2) S	15. OCCUPATIONAL SERIES 0130.01	16. DATE OF GRADE MO DA YE 01 01 74	17. PAY RATE OR RATE EGG DATA
18. REMARKS		19. ACTION BY BuPers Code 10	
20. OFFICE CODING NAME: AUTOMATIC		21. STATION CODE CUBR	22. DATE OF BIRTH MO DA YE 01 01 24
23. INT. EXPIRES MO DA YE 00 00 00	24. SPECIAL REFERENCES 1-LIC 2-LTA 3-HCR 4-NPC	25. SEPARATION DATA DATA CODE 0000	26. HAZARDOUS DATA CODE 0000
27. INT. PREFERENCE CODE 00 00 00	28. SERV. COMP. DATES IF VONG COMP. DATES MO DA YE 00 00 00	29. CARRIER CATEGORY CODE 0000	30. FEHRS : HEALTH INSURANCE 1-YES 2-NO 3-NONE
31. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0000 1-NO PREVIOUS SERVICE 2-BREAK IN SERVICE LESS THAN 2 yrs 3-BREAK IN SERVICE MORE THAN 2 yrs		32. LEAVE CAT CODE	33. FEDERAL TAX DATA CODE 0000
34. SIGNATURE OR OTHER AUTHENTICATION H. R. FISHER		35. STATE TAX DATA CODE 0000	
		36. POSTED 8-11-72 m.	

FORM  
5-66  
1150-  
Mfg. 10-67Use Previous  
Edition

SECRET

WEB

GSA GEN. REG.  
EXCLUDED FROM AUTOMATIC  
GENERALIZING  
20 JUN 1964  
(When Filed)

SECRET

BEG: 01 JUN 71

**NOTIFICATION OF PERSONNEL ACTION**

NOTIFICATION OF PERSONNEL ACTION									
CCB		SERIAL NUMBER		NAME (Last, First, Middle)					
006102				<i>Elizabeth J. Rogers</i>					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
EXTENSION OF PRA- NTE; 24 FEBRUARY 1973				02 25 71		REGULAR			
6. FUNDS		<input checked="" type="checkbox"/> V <input type="checkbox"/> CF		<input type="checkbox"/> V <input checked="" type="checkbox"/> CF		7. Name of Activity Not Chargeable		8. CSC OR OTHER LEGAL AUTHORITY	
		<input type="checkbox"/> V		<input checked="" type="checkbox"/> CF		1136 1231 0000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS									
DOP/EUR FOREIGN FIELD FRENCH AREA PARIS STATION <b>PARTS ANNEX</b>									
10. LOCATION OF OFFICIAL STATION									
PARIS, FRANCE									
11. POSITION TITLE									
DPS OFFICER									
12. CLASSIFICATION NUMBER (GS OR GS-4)		13. DECLINATION CODES		14. GRADE AND VS/P		15. SALARY OR RATE			
GS		0136.01		15 7		29000			
16. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
17. ACTION	18. Enlist Date	19. OFFICE CODING	20. STATION CODE	21. DATE OF BIRTH	22. GRADE OR RANK	23. DATE OF DEATH	24. GRADE OR RATE	25. DATE OF DIS	
<input checked="" type="checkbox"/>									
37	10	44620 EUR	24063	3	01 20 24				
26. PAY BASIS		27. SPECIFIC REFERENCES	28. REQUIREMENT DATA		29. GRAVESITE DATA		30. CARRIAGE-CONSIGNMENT DATA		31. SECURITY REG AND 32. MIA
MO DA + (2) 24 73 82			CSC DA AF AFM		DATA CODE				REG AND RIO AND MIA
33. VET PREFERENCE		34. NEW COMP DATE	35. VONG COMP DATE	36. CAREER DATA	37. MEDICAL DATA	38. MEDICAL DATA	39. MEDICAL DATA	40. SOCIAL SECURITY NO	
DDPFT		MO DA	MO DA	MO DA	MO DA	MO DA	MO DA		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. DATE OF CSC	43. GRAVESITE DATA	44. STATE TAX DATA					
DDPFT		CODE	DATA	DATA					
45. PREVIOUS MILITARY SERVICE		46. GRAVESITE DATA	47. TAX INFORMATION						
1. NO PREVIOUS SERVICE		DATA	DATA						
2. NO SERVICE IN SERVICE		DATA	DATA						
3. SERVICE IN SERVICE LESS THAN 1200 HRS.		DATA	DATA						
4. SERVICE IN SERVICE MORE THAN 1200 HRS.		DATA	DATA						
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>POSTED</b>  <i>6-2-71 EJM</i> </div>									

SICAM

ARS

**POSTED**

6-2-71 *Blue*

**Figure 1**  
Extract from education  
ministering the  
education Bill

SECRET

GPO : 1964 O-1000

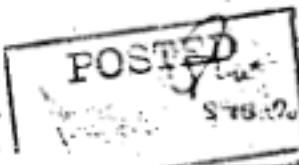
DDG: 17 AUG 70

## NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER <b>(00102)</b>	2. NAME (LAST FIRST MIDDLE) <i>Richard, John, Jr., Jr.</i>	
3. NATURE OF PERSONNEL ACTION EXTENSION OF PRA NTD: 24 FEBRUARY 1971		
4. RANK <b>OF</b>	V TO V	V TO CF
	OF TO V	X OF TO CF
5. ORGANIZATIONAL DESIGNATIONS DOP/EUR FOREIGN FIELD FRENCH AREA PARIS STATION <b>PARIS ANNEX</b>		
6. POSITION TITLE <b>OPS OFFICER</b>		
7. CLASSIFICATION SCHEDULE (GS, LS, WC)		8. OCCUPATIONAL SERIES <b>0136.01</b>
9. GRADE AND STEP <b>GS</b>		10. SALARY OR RATE <b>27463</b>
11. REMARKS		
12. LOCATION OF OFFICIAL STATION <b>PARIS, FRANCE</b>		
13. POSITION NUMBER <b>01066</b>		14. SERVICE DESIGNATION <b>D</b>
15. GRADE AND STEP <b>15-7</b>		

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
16. ACTION CODE	17. EMPLOYEE CODE	18. OFFICE CODING	19. STATION CODE	20. INTRONS CODE	21. HOURS CODE	22. DATE OF BIRTH	23. DATE OF GRADE	24. DATE OF UP	25. SOCSEC NO	26. SOCSEC NO	27. SOCSEC NO
<b>37</b>	<b>10</b>	<b>UNEDP</b>	<b>EUR</b>	<b>210065</b>	<b>3</b>	<b>01 20 24</b>			<b>450-740</b>	<b>450-740</b>	<b>450-740</b>
28. MTF ENTRIES		29. MTF REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. COMPLETION DATA	33. SEPARATION DATA CODE	34. SOCSEC NO	35. SOCSEC NO	36. SOCSEC NO	37. SOCSEC NO	38. SOCSEC NO
<b>(2 24 71)</b>		<b>02</b>				<b>1982</b>	<b>90 04 78</b>				
39. VET. REFERENCE		40. STRG COMP. DATA	41. LONG COMP. DATA	42. CARRIER CATEGORY	43. FEDCII: HEALTH INSURANCE	44. SOCIAL SECURITY NO					
40. VET. REFERENCE <b>0: NO 1: 1-3 PT 2: 10 PT</b>		<b>NO DA 18</b>	<b>NO DA 18</b>	<b>100</b>	<b>0-100</b>	<b>100</b>					
45. PREVIOUS CIVILIAN GOVERNMENT SERVICE		46. LEAVE CAT CODE	47. FEDERAL TAX DATA	48. STATE TAX DATA							
45. PREVIOUS CIVILIAN GOVERNMENT SERVICE <b>0: NO Previous Service 1: NO Break in Service 2: Break in Service less than 3 yrs 3: Break in Service more than 3 yrs</b>			47. FEDERAL TAX DATA FORM EXEMPTED <b>1 NO</b>	48. STATE TAX DATA FORM EXEMPTED <b>1 NO</b>							

SIGNATURE OR OTHER AUTHENTICATION

*R. S. White*

SECRET  
(When Filled In)

P.J.H. 8 MAR 67

NOTIFICATION OF PERSONNEL ACTION							
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE) <i>ALICE E. JONES, Deceased</i>					
006102							
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT		02 26 67		REGULAR			
6. FUNDS →		7. TO V	8. TO D	9. FINANCIAL ANALYSIS NO. Designate		10. USE OF OTHER LEGAL AUTHORITY	
		OF TO V	X	7136 1231 0000		50 USC 403 J	
11. ORGANIZATIONAL DESIGNATIONS DDP/EUR FOREIGN FIELD CENTRAL REGION PARIS STATION ANNEX, PARIS		12. LOCATION OF OFFICIAL STATION PARIS, FRANCE					
13. POSITION CODE OPS OFFICER		14. POSITION NUMBER 0668		15. SERVICE DESIGNATION D			
16. CLASSIFICATION TICKET NO. (SI, SI, WH)		17. OCCUPATIONAL SERIES GS		18. GRADE AND STEP 0136.01		19. SALARY OR RATE 20585	
20. REMARKS							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE	22. Employer Code	23. OFFICE CODE	24. Station / 25. OFFICER	26. Grade	27. Date of Birth	28. Date of Grade	29. Date of Lei
37	10	44600	EUR	24083	3	01 20 24	
30. END DATES		31. SPECIAL REFERENCE	32. RETIRING DATA	33. SEPARATION DATA CODE	34. CONVERSION/CANCELLATION DATA	35. SECURITY REG. NO.	36. SICK REG. NO.
NO. 24 00 02125169		82	12-60 12-60 12-60	TYPE	END 00 00 00	EOB DATA	
37. VET. PREFERENCE		38. SERV. COMP. DATE	39. LONG. COMP. DATE	40. CAREER CATEGORY	41. MEDICAL/HEALTH INSURANCE	42. SOCIAL SECURITY NO.	
40000 1-1000 1-1000 1-1000		00 00 00	00 00 00	CAR 1000 1000 1000 0-1000 1-1000	1000 1000 1000 0-1000 1-1000		
43. PREVIOUS GOVERNMENT SERVICE		44. STATE TAX DATA	45. FEDERAL TAX DATA	46. STATE TAX DATA			
40000 0-1000 1-1000 1-1000 1-1000		00000	00000	00000	00000	STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION							
<i>E.P. ECHOLS</i>							
FORM 1150 Use Previous Edition		SECRET <i>BST</i>					
1-66		OCT 1 DoD Form 1150 Replaces 1150 1-66					
		(When Filled In) <i>3-3-67</i> <i>REF</i>					

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 006102											
<b>SECTION A</b> <i>Richardson, Jeffrey</i> <b>GENERAL</b>															
1. NAME (First) (Middle) (Last)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD										
		20 Jan 24	M	GS-15	D										
6. OFFICIAL POSITION TITLE <b>Ops Off</b>		7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/EUR</b>		8. CURRENT STATION <b>Paris</b>											
9. CHECK IN TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <b>CAREER-PROVISIONAL (See instructions - Section C)</b>		10. CHECK IN TYPE OF REPORT <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify) <b>SPECIAL (Specify)</b>		11. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE											
11. DATE REPORT DUE IN D.P. <b>31 May 1971</b>		12. REPORTING PERIOD (From- To) <b>1 April 1970 to 31 March 1971</b>													
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>															
<table> <tr> <td><b>U-Unsatisfactory</b></td> <td>Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</td> </tr> <tr> <td><b>M-Marginal</b></td> <td>Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</td> </tr> <tr> <td><b>P-Proficient</b></td> <td>Performance is satisfactory. Desired results are being produced in the manner expected.</td> </tr> <tr> <td><b>S-Superior</b></td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td><b>O-Outstanding</b></td> <td>Performance is exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</td> </tr> </table>						<b>U-Unsatisfactory</b>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.	<b>M-Marginal</b>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.	<b>P-Proficient</b>	Performance is satisfactory. Desired results are being produced in the manner expected.	<b>S-Superior</b>	Performance is characterized by exceptional proficiency.	<b>O-Outstanding</b>	Performance is exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.
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<b>S-Superior</b>	Performance is characterized by exceptional proficiency.														
<b>O-Outstanding</b>	Performance is exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.														
<b>SPECIFIC DUTIES</b>															
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (impute number of employees supervised).</p>															
SPECIFIC DUTY NO. 1 <b>Gained full-time employment as a senior executive of a foreign scientific publication for the purpose of further developing access to Station targets and appreciably lowering the overall cost of the operations in which he is involved.</b>				RATING LETTER <b>O</b>											
SPECIFIC DUTY NO. 2 <b>Uses his cover to gain access to MINIARSH personnel and spot leads on eventual access and support-type assets directed against the local MINIARSH and TPPAST targets.</b>				RATING LETTER <b>S</b>											
SPECIFIC DUTY NO. 3 <b>Develops and assesses MINIARSH officials with whom he has made contact as well as access prospects to the local MINIARSH and TPPAST targets.</b>				RATING LETTER <b>P</b>											
SPECIFIC DUTY NO. 4 <b>Responds to various Station requirements including investigative work.</b>				RATING LETTER <b>S</b>											
SPECIFIC DUTY NO. 5 <b>Reports on the above activities.</b>				RATING LETTER <b>P</b>											
SPECIFIC DUTY NO. 6 <b></b>				RATING LETTER <b></b>											
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>															
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>															
FORM 45 OBSOLETE PREVIOUS EDITIONS		SECRET		RATING LETTER <b>S</b>											

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## FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (Last, first, middle initial if any)	DATE FROM Item S-2	NAME OF SUPERVISOR (first)	DATE (From Item S-2)
<del>RECORDED IN</del>	17 Oct 69	Murat Natirboff	
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
12 December 1969	OFPT-15240		

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE REGION	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
20 I 1924	CS	S&T project manager, Area Ops Off, GS 15	Paris	
6. DATE OF PCS ARRIVAL IN FIELD	7. REQUESTED DATE OF DEPARTURE	8. EXPECTED DATE OF FIRST CHECK-IN AT HQ	9. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
5 Sep 1967	Please see 11B	Summer 1970	o/a 1 October, 1970	

## 7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU

2: (at that time) 42 and 17

## 8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT

I would like very much to use my fluent French in my next assignment, as well as make use of my extensive exposure to science and technology -- both operations and the larger world of the scientist and the engineer in today's evolving societies and economies. I would most especially hope to use my long experience in non-official cover activities and the managerial exposure accumulated thereby.

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (See special note on transmitted form).  
*Please attach personal cover questionnaire in accordance with CSF-P 248-8*

- \* I planned, established and operated a long-range S&T spotting-assessment activity against sensitive targets, and a shorter range similar local activity during a period marked largely by an adverse political climate.
- \* I planned, developed and exploited, and modified a non-official cover in order to mask our operational activity, and integrated these into the broader ranging overall activities of a major field Station.
- \* I managed the non-official cover activity of **viable professional/commercial cover** organizations. The tasks included many business and production aspects as well as management of the **firm's unwitting** personnel in the field and from the home office.
- \* I assisted other Stations and Bases, upon their request, in spotting-assessment activities, in local search and surveillance of targets, and in recruitment.
- \* As my original non-official cover became modified as a result of **mergers**, I was able to develop, alone, continuing cover to serve our needs of operational access as well as those of **'status'** cover.

10. TRAINING DESIRED:  
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

- the senior-most management course offered through the Organization;
- a review course of activities within the CS and the Organization as a whole;
- at least audit the S&T course, if that is still being offered.

If (a) is possible through a civil school away from Headquarters, I would have no objection to the displacement involved.

SECRET

(This Form Filled In)

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<b>FITNESS REPORT</b>					EMPLOYEE SERIAL NUMBER 006102
<b>SECTION A</b> <i>Retaliation, Refusal</i> <b>GENERAL</b>					
1. NAME <i>[Redacted]</i>		2. GRADE 20 Jan 1924	3. SEX M	4. GRADE GS-15	5. RD D
6. OFFICIAL POSITION TITLE Ops Off		7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION DDP/EUR/F Paris			
9. CHECK IN/TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		10. CHECK IN/TYPE OF REPORT INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR CAREER-PROVISIONAL (See Instructions - Section C) <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):			
11. DATE REPORT DUE IN G.P. 1 April 1969 - 31 March 1970		12. REPORTING PERIOD (From - To)			
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>					
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspect. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (including number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 Established and maintains a legitimate <b>S&amp;T publishing</b> representation for the purpose of developing natural access to Station targets.					RATING LETTER S
SPECIFIC DUTY NO. 2 Uses his cover to develop leads on eventual access or support type assets to be used by the Station against the local MHARSH-target.					RATING LETTER S
SPECIFIC DUTY NO. 3 Responds to various Station requirements including investigative work.					RATING LETTER S
SPECIFIC DUTY NO. 4 Initiates contact with selected local MHARSH targets and undertakes to develop sufficient rapport with them to provide operational assessments.					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER -
SPECIFIC DUTY NO. 6					RATING LETTER 09 JULY 1970
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					RATING LETTER S

SECTION C			NARRATIVE COMMENTS												
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Amount of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>The comments of the rating officer are limited to the period from October 1969 to March 1970 during which he worked with Subject. The previous rating officer has added his comments to allow coverage of the total indicated period from April 1969 to March 1970. During this period Subject was integrated in a new team assigned to the local SAP and Commercial MINARSH target. Subject's recent activity has been very productive indeed. Subject used the excellent potential given to him by his cover to skillfully spot and assess access agent candidates. As Subject's operational situation in Paris precludes making recruitment, the next promising of these candidates was placed in contact with a Station officer during social events Subject organized. At the same time, Subject continued his efforts to develop personal relationship with several MINARSHers. The beginning of personal, as opposed to purely professional, relations with a major MINARSH target enabled him to obtain insight into the target's beliefs and personality which was the best the Station had to date. Subject also managed to establish contact with two other MINARSH representatives of interest. This, in one case, required almost six months to accomplish via a combination of patience, skill and determination. Subject is an experienced officer. He is cost conscious and practices good security. The Station has no other asset with the necessary scientific and editorial know-how, fluent French and local knowledge to replace Subject. In view of this and the recent progress made by Subject in response to very specific requirements and his willingness to try to establish personal and, hopefully, social relations with access prospects and MINARSH targets, the Station recently recommended that he be extended in Paris. At the same time, the Station recommended that Subject's cover be reinforced by full-time employment with Subject's current UNLADY part-time employer.</p>															
SECTION D			CERTIFICATION AND COMMENTS												
<p><b>1.</b> <b>BY EMPLOYEE</b></p> <p>I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">DATE</td> <td colspan="3" style="width: 80%; text-align: center;">SIGNATURE OF EMPLOYEE /s/ [Signature]</td> <td style="width: 10%;"></td> </tr> </table> <p><b>2.</b> <b>BY SUPERVISOR</b></p> <p>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</p> <p>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">DATE</td> <td style="width: 40%;">OFFICIAL TITLE OF SUPERVISOR Handling Officer Chief, SA II</td> <td style="width: 50%;">TYPED OR PRINTED NAME AND SIGNATURE /s/ Francis Sherry /s/ Murat Natirboff</td> </tr> </table> <p><b>3.</b> <b>BY REVIEWING OFFICIAL</b></p> <p>COMMENTS OF REVIEWING OFFICIAL</p> <p>As previous Station correspondence and fitness reports will reflect, this officer has been the subject of varying evaluations and projections in recent years. In fairness to him, however, it is equally true that an officer under non-official cover reflects, in the level and quality of his performance, the amount and type of guidance, direction and push he receives from the responsible inside case officer. Making allowances for these variables, this officer's past record has not been impressive; however, it is also correct to note that he has improved substantially during the latter part of the period under review, and that if the Station can work out some fiscal arrangement which will reduce the heavy financial input</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">DATE</td> <td style="width: 40%;">OFFICIAL TITLE OF REVIEWING OFFICIAL DCOS</td> <td style="width: 50%;">TYPED OR PRINTED NAME AND SIGNATURE /s/ Hugh Montgomery</td> </tr> </table>					DATE	SIGNATURE OF EMPLOYEE /s/ [Signature]				DATE	OFFICIAL TITLE OF SUPERVISOR Handling Officer Chief, SA II	TYPED OR PRINTED NAME AND SIGNATURE /s/ Francis Sherry /s/ Murat Natirboff	DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL DCOS	TYPED OR PRINTED NAME AND SIGNATURE /s/ Hugh Montgomery
DATE	SIGNATURE OF EMPLOYEE /s/ [Signature]														
DATE	OFFICIAL TITLE OF SUPERVISOR Handling Officer Chief, SA II	TYPED OR PRINTED NAME AND SIGNATURE /s/ Francis Sherry /s/ Murat Natirboff													
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL DCOS	TYPED OR PRINTED NAME AND SIGNATURE /s/ Hugh Montgomery													

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SECRET

(This Field Is)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER											
<b>SECTION A</b> <i>Richardson, Jr. Spec</i>				006102											
GENERAL															
1. NAME <i>Richardson, Jr. Spec</i>		2. DATE OF BIRTH 20 Jan 1924		3. SEX M	4. GRADE GS-15										
5. OFFICIAL POSITION TITLE Ops Officer		6. OFF/DIR/BSN OF ASSIGNMENT DDP/EUR/France		7. CURRENT STATION Paris											
8. CHECK (X) TYPE OF APPOINTMENT				9. CHECK (X) TYPE OF REPORT											
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER-PROVISIONAL (See Instructions - Section C)</small> <small>SPECIAL (Specify):</small>		<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE											
10. DATE REPORT DUE IN O.P.				11. REPORTING PERIOD (Please Ind)											
				1 October 1965 - 31 March 1969											
<b>SECTION B</b> PERFORMANCE EVALUATION															
<table border="0"> <tr> <td><b>W - Weak</b></td> <td>Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</td> </tr> <tr> <td><b>A - Adequate</b></td> <td>Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</td> </tr> <tr> <td><b>P - Proficient</b></td> <td>Performance is more than satisfactory. Desired results are being produced in a proficient manner.</td> </tr> <tr> <td><b>S - Strong</b></td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td><b>O - Outstanding</b></td> <td>Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</td> </tr> </table>						<b>W - Weak</b>	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.	<b>A - Adequate</b>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	<b>P - Proficient</b>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.	<b>S - Strong</b>	Performance is characterized by exceptional proficiency.	<b>O - Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.
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<b>O - Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.														
<b>SPECIFIC DUTIES</b>															
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>															
<b>SPECIFIC DUTY NO. 1</b> Establishes and maintains a legitimate <b>S&amp;F publishing</b> representation for the purpose of developing natural access to Station targets.					RATING LETTER <b>S</b>										
<b>SPECIFIC DUTY NO. 2</b> Develops cover pretexts to meet WOLADY and third national of operational interest in the S&F community.					RATING LETTER <b>S</b>										
<b>SPECIFIC DUTY NO. 3</b> Responds to Station ad-hoc requirements on the local internal target.					RATING LETTER <b>S</b>										
<b>SPECIFIC DUTY NO. 4</b> Develops potential agent prospects in the S&F community to the point where they can be recommended as Station agent candidates.					RATING LETTER <b>P</b>										
<b>SPECIFIC DUTY NO. 5</b> <i>20 Oct 1968</i>					RATING LETTER										
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>															
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER <b>S</b>										

**SECRET****NARRATIVE COMMENTS****SECTION C**

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

UOT § / 150

During this reporting period subject had very significantly increased the tempo of his activities and contacts. Many agent prospects have been screened and contacts were established with people of interest to several elements of the Station. Subject is particularly thorough and outstanding on specific investigations where he utilized cover in a skillful and imaginative way. He has improved in terms of people development but in this respect he is still best with people in a professionally related context rather than a contrived social context. As mentioned in the previous report subject's cover assignment does not allow him to make recruitments. Subject has a high degree of cost consciousness and does not exercise any supervisory responsibilities.

**SECTION D****CERTIFICATION AND COMMENTS****BY EMPLOYEE**

1.

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

DATE

11 June 1969

SIGNATURE OF EMPLOYEE

/s/ 

BY SUPERVISOR

2.

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

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

DATE

5 June 1969

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

/s/  Murat Natirboff

3.

COMMENTS OF REVIEWING OFFICIAL

I do not concur in this rating. I would have given the employee STRONG in the performance of his cover responsibilities, that is to say in the manner in which he has created and expanded his cover. I would have restricted myself to PROFICIENT, however, in assessing his exploitation of that cover for operational purposes. For a fuller treatment of this staff agent's performance, suggest that reference be made to the RCC Status Report, submitted 26 May 1969, via OCPA-37925.

DATE

23 JUNE 1969

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief of Station

TYPED OR PRINTED NAME AND SIGNATURE

/s/ David E. Murphy

**SECRET**

SECRET

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
<i>Richardson, Sargent</i>				005102	
<b>SECTION A</b>					
1. NAME			GENERAL		
2. DATE OF BIRTH			3. SEX		4. GRADE
20 Jan 1924			M		GS-15 D
5. OFFICIAL POSITION TITLE			6. OFF/Div/Br of Assignment		
Ops Officer			DDP/EUR/France		
7. CHECK (X) TYPE OF APPOINTMENT			8. CHECK (X) TYPE OF REPORT		
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN G.P.			12. REPORTING PERIOD (From To)		
			1 April 1967 - 30 September 1967		
<b>SECTION B</b>					
<b>PERFORMANCE EVALUATION</b>					
<b>M - Weak</b>	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.				
<b>A - Adequate</b>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.				
<b>P - Proficient</b>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.				
<b>S - Strong</b>	Performance is characterized by exceptional proficiency.				
<b>O - Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.				
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Establishes and maintains a legitimate <b>S&amp;T publishing</b> representation for the purpose of developing natural <b>leads to station targets</b> .					S
SPECIFIC DUTY NO. 2					RATING LETTER
Develops cover pretenses to meet NCIAUDY and third national of operational interest in the S&T community.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Responds to Station ad-hoc requirements on the local internal target.					S
SPECIFIC DUTY NO. 4					RATING LETTER
Develops potential agent prospects in the S&T community to the point where they can be recommended as Station agent candidates.					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					S

**SECRET****SECTION C NARRATIVE COMMENTS**

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

Since the last reporting period subject's efforts were directed by the Station toward the spotting, developing and assessing NCIS/SAC agent candidates in terms of recruitment and inclusion in the Station's SAC spotting network.

Subject has done thorough and at times imaginative up-to-date work in this field despite the fact that the mission was not as successful as anticipated. Recent progress however would indicate that the next reporting period would be more productive.

Subject continues to respond to ad-hoc specific assignments in an exemplary manner.

Because of the nature of his cover assignment Subject is not authorized to make recruitments.

Subject has a high degree of cost consciousness. He does not exercise any supervisory responsibilities under his cover assignment.

**SECTION D CERTIFICATION AND COMMENTS****1. BY EMPLOYEE**

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

DATE	SIGNATURE OF EMPLOYEE
24 Oct. 1968	/s/ 

**2. BY SUPERVISOR**

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

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
28 Oct. 1968	Ops Officer	/s/ 

**3. BY REVIEWING OFFICIAL****COMMENTS OF REVIEWING OFFICIAL**

See attached.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	Chief of Station	/s/ David E. Murphy

**SECRET**

SECRET

(This Field Is)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 006102
<b>SECTION A</b>				<b>GENERAL</b>
1. NAME (Last, First, Middle Initial) <i>Reclining [Signature]</i>		2. DATE OF BIRTH 20 Jan 24	3. SEX M	4. GRADE GS-15
5. OFFICIAL POSITION TITLE <b>Ops Officer</b>		6. OFF/DIVISION OF ASSIGNMENT <b>DDP/EUR/France</b>	7. CURRENT STATION <b>Paris</b>	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):	10. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYER	
11. DATE REPORT DUE IN G.P.		12. REPORTING PERIOD (From: To): <b>1 April 1966 - 31 March 1967</b>		
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>				
<p><b>B - Weak:</b> Performance ranged from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate:</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient:</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong:</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding:</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
<b>SPECIFIC DUTIES</b>				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				
SPECIFIC DUTY NO. 1 Establishes and maintains a legitimate <b>SAT publishing</b> representation for the purpose of developing natural access to Soviet SAT personnel.				RATING LETTER S
SPECIFIC DUTY NO. 2 Develops cover pretexts to meet, assess, and recommend as agent candidates WOLADY and Third Nationals in the HOPAIRY SAT community.				RATING LETTER S
SPECIFIC DUTY NO. 3 Contacts and develops local Soviet Bloc personnel.				RATING LETTER S
SPECIFIC DUTY NO. 4 Develops cover pretexts to attend selected scientific conferences.				RATING LETTER S
SPECIFIC DUTY NO. 5 Responds to local Station adhoc operational requirements.				RATING LETTER S
SPECIFIC DUTY NO. 6 <i>31 AUG 1967</i>				RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER S

SECRET

## SECTION C

## NARRATIVE COMMENTS

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

Subject continues to maintain a secure effective cover mechanism. In this reporting period the whole thrust and objectives of this cover facility have been changed from pursuit of targets designated by Headquarters at international conferences to pursuit of the local Soviet presence. This has caused a major readjustment and Subject is now beginning to produce the type of leads that help the Station achieve its local operational objectives.

Subject continues to show a well organized methodical approach to his cover and operational tasks.

Subject is cost conscience.

HQRS. NOTE: Subject has no supervisory responsibilities.



Seth T. Crawford  
Chief, E/F

## SECTION D

## CERTIFICATION AND COMMENTS

1.

## BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

2.

## BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE GIVE EXPLANATION  
Employee is on h/l. Report will be shown to him upon his return.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

9 August 1967

Ops Officer

/s/ 

3.

## BY REVIEWING OFFICIAL

## COMMENTS OF REVIEWING OFFICIAL

I rarely see the written product of this employee's efforts and know little of his work except as I am informed of it by his supervisor in the Station. I have the impression, however, that the employee is responding to his supervisor's guidance and is not by any means simply drifting along paths indicated by his cover work, which can be a temptation when an employee has, as is true in this case, rather limited contact with his colleagues who work under official cover on the same target. I thus concur in the evaluation on the basis of limited knowledge.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

9 August 1967

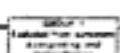
Ops Officer

/s/ Robert E. Owen

SECRET

SECRET

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <i>P</i> 006102	
<b>SECTION A</b>					
<b>GENERAL</b>					
1. NAME	(First)	(Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE
<i>[Redacted]</i>			20 Jan. 1924	M	GS-15 D
5. OFFICIAL POSITION TITLE	Dng Officer		6. OFF/DIR/DO OF ASSIGNMENT	7. CURRENT STATION	
			DDP/ME/French	Paris	
8. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See instructions - Section C)			XX ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN G.P.			12. REPORTING PERIOD (From - To)		
			3 June 1965 - 31 March 1966		
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>					
<b>W - Weak</b>	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from probation, to reassignment, or to separation. Describe action:				
<b>A - Adequate</b>	Performance meets all requirements. It is entirely satisfactory.				
<b>P - Proficient</b>	Performance is more than satisfactory. Desired results are met.				
<b>S - Strong</b>	Performance is characterized by exceptional proficiency.				
<b>O - Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.				
List up to six of the most important specific duties which employee performs EACH day.			Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider work environment in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).		
SPECIFIC DUTY NO. 1			Establishes and maintains a legitimate <b>SAT publishing</b> representation for the purpose of developing natural access to Soviet SAT personnel		
			RATING LETTER O		
SPECIFIC DUTY NO. 2			Develops cover pretexts to attend selected scientific conferences where targeted Soviet SAT personnel are expected		
			RATING LETTER S		
SPECIFIC DUTY NO. 3			Contacts, develops and assesses Soviet SAT personalities at international conferences.		
			RATING LETTER S		
SPECIFIC DUTY NO. 4			Participates as an inside spotter, manager, and key team member in recruitment operations against Soviet SAT personnel		
			RATING LETTER S		
SPECIFIC DUTY NO. 5			Spots, develops and assesses Soviet, third national and PRPRIME agent candidates in NSFAIRY		
			RATING LETTER S		
SPECIFIC DUTY NO. 6					
			RATING LETTER S		
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					
FORM 45 OBSOLETE PREVIOUS EDITIONS 4-62			SECRET		



**SECRET***(This form filled in)***SECTION C****NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give specific demands for training. Comment on Subject's length of experience, if required for current position. Explain or explain ratings given in Schedule II to provide best basis for determining future personal action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject has done an outstanding job in creating a ~~new~~ mechanism which enables direct access to an important target group. This job was performed ~~well~~ skillfully, securely, intelligently and imaginatively. Subject is an experienced, highly capable senior professional officer in every sense of the term. He is a thoroughly organized self-disciplined person who can operate effectively outside a normal ~~SUM~~ complex. He has the ~~supple~~ mind required to learn highly technical cover tasks and perform these in a skilled manner. He organizes the performance of these cover duties in such a manner as to extract the most operational mileage. Subject has spotted, assessed, developed, and in special cases recruited. He is extremely articulate, and an excellent writer. Despite his deep cover status, he submits timely finished operational and information reports. His management, administration, and record keeping of both his cover and operational duties is excellent.

Although Subject has had long experience in supervisory capacities, his present singleton cover status does not require supervisory duties.

**SECTION D****CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

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

DATE

4 May 1966

SIGNATURE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

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

DATE

OFFICIAL TITLE OF SUPERVISOR

4 May 1966

Ops Officer

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Comments: None

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
4 May 1966	Ops Officer	/s/ Robert E. Owen

**SECRET**

SECRET  
(When Filled In)Recorded by  
CSPB

1960		SECRET																																																																																																																																																												
SECTION A		FITNESS REPORT <i>Richardson Jaques</i>		EMPLOYEE SERIAL NUMBER																																																																																																																																																										
1. NAME		GENERAL																																																																																																																																																												
2. DATE OF BIRTH		20 January 1924		3. SEX M																																																																																																																																																										
4. GRADE CS-14				5. OFFICER OR ASSIGNMENT OC/GR/6																																																																																																																																																										
6. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE D Branch Chief		7. TYPE OF REPORT																																																																																																																																																										
7. CAREER STAFF STATUS		8. NOT ELIGIBLE MEMBER DEFERRED PENDING DECLINED DENIED		INITIAL REASSIGNMENT/SUPERVISOR ANNUAL REASSIGNMENT/EMPLOYEE																																																																																																																																																										
10. DATE REPORT DUE IN G.P.		11. REPORTING PERIOD From July 1960-October 61 To		SPECIAL (Specify)																																																																																																																																																										
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES																																																																																																																																																														
<p>List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of these duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p> <table border="1"> <thead> <tr> <th>1 - Unsatisfactory</th> <th>2 - Barely adequate</th> <th>3 - Acceptable</th> <th>4 - Competent</th> <th>5 - Excellent</th> <th>6 - Superior</th> <th>7 - Outstanding</th> </tr> </thead> <tbody> <tr> <td colspan="2">SPECIFIC DUTY NO. 1 Supervises large functional branch of <b>thirty-seven</b> staff and <b>fifteen</b> contract personnel.</td> <td>RATING NO. 5</td> <td colspan="2">SPECIFIC DUTY NO. 4 Conducts liaison with various components of the Agency and with other agencies.</td> <td colspan="2">RATING NO. 6</td> </tr> <tr> <td colspan="2">SPECIFIC DUTY NO. 2 Plans and programs for operations support, including initiation of new support activities.</td> <td>RATING NO. 5</td> <td colspan="2">SPECIFIC DUTY NO. 5 Prepares and presents briefings.</td> <td colspan="2">RATING NO. 5</td> </tr> <tr> <td colspan="2">SPECIFIC DUTY NO. 3 Supervises preparation of, and sometimes personally prepares, special studies both on own initiative and on request.</td> <td>RATING NO. 5</td> <td colspan="2">SPECIFIC DUTY NO. 6 Supervises maintenance of SR Division records on Soviet defectors, supports exploitation of defectors and participates in their resettlement.</td> <td colspan="2">RATING NO. 5</td> </tr> </tbody> </table>						1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding	SPECIFIC DUTY NO. 1 Supervises large functional branch of <b>thirty-seven</b> staff and <b>fifteen</b> contract personnel.		RATING NO. 5	SPECIFIC DUTY NO. 4 Conducts liaison with various components of the Agency and with other agencies.		RATING NO. 6		SPECIFIC DUTY NO. 2 Plans and programs for operations support, including initiation of new support activities.		RATING NO. 5	SPECIFIC DUTY NO. 5 Prepares and presents briefings.		RATING NO. 5		SPECIFIC DUTY NO. 3 Supervises preparation of, and sometimes personally prepares, special studies both on own initiative and on request.		RATING NO. 5	SPECIFIC DUTY NO. 6 Supervises maintenance of SR Division records on Soviet defectors, supports exploitation of defectors and participates in their resettlement.		RATING NO. 5																																																																																																																														
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<p>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</p> <p>Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.</p> <table border="1"> <tbody> <tr> <td colspan="6"> <ul style="list-style-type: none"> <li>1 - Performance in many important respects fails to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>6 - Performance in every respect is outstanding.</li> </ul> </td> </tr> <tr> <td colspan="6" style="text-align: right;">RATING NO. 5</td> </tr> </tbody> </table>						<ul style="list-style-type: none"> <li>1 - Performance in many important respects fails to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>6 - Performance in every respect is outstanding.</li> </ul>						RATING NO. 5																																																																																																																																																		
<ul style="list-style-type: none"> <li>1 - Performance in many important respects fails to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>6 - Performance in every respect is outstanding.</li> </ul>																																																																																																																																																														
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<p>SECTION D DESCRIPTION OF THE EMPLOYEE</p> <p>In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.</p> <table border="1"> <thead> <tr> <th>1 - Least possible degree</th> <th>2 - Limited degree</th> <th>3 - Normal degree</th> <th>4 - Above average degree</th> <th>5 - Outstanding degree</th> <th colspan="5">RATING</th> </tr> <tr> <th colspan="4"></th> <th>NOT APPLICABLE</th> <th>NOT OBSERVED</th> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> </tr> </thead> <tbody> <tr> <td colspan="5">CHARACTERISTICS</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="5">GETS THINGS DONE</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">RESOURCEFUL</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">ACCEPTS RESPONSIBILITIES</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">DOES HIS JOB WITHOUT STRONG SUPPORT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">FACILITATES SMOOTH OPERATION OF HIS OFFICE</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">WRITES EFFECTIVELY</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">SECURITY CONSCIOUS</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">THINKS CLEARLY</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>X</td> </tr> <tr> <td colspan="5">OTHER (Specify)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree	RATING									NOT APPLICABLE	NOT OBSERVED	1	2	3	4	5	CHARACTERISTICS											GETS THINGS DONE										X	RESOURCEFUL										X	ACCEPTS RESPONSIBILITIES										X	CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES										X	DOES HIS JOB WITHOUT STRONG SUPPORT										X	FACILITATES SMOOTH OPERATION OF HIS OFFICE										X	WRITES EFFECTIVELY										X	SECURITY CONSCIOUS										X	THINKS CLEARLY										X	DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS										X	OTHER (Specify)										
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WARNING—Do not fill out this form until you have read all instructions.		DESIGNATION OF BENEFICIARY CIVIL SERVICE RETIREMENT SYSTEM			STANDARD FORM NO. 2808 JUNE 1968 U.S. Civil Service Commission FWS Supplement 831-1 2808-104	
<b>A. INFORMATION CONCERNING THE DESIGNATOR</b>						
1. NAME <b>RICHARDSON</b>	2. (Last) <b>Jacques</b>	3. (First) <b>Gabriel</b>	4. MIDDLE	5. DATE OF BIRTH (Month) <b>Jan</b>	6. (Day) <b>20</b>	7. (Year) <b>1924</b>
8. DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU OR DIVISION <b>CSA—</b>						
I, the employee or former employee identified above, canceling any and all previous designations of beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any lump-sum benefit which may become payable under the Civil Service Retirement Act after my death. I understand that this designation of beneficiary will not affect the rights of any survivors who may qualify for annuity benefits after my death, and that this designation will remain in full force and effect unless or until canceled by me in writing.						
<b>B. INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES</b>						
TYPE OR PRINT FIRST NAME, MIDDLE INITIAL, AND LAST NAME OF EACH BENEFICIARY <b>Pamela A. Richardson</b>	TYPE OR PRINT ADDRESS (including ZIP Code) OF EACH BENEFICIARY <b>5 villa Madrid, Neuilly, France</b>			RELATIONSHIP <b>Daughter</b>	SHARE TO BE PAID TO EACH BENEFICIARY (See Example) <b>One half</b>	
<b>Michelle D. Richardson</b>	<b>5 villa Madrid, Neuilly, France</b>			<b>Daughter</b>	<b>One half</b>	
I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary or beneficiaries who may die before a lump-sum benefit becomes payable shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. If none of the beneficiaries are alive when the lump-sum benefit becomes payable, this designation shall be void.						
January 12, 1972 (DATE OF THIS DESIGNATION)						
(SIGNATURE OF DESIGNATOR—DO NOT PRINT)						
C. WITNESSES (A witness is ineligible to receive payment as a beneficiary.) We, the undersigned, certify that this instrument was signed in our presence.						
<i>Richard Peter</i> (SIGNATURE OF WITNESS—DO NOT PRINT)	<i>13219 Allerton Ave.</i> (NUMBER AND STREET)	<i>Rockville, Md.</i> (CITY, STATE, AND ZIP CODE)				
(SIGNATURE OF WITNESS—DO NOT PRINT)						
PRINT OR TYPE YOUR NAME AND ADDRESS (including ZIP Code) TO INSURE RETURN OF COPY						
(Reserved for Receiving Stamp of U. S. Civil Service Commission)						
Jacques G. Richardson c/o Mrs T. G. Driscoll 722 South Royal Street Alexandria VA 22134						
THIS DUPLICATE WILL BE RETURNED TO YOU						
22-10000-2-204 PERIODICALS RECEIVED						

Standard Form No. 1320  
Form prescribed by  
Comptroller General, U. S.  
October 21, 1960  
(GSA, Reg. No. 104, Supp. No. 13)

## DESIGNATION OF BENEFICIARY

UNPAID COMPENSATION OF  
DECEASED CIVILIAN EMPLOYEE

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

## INFORMATION CONCERNING THE EMPLOYEE:

NAME— <b>RICHARDSON</b>	(Last) <b>Jacques</b>	(First) <b>Gabriel</b>	(Middle)	Date of Birth (Month, day, year) <b>Jan 20 1924</b>
----------------------------	--------------------------	---------------------------	----------	--

## DEPARTMENT OR AGENCY IN WHICH EMPLOYED

Department or agency <b>None</b>	Bureau <b>None</b>	Division <b>None</b>
-------------------------------------	-----------------------	-------------------------

I, the employee identified above, canceling any and all previous Designations of Beneficiary heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any UNPAID COMPENSATION due and payable under existing law after my death. I understand that this Designation of Beneficiary relates solely to Unpaid Compensation as defined in section 2 of the act of August 5, 1950, Public Law 656, and in nowise will affect the disposition of any benefit which may become payable under the Retirement Act applicable to my Government service. I further understand that this Designation of Beneficiary will remain in full force and effect, unless so until canceled by me in writing, as long as I am continuously employed in the above department or agency.

## INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Pamela A. Richardson	5 villa Madrid 92 Neuilly France	Dau	One half
Michelle D. Richardson	5 villa Madrid 92 Neuilly France	Dau	One half

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change any designation of beneficiary at any time in the manner and form prescribed by the Comptroller General of the United States, and without knowledge or consent of the beneficiary.

January 12 1972

(Date of execution—month, day, year)

(Signature of employee)

## WITNESSES TO SIGNATURE:

<i>Jacques G. Richardson</i> (Signature of witness)	13219 Montayne Ave. <i>Los Angeles, California N.D.</i> (Number and street)	(City, state number, and State)
--	--	---------------------------------

(Signature of witness)

(Number and street)

(City, state number, and State)

## PRINT OR TYPE NAME AND ADDRESS OF EMPLOYEE

Jacques G. Richardson  
c/o Mrs T. G. Driscoll  
722 South Royal Street  
Alexandria VA 22314

## THIS SPACE RESERVED FOR RECEIVING DATA

1250 11th Street, N.W., Washington, D.C. 20407

7-11-67-101-2-274

DUV-325-71-11-274  
(Indicate date and by whom received)

DELIVER BOTH COPIES TO THE PROPER OFFICES OF YOUR AGENCY—DUPLICATE WILL BE NOTED AND RETURNED

16-6800-1

**DUPLICATE**

SECRET

REF ID: A64

## FIELD REASSIGNMENT QUESTIONNAIRE

<i>Accidental Release</i>		DO NOT COMPLETE	FOR HEADQUARTERS USE ONLY	
NAME OF EMPLOYEE (Last, First, Middle Initial & Suffix)		DATE FROM WHICH S-1 NAME OF SUPERVISOR (Initials)	DATE (From item 5-2)	
3 Feb. 1969		David Murphy	3 Feb. 1969	
DATE RECEIVED AT HEADQUARTERS		DISPATCH NUMBER	DATE RECEIVED BY CARRIER SERVICE	
20 February 1969		TM-7989-17		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
20 Jan 1924	CS	S-1 project manager Area Ops Off, GS 15	Paris	LPCOVER
6. DATE OF PCS ARRIVAL IN FIELD	7. REQUESTED DATE OF DEPARTURE	8. EXPECTED DATE OF FIRST CHECK-IN AT HQ	9. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
4 Sep 1967	Please see 11B	Summer 1970	o/a 15 August 1970	
10. NUMBER AND NAMES OF DEPENDENTS WHO WILL TRAVEL WITH YOU				
3: (at that time) 42, 19 and 16				
11. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT				
<p>My younger daughter should graduate from high school in Europe in June, 1970. Because she should not be transferred at that critical scholastic juncture, I would like to remain in the field another nine months to see her through her senior year.</p> <p>In my next assignment, I would like to use my fluent French from time to time, if possible.</p>				
<p>12. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (use special note or transmittal form). (also attach personnel cover questionnaire in accordance with CS-8 240-48)</p> <ul style="list-style-type: none"> <li>* I planned, established and operated a long-range S-1 staking-assessment activity against sensitive targets, and a shorter-range similar local activity in an adverse political climate.</li> <li>* I planned, developed and exploited an inserted non-official cover to mask the operational activity, integrated into the further-ranging overall activities of a major Station.</li> <li>* I named the non-official cover activity as a viable professional/commercial activity, including many business and production aspects, as well as the local handling of the firm's fumitting personnel.</li> <li>* I assisted other stations and bases, at their request, in staking-assessment activities, in local search and surveillance activities, and in recruitment.</li> <li>* As part of my original non-official cover (it) was because of a corporate merger, I developed independently continuing cover to serve operational access needs as well as those of status cover.</li> </ul>				
<p>13. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS</p> <p>I would like to take (a) the seniormost management course offered by or through the Organization as well as (b) a review course of activities within the CS and the Organization as a whole.</p> <p>In addition, I would also like to (c) audit, at least, the S-1 course, if that is still being offered.</p> <p>If (a) is possible through a civil school away from Headquarters, I would have no objection to the dislocation involved.</p>				

SECRET



### DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of appointment or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

2. PRESENT ADDRESS (House and number only) 3001 Old Building Rd  
 3. DO DATE OF BIRTH 20 Jan 1924 4. DO PLACE OF BIRTH (City or town and State or country) Silver Spring Md.

5. DO IN CASE OF EMERGENCY PLEASE NOTIFY HARRIETTE D. RICHARDSON 6. DO RELATIONSHIP WIFE 7. DO STREET AND NUMBER, CITY AND STATE 3001 Old Building Rd-55-Hd 8. DO TELEPHONE NO. SL-3983

9. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (FATHER BY BLOOD OR MARRIED WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 12 MONTHS)?  YES  NO  
 If so, for each such relative fill in the blanks below. If additional space is necessary, enclose under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	10. POSITION OR EMPLOYMENT OR NOT IN DEPARTMENT OR AGENCE OR BUREAU EMPLOYED		RELATION- SHIP	11. BUD- GET CLASS (Check one)
		1.	2.		
		1.			
		2.			
		3.			
		4.			
		5.			
		6.			
		7.			
		8.			
		9.			
		10.			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X"  
IN PROPER COLUMN

ITEM NO.	12. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS	
	YES	NO
1. ARE YOU A CITIZEN OF OR DO YOU ENJOY ALLEGIANCE TO THE UNITED STATES?	X	
2. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in Item 10.</i>	X	
3. DO YOU RECEIVE ANNUAL PAY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA OTHERWISE THAN AS A RETIREMENT ACT OR ANY FEDERAL OR OTHER CORPORATION PAYMENT, MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in Item 20 reason for retirement, that is, age, optional disability, or the reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.</i>	X	
4. HAVE YOU EVER BEEN DISCHARGED, DISFORCED, DISQUALIFIED, OR UNSATISFACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in Item 10 the name and address of employer, state, and reason in each case.</i>	X	
5. SINCE YOUR BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INCARCERATED, OR SENTENCED INTO COURT AS A SUSPECT IN A CRIMINAL PROSECUTION OR DEFENSE, OR AS A SUSPECT IN A POLITICAL PROSECUTION, OR HAVE YOU EVER BEEN DISCLOSED TO PUBLIC RECORD AS INVOLVED WITH THE VIOLATION OF ANTILAW POLICE REGULATION, ORDER, INSTRUCTION, OR COMMAND, INCLUDING BUT NOT LIMITED TO VIOLATIONS FOR WHICH A CHECK MARK IS STATED LESS THAN	X	
<i>If your answer is "Yes", list all such cases under Item 10. Give in each case, (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.</i>		

#### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, position, suitability in connection with any award of merit, discharge or arrest, and particularly for the following:

(1) Identity of appointee.—The appointee's signature and handwriting are to be compared with the applicante and/or other personal papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) Age.—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be commenced.

(3) Commission.—The appointing officer is responsible for informing the attorney-general of (1) the Civil Service Rules and (2) appointment with full or continuous pay absent for both purposes and is responsible paid of attorney-at-law as source of confirming evidence. In doubtful cases the appointing officer should not be committed until clearance has been secured from the attorney-general of the Civil Service Commission.

(4) Members of Family.—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probation or permanent appointment in the competitive service, no other member of such family as regular or probationary or permanent appointment in the competitive service. The appointments of persons entitled to veterans preference are not subject to this requirement. The members of family preference does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

SECRET

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PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE 7 August 1957	NOV
INSTRUCTIONS <i>QTB-</i>			
<p>This form provides the agency whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in these sections. You need complete Sections VII through XII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.</p>			
<b>SECTION I GENERAL</b>			
1. FULL NAME (Last-First-Middle) <b>RICHARDSON, Jacques Gabriel</b>			
2. CURRENT ADDRESS (No., Street, City, Zone, State) Box 889 APO 500 San Francisco, California		3. PERMANENT ADDRESS (No., Street, City, Zone, State) 722 South Royal Street Alexandria, Virginia	
4. HOME TELEPHONE NUMBER Tokyo 2636-3928		5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE Virginia	
<b>SECTION II PERSON TO BE NOTIFIED IN CASE OF EMERGENCY</b>			
1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S. <b>BRISCOE, Theodore Gotzian</b>		2. RELATIONSHIP Father-in-law	
3. HOME ADDRESS (No., Street, City, Zone, State, Country) 722 South Royal Street, Alexandria, Virginia			
4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country)- INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE Council of State Governments, 1025 Connecticut Avenue, Washington, D.C.			
5. HOME TELEPHONE NUMBER Temple 6-4506		6. BUSINESS TELEPHONE NUMBER Executive 3-6715	
7. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) WHO ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE <b>Mr Harry A Richardson (Brother), 3039 Macomb Street N.W., Washington, D.C. (333-3-6093)</b>			
<b>SECTION III MARRITAL STATUS</b>			
1. CHECK ONE ONLY <input checked="" type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED			
2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS			
SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving date below for all previous marriages. If marriage is contemplated, provide same date for fiance.			
3. NAME (First) (Middle) (Maiden) (Last)			
4. DATE OF MARRIAGE    5. PLACE OF MARRIAGE (City, State, Country)			
6. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country)			
7. LIVING    8. DATE OF DEATH    9. CAUSE OF DEATH		<i>CONFIDENTIAL</i> <i>18 AUG 1957</i>	
10. CURRENT ADDRESS (Give last address, if deceased)			
11. DATE OF BIRTH    12. PLACE OF BIRTH (City, State, Country)		<i>CONFIDENTIAL</i> <i>18 AUG 1957</i>	
13. IF BORN OUTSIDE U.S.-DATE OF ENTRY    14. PLACE OF ENTRY			
15. CITIZENSHIP (Country)		16. DATE ACQUIRED	
17. OCCUPATION		18. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers)	
19. EMPLOYERS ON BUSINESS ADDRESS (No., Street, City, State, Country)			
<b>SECTION III CONTINUED TO PAGE 2</b>			

SECRET

(When Filled In)

(4700)

## SECTION X CONTINUED FROM PAGE 6

7. LIST ANY SIGNIFICANT PUBLISHED WORKS OF WHICH YOU ARE THE AUTHOR (DO NOT SUBMIT COPIES UNLESS REQUESTED). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.).

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

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE IN AN EXPERIENCED INTELLIGENCE BRIEFER.

10. LIST ANY PROFESSIONAL, SCHOLARLY OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC AWARDS YOU HAVE RECEIVED.  
Member, British Interplanetary Society, London.  
Associate member, American Astronautical Association, New York.

## 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
Nov 1949 - Oct 1951	7 - 11	CIO/TS/3 - Desk intelligence officer
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
One to three	Soviet desk officer	
6. DESCRIPTION OF DUTIES Prepared, conjointly with CIO/TS/3, operational plans against Soviet Far Eastern targets.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Oct 1951 - Dec 1953	12- 13	DIF/SR/5; deputy chief, then chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
up to 23	Branch deputy chief, then Branch chief	
6. DESCRIPTION OF DUTIES Supervised and directed SR plans and projects targeted against Soviet Far East.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Jan 1954 - Dec 1954	13	DIF/SR/COPS/DM - Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
18	Chief of special defector reception project	
6. DESCRIPTION OF DUTIES Direct and supervise the reception, debriefing, intelligence exploitation, resettlement and localization of two high level Soviet intelligence officers granted political asylum in the USA.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Feb 1955 - Mar 1956	14	DIF/SR - MA/St Base, Tokyo - Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
22	Chief of Base	
6. DESCRIPTION OF DUTIES Direct and supervise field plans and projects based in Japan and Okinawa, targeted against Soviet Far Eastern targets.		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Mar 1956 - Jun 1957	14	DIF/SR - Tokyo Station Soviet Branch Deputy Chief
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
28	Deputy chief of branch	
6. DESCRIPTION OF DUTIES Assist Branch Chief in development and management of all Japan and Okinawa-based operations against USSR and Soviet Embassy, Tokyo.		

(Use additional pages if required.)

SECRET

## SEC. 9. MOTHER-IN-LAW

FULL NAME NCT APPICABLE

LIVING OR DECEASED \_\_\_\_\_ DATE OF DECEASE \_\_\_\_\_ CAUSE \_\_\_\_\_

PRESENT, OR LAST, ADDRESS \_\_\_\_\_ St. & No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

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

CITIZENSHIP \_\_\_\_\_ WHEN ACQUIRED? \_\_\_\_\_ WHERE? \_\_\_\_\_ CTRY \_\_\_\_\_ STATE \_\_\_\_\_ COUNTRY \_\_\_\_\_

OCCUPATION \_\_\_\_\_ LAST EMPLOYER \_\_\_\_\_

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

1. NAME HENRY BITT RELATIONSHIP GREAT-UNCLE AGE 65(?)  
 CITIZENSHIP FRENCH ADDRESS 27 RUE EDITH CAVELL, NICE, FRANCE  
 2. NAME MARIE GRANDGERARD RELATIONSHIP SECOND COUSIN AGE 55(?)  
 CITIZENSHIP USA ADDRESS 9 OTIS ELEVATORS, BUENOS AIRES ARGENTINA

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_ St. & No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

## SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U.S. OR OF A FOREIGN GOVERNMENT.

1. NAME MR. ROBT LEE CLARK RELATIONSHIP COUSIN AGE 30  
 CITIZENSHIP USA ADDRESS N.O.R. NORFOLK, VIRGINIA

TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_ St. & No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_ St. & No. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

**APPLICATION FOR FEDERAL EMPLOYMENT**

**STANDARD FORM 57-1905, PRET**  
U. S. CIVIL SERVICE COMMISSION

**INSTRUCTIONS:** In order to process your application, we must have the following information from you. In consideration of your application, we will keep your name and address on file for three years and, if necessary, we shall make it available to other Federal Government agencies. Your name and address will be used for the examination and placement of all applicants applying for a Management Examination, taking the examination, or applying for a Merit System Examination, taking the examination.

**1. NAME OR DESCRIPTION OF OFFICE OR POSITION APPLIED FOR**

**CIG**

**2. CITIZENSHIP: Of mentioned in examination announcement**

**3. PLACE OF EMPLOYMENT APPLIED FOR: (City and State)** **4. DATE OF THIS APPLICATION**

**5. ADDRESS**  
NAME: **JACQUELINE G. JONES** RICHARDSON  
ADDRESS AND NUMBER ON R. S. NUMBER  
**1620 Hickory Street, Mrs. Est.**  
IN CITY OF BOSTON (including postal zone and state)  
**Boston 21, Massachusetts**

**6. STATE OF BIRTH: (Month, day, year)** **7. GRADE OR PAY RATE** **8. LENGTH OF SERVICE**

**Maryland** **January 20, 1926** **10. GRADE OR PAY RATE** **11. LENGTH OF SERVICE**

**12. GRADE OR PAY RATE** **13. LENGTH OF SERVICE**

**14. GRADE OR PAY RATE** **15. LENGTH OF SERVICE**

**16. GRADE OR PAY RATE** **17. LENGTH OF SERVICE**

**18. DO YOU HAVE EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT?  YES  NO**  
IF YES, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE  
**Second Lt., 16 July 1965**

**19. WHAT IS THE LOWEST PAY RATE YOU WERE ACCEPTED AT?  \$2500**  
You will not be considered for any position with a lower entrance salary.  
**20. CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED FOR:**  
 1 TO 3 MONTHS  3 TO 6 MONTHS  6 TO 12 MONTHS

**NOTE:** Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a permanent appointment.

**21. IF YOU ARE WILLING TO TRAVEL, SPECIFY:**  
 OCCASIONALLY  FREQUENTLY  CONSIDERABLY

**22. EXPERIENCE: It is important for us to furnish all information requested below in order to enable the Civil Service Commission to determine your qualifications. Use a separate block for each position. State work prior to present position and work there, explaining clearly the principal tasks which you performed in each position, amounting to all periods of unemployment. Experiences gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed radically while working for the same employer, use a separate block to describe each position. You may include one position**

**23. INSTRUCTIONS ON THE REVERSE SIDE REGARDING DISPOSITION OF THIS APPLICATION.**  
If you are applying for an **OPEN POSITION**, mark this application as to the office desired on the reverse page. Be sure to read all the instructions on the reverse side regarding the disposition of this application. Notify the office with whom you file this application of no change in your address.

**DO NOT WRITE IN THIS BLOCK**  
For Use of Civil Service Consultants Only

<input type="checkbox"/> APPROVED	<input type="checkbox"/> RECOMMENDED	<input type="checkbox"/> APPROVED
<input type="checkbox"/> RECOMMENDED	<input type="checkbox"/> RECOMMENDED	<input type="checkbox"/> APPROVED

**INITIALS AND DATE**

**APPROVAL**

OFFICE	GRADE	LENTH OF SERVICE	PROMOTI- ON RATING	PROMOTI- ON RATING
			<input type="checkbox"/> 5 POINTS CREDIT	
			<input type="checkbox"/> 10 POINTS WORTH OR WORTH	
			<input type="checkbox"/> 15 POINTS DRAFT	
			<input type="checkbox"/> 20 POINTS DRAFT	

**INITIALS AND DATE**

**PRESENT POSITION**

<b>DATES OF EMPLOYMENT (month, year)</b>	<b>NAME AND TITLE OF YOUR PRESENT POSITION</b>	<b>CLASSIFICATION GRADE (if in Federal Service)</b>	<b>SALARY OR EARNINGS: STARTING \$ <input type="checkbox"/> PRESENT \$ <input type="checkbox"/> PER <input type="checkbox"/></b>
1964 TO PRESENT TIME			
<b>PLACE OF EMPLOYMENT (City and State)</b>		<b>NAME AND TITLE OF IMMEDIATE SUPERVISOR</b>	
NAME AND TITLE OF EMPLOYER (Name, organization, or person, of Federal, State, department, Bureau or establishment, and division)		NAME OF ESTABLISHMENT (e.g., wholesale sale, insurance agency, manufacturer of auto, etc.)	
<b>NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU</b>		<b>REASON FOR DETERMINING TO CHANGE EMPLOYMENT</b>	
<b>DESCRIPTION OF YOUR WORK</b>			
<b>EAR DEPARTMENT</b>			