

29070

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 28 DECEMBER 1977	FILE NO. 3190
TO: (check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP	SS NUMBER 069-26-3138	RETURN TO CIA Background Use Only Do Not Reproduce
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER 007667	
	<input checked="" type="checkbox"/> CHIEF, ATTN: LA (OPERATING COMPONENT FOR ACTION)	ID CARD NUMBER	
REF.	RETIREMENT	OFFICIAL COVER	ESTABLISHED <input type="checkbox"/> CANCELLED <input checked="" type="checkbox"/> CONTINUED
STATUS	<input checked="" type="checkbox"/> STAFF		
SUBJECT BUSTOS-VIDELA, CHARLOTTE Z.		UNIT DEPARTMENT OF STATE	

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)	CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)
<input checked="" type="checkbox"/> BASIC COVER PROVIDED BOD EFFECTIVE DATE _____	EFFECTIVE DATE: _____
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify) _____	FORM 3254 _____ W-2 TO BE ISSUED (RRB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (RRB 20-7)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY _____ (RRB 20-7)
<input checked="" type="checkbox"/> FORM 3254 1-5-77 W-2 TO BE ISSUED. (RRB 20-11) 94	EAA: CATEGORY I _____ CATEGORY II _____
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (RR 240-2*)	RETURN ALL OFFICIAL DOCUMENTATION TO CCS
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (RR 240-2*)	SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.
<input type="checkbox"/> EAA: CATEGORY I _____ CATEGORY II _____	DO NOT WRITE IN THIS BLOCK -
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR <u>ACT</u> HOSPITALIZATION CARD	

REMARKS AND/OR COVER HISTORY

SUBJECT WILL BE DENIED FOR ENTIRE PERIOD OF EMPLOYMENT EXCEPT FOR US GOVERNMENT APPLICATIONS.

DISTRIBUTION:
COPY 1 - CD/TRB OR CPD CONTROL
COPY 2 - OPERATING COMPONENT
COPY 3 - OS/SRD
COPY 4 - OC/DO/TFB
COPY 5 - CCS-FILE
VS/TN
rp

Chas M. Selsky
CHIEF, OFFICIAL COVER BRANCH, CENTRAL COVER STAFF