

diff-jfk: record 104-10291-10022 - Page 1 - (diff between 2025 and 2023)

Highlighted changes between 2025/104-10291-10022.pdf and 2023/104-10291-10022.pdf - fresh pages only

~~SECRET~~CIA/DOO-HOUSE COMMITTEE ON ASSASSINATIONS RECORDS

(File Title)

CIA PERSONNEL FILES

(Record Name)

REEL NO. 58**ENDS WITH** KENT,
WILLIAM M.**FILE
CUSTODIAN** JG**DATE
FILMED** 26 AUG. 1980~~SECRET~~

~~SECRET~~
~~CONFIDENTIAL~~
~~SECURITY INFORMATION~~
~~SECURITY APPROVAL~~

QDT 59
Date: 6 Dec. 1951

To: Chief, Covert Personnel Division

Your Reference: L-2960

FROM: Chief, Security Division

Case Number: 57514

SUBJECT: KENT, William Morris

1. This is to advise you of security action in the subject case as indicated below:

- Security approval is granted the subject person for access to classified information.
- Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
- The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.

2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.

3. Subject is to be polygraphed as part of the EOD procedures.

Dinkins
C. V. BROOKLEY

849.13 9:00
3 Jan 52

Qm

~~SECRET~~

SECRET

SECURITY INFORMATION

28 MAY 1952
[Signature]

TO : Chief, Personnel Division (Covert)
ATTENTION: Transactions and Records Branch
FROM : Chief, Special Security Division
SUBJECT : ██████████ (Pseudo)
#57514 OLIVER H. CORBUSTON

1. Reference is made to your memorandum, dated 14 May 1952, in which a covert security clearance was requested to enable the WH Division to utilize the Subject's services as an Intelligence Officer (Staff Agent), in Fort Amador, Canal Zone. Reference memorandum indicated that Subject will be used on Project HYPOTHESIS, under military cover.

2. In accordance with the provisions set forth in the Director's Memorandum of 14 February 1949, entitled "Security and Operational Clearances", a covert security clearance is granted for the covert use of the Subject as described in your request as set forth in Paragraph 1, above.

3. The Subject is not to represent himself as, nor is he to be represented as, an employee of CIA.

4. Your attention is called to the fact that a covert security clearance does not constitute complete compliance with the provisions of CIA Regulation 10-9. Therefore, if you should desire at a later date to change the status or use of this individual, a request for clearance to cover any proposed change should be submitted to this office.

5. This clearance becomes invalid in the event the Subject's services are not utilized within 60 days of the date of this memorandum.

FOR THE SECURITY OFFICER, CIA

Robert H. Cunningham Jr.
ROBERT H. CUNNINGHAM

SECRET

CONFIDENTIAL
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 30 June 1966

YOUR REFERENCE: 42055

CASE NO. : 57514

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : [REDACTED]
Kent, William Jr.

1. This is to advise that a security clearance is granted for the employment of the Subject as [REDACTED] GS-13, as Ops Officer by DDP/WH/JNPOPLAR at New Orleans, La. [REDACTED] Operations Officer

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

A personal interview in the Office of Security must be arranged by your office.

A personal interview is not necessary.

Steven L. Kuhn
Steven L. Kuhn

CHIEF, PERSONNEL SECURITY DIVISION, DDP

SECTION D**CLASSIFICATION****NARRATIVE COMMENTS**

Indicate significant changes or weaknesses demonstrated in current position keeping its 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 comments in Section C to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost effectiveness of the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

In February 1976, following the emergency hospitalization and retirement of my ~~deputy~~, Subject became my new deputy, a position he has filled since that time in addition to performing most of the assignments he had been tasked with earlier. His undiminished energy and enthusiasm for his work is a hallmark of his performance since that time. Subject has, on his own initiative, developed our referrals system (finding new NOC applicants and those on board for filling specific area priority needs) to a point where it is serving the entire Directorate with distinction and precision, especially in the "crisis" areas of NOC needs, such as Africa and Near East Divisions. Thanks to his creation of an orchestrated system of finding and "shopping" new-hire applicants with rare skills, we have also begun to serve the newly-created Clandestine Corps program with dozens of such applicants, in addition to serving normal area division NOC needs.

As a Branch supervisor, Subject deals with the entire spectrum of Branch activity in my absence with sureness and confidence. His broad operational background abroad, his near-native ability in two /continued/

SECTION E**CERTIFICATION AND COMMENTS****1. BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
14		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
24 January 1977	Chief, NOC Branch	 Harris Greene

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input checked="" type="checkbox"/> HAVE NOT ATTACHED		 William M. Kent

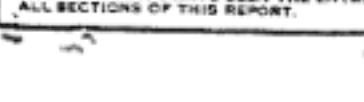
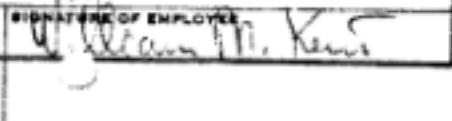
3. BY REVIEWING OFFICIAL**COMMENTS OF REVIEWING OFFICIAL**

I became C/CMS on 1 October 1976 and thus my comments must be restricted to the October-December 1976 time frame. I have no basic disagreement with the narrative comments but do challenge the letter evaluations. While Mr. Kent's performance has been strong and he has amply demonstrated he is a GS-15 level officer capable of assuming greater responsibilities, I cannot concur that his performance "is so exceptional to requirements of the work and in comparison of others doing similar work as to warrant special recognition". On purely technical grounds there is no other officer serving as DC/CMS/NOC and thus the comparison is invalid. Secondly, as Chief, Career Management Staff and administrator of the

(contd)

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
26 January 1977	Chief, CMS	 Robert D. Brown, Jr.

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRYS IN ALL SECTIONS OF THIS REPORT.	DATE	SIGNATURE OF EMPLOYEE
		 William M. Kent
CLASSIFICATION		

~~SECRET~~

18 May 1977

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Mr. William M. Kent, Period: 1 January - 20 May 1977

1. As I depart from the assignment as Chief, Non-official Cover Branch, Career Management Staff, I should like to make a final comment on the performance of Mr. Kent who has served with me during the entire period of my assignment and who, since March 1976, has been my deputy. More specifically, the period since 1 January 1977 has been a trying one for this component and has culminated with its sudden transfer from one component (CMS) to another (ADDO/D).

2. During this most recent period, Mr. Kent has demonstrated his capacity for growth and leadership. He has himself handled virtually all of the transition aspects for the Branch, involving briefings and counsel for his new overall chief (the ADDO/D) and for his new branch chief. He has served in the past 30 days substantially as acting branch chief, given my fairly lengthy TDY absence abroad during that period. I can only reiterate my judgment in the last fitness report that Kent is a senior and mature supervisory officer, very well organized in his work habits and capable of making measured judgments and decisions. His continuity in all aspects of nonofficial cover and its ramifications makes him a valued and valuable staff officer. I would say his future contribution lies in the entire area of managing and guiding Directorate personnel. I have noted the clear progress he has made in the past year in taking supervisory decisions involving personnel, firmly and crisply.

3. Given his impressive field and Headquarters experience, Kent should be given an opportunity to display his worth in future Directorate assignments involving discretion, professionalism and maturity. I give him an unquestioned "Strong" for this final period he has served with me.

Harris Greene
Harris Greene

Chief
Nonofficial Cover Branch

~~SECRET~~

Managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable.
extra space is needed to complete Section D, attach a separate sheet of paper.

1. Having been appointed to my present position on 23 May 1977, this report covers seven months. In this time I have learned to appreciate Mr. Kent's excellent performance in supporting and guiding the mission of this branch. Considering the outstanding evaluation he received from my predecessor, it must have been a great disappointment to Mr. Kent that he was not advanced to become branch chief. I make this observation because Mr. Kent has never demonstrated his obvious disappointment to me. On the contrary, from the first moment he has shown extraordinary and enthusiastic willingness in providing the needed continuity to run this branch which controls the career progression of the NOC officer complement consisting of between 275 and 300 officers at any given time. No doubt the reader is aware of the intricate, complicated and at times confusing bureaucratic machinery which governs the NOC officer program. Mr. Kent has done a superb job in helping me understand and cope with this maze.

2. With the creation of the Office of External Development and concomitant issuance of new, precise and explicit regulations we now hope to streamline and simplify this bureaucratic machinery. Mr. Kent's knowledge of past practices coupled with his eagerness and at times

SECTION E CERTIFICATION AND COMMENTS		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 7	1. BY SUPERVISOR	
	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION O S A P	
DATE 28 December 1977	OFFICIAL TITLE OF SUPERVISOR Chief, OED/NOC Staff	TYPED OR PRINTED NAME AND SIGNATURE Gerard J. Hahn <i>Hahn</i>
2. BY EMPLOYEE		
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE <input checked="" type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	DATE 28 Dec. 1977	SIGNATURE OF EMPLOYEE <i>William M. Kent</i>
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL I have not had the opportunity to observe Mr. Kent's performance as closely as the rating officer. However, the rater's comments strike me as being eminently fair and accurate. Mr. Kent has certainly performed well and his thorough and accurate presentations have indeed been impressive. Despite my somewhat limited association with Mr. Kent, but having full confidence in the rating officer's judgment, I have no hesitation in concurring in the overall rating of Strong.		
DATE 29 December 1977	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, OED	TYPED OR PRINTED NAME AND SIGNATURE Walter L. O'Brien <i>O'Brien</i>
4. BY EMPLOYEE		
I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT.	DATE 3 January 1978	SIGNATURE OF EMPLOYEE <i>William M. Kent</i>
CLASSIFICATION CONFIDENTIAL		

SECRET
(When Filled In)

SECTION XI CONTINUED FROM PAGE 4

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS 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.)
- General Interest Subjects and Short Stories (but not significant) published.**
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED
- NA

9. LIST ANY PUBLIC RELATIONS EXPERIENCE

During employment in El Salvador

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

Received highest honors and 4 awards at Graduation from Latin American Institute: General Excellence, Diplomatic Subjects, Service to the School, and one other.

SECTION XII 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
May 1956 to present	GS-11	WH/III/Cuba
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NA	PP Ops Officer	
6. DESCRIPTION OF DUTIES		

General support of Station KUCAGE activities. Initiating new KUCAGE programs for Station implementation. Liaison with other Headquarters components. Maintenance of correspondence with Station. Attendance at various OTR courses (Intelligence Orientation, World Communism, Anti-Communist Ops, completed to date).

1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
September 55 to May 56	GS-9	WH/ Station Panama City
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NA	Station PP Officer	
6. DESCRIPTION OF DUTIES		

Assumed and reorganized Station PP program. Broadened existing assets and acquired new assets. Wrote Spanish language materials, drew cartoons, supervised publication of KUCAGE publication. Organized anti-Communist demonstrations. Acted as co-case Officer of PI penetration agent.

1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
July 1954-September 1955	GS-7	WH/Station Panama City
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NA	PI Ops Officer	
6. DESCRIPTION OF DUTIES		

In charge Water Travel Control program. Worked as member Air Travel Control team performing baggage searches, photographing documents, maintaining passenger and air travel records (all covertly). Regular and audio surveillances. CE work. Temporary cut-out, later co-case officer PI penetration agent.

1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
June 1952-July 1954	GS-7	WH/Station Panama City
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NA	PI Ops Officer	
6. DESCRIPTION OF DUTIES		

Same as 3, above, less CE Work and penetration agent handling.

1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Dec. 1951-June 1952	GS-5	WH
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
NA	PI Ops Officer	
6. DESCRIPTION OF DUTIES		

Training. Also orientation at various desks.

(Use additional pages if required)

SECRET

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CONTRACT INFORMATION AND CHECK LIST (CONTINUED)				CASE OFFICER Maurice Currie	DIVISION WHD																																																		
NOTE: SEE INSTRUCTIONS ON FIRST SHEET.				TELEPHONE EXTENSION 6032	DATE 15 June 1966																																																		
SECTION VIII OTHER BENEFITS																																																							
48. BENEFITS (See RR 20-44, RR 20-42, RR 20-7, RR 20-33, and RR 20-60-1, RR 20-2000-1 and/or successor regulations for benefits applicable to various categories of contract personnel.)																																																							
Normal																																																							
SECTION IX COVER ACTIVITY																																																							
47. STATUS (Check) <input checked="" type="checkbox"/> ESTABLISHED		48. TYPE (Check) <input checked="" type="checkbox"/> PROPRIETARY <input type="checkbox"/> SUBSIDIZED	CULTURAL EDUCATIONAL		COMMERCIAL MILITARY OTHER																																																		
49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS + NA <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL																																																							
SECTION X OFFSET OF INCOME																																																							
50. OFFSET OF INCOME AND OTHER ENCLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.) <input type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input checked="" type="checkbox"/> NONE																																																							
SECTION XI TERM																																																							
51. DURATION DATE MONTH YEAR		52. EFFECTIVE DATE 30 July 1966	53. RENEWABLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																																																				
54. TERMINATION NOTICE (Number of days) NA		55. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION NA <input type="checkbox"/> YES <input type="checkbox"/> NO																																																					
SECTION XII FUNCTION																																																							
56. PRIMARY FUNCTION (CI, MI, PP, other) PP																																																							
SECTION XIII DUTIES																																																							
57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED Service requirements of field stations and WH Division under cover of the Christian Fellowship Fund as described in Project JMOPLAR-12.																																																							
SECTION XIV QUALIFICATIONS																																																							
58. EXPERIENCE Travel and residence in Europe and Latin America. Operational assignments in Latin America and USA under WH Division.																																																							
<table border="1"> <tr> <td rowspan="3" style="text-align: center;">59. EDUCATION <input checked="" type="checkbox"/> Check Highest Level Attained</td> <td colspan="2">HIGH SCHOOL</td> <td colspan="2">HIGH SCHOOL GRADUATE</td> <td colspan="2">TRADE SCHOOL GRADUATE</td> </tr> <tr> <td colspan="2">BUSINESS SCHOOL GRADUATE</td> <td colspan="4">COMMERCIAL SCHOOL GRADUATE</td> </tr> <tr> <td colspan="2">COLLEGE (No degree) <input checked="" type="checkbox"/> COLLEGE DEGREE</td> <td colspan="2">POST GRADUATE</td> <td colspan="2">MA. P.</td> </tr> <tr> <td colspan="6"> <table border="1"> <tr> <td rowspan="3" style="text-align: center;">60. LANGUAGE COMPETENCY <input checked="" type="checkbox"/> Check appropriate Degree Competency</td> <td>LANGUAGE</td> <td>SPEAK</td> <td>WRITE</td> <td>READ</td> <td rowspan="3" style="text-align: center;">61. INDIVIDUAL'S COUNTRY OF ORIGIN Italy</td> </tr> <tr> <td>SPANISH</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>ITALIAN</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>FRENCH</td> <td></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table> </td> </tr> <tr> <td colspan="6"></td> </tr> </table>						59. EDUCATION <input checked="" type="checkbox"/> Check Highest Level Attained	HIGH SCHOOL		HIGH SCHOOL GRADUATE		TRADE SCHOOL GRADUATE		BUSINESS SCHOOL GRADUATE		COMMERCIAL SCHOOL GRADUATE				COLLEGE (No degree) <input checked="" type="checkbox"/> COLLEGE DEGREE		POST GRADUATE		MA. P.		<table border="1"> <tr> <td rowspan="3" style="text-align: center;">60. LANGUAGE COMPETENCY <input checked="" type="checkbox"/> Check appropriate Degree Competency</td> <td>LANGUAGE</td> <td>SPEAK</td> <td>WRITE</td> <td>READ</td> <td rowspan="3" style="text-align: center;">61. INDIVIDUAL'S COUNTRY OF ORIGIN Italy</td> </tr> <tr> <td>SPANISH</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>ITALIAN</td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>FRENCH</td> <td></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> </table>						60. LANGUAGE COMPETENCY <input checked="" type="checkbox"/> Check appropriate Degree Competency	LANGUAGE	SPEAK	WRITE	READ	61. INDIVIDUAL'S COUNTRY OF ORIGIN Italy	SPANISH	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	ITALIAN	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	FRENCH		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>						
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FRENCH		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>																																																			
62. AREA KNOWLEDGE Europe, Far East, Latin America																																																							
SECTION XV EMPLOYMENT PRIOR TO CIA																																																							
63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING																																																							
1950-1951 Store Manager, El Salvador, C.A., Salary \$2,400, left for better position.																																																							
SECTION XVI ADDITIONAL INFORMATION																																																							
64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary) ██ will be engaged in this Project for at least five years.																																																							

SECRET

CONTRACT INFORMATION AND CHECK LIST				CASE OFFICER Maurice Currie	DIVISION WHD							
INSTRUCTIONS: See HR 30-53 and HR 30-1000-1 for guidance. Complete all items excepting "NA" when items are not applicable. Forward original and TWO copies for preparation of contract.				TELEPHONE EXTENSION 6032	DATE 15 June 1966							
SECTION I				GENERAL								
1. NAME <i>William J. Kent</i>	2A. PROJECT JMPOLAR-12	3. ALLOTMENT NO. 7185-0630	4. SLOT NO.									
2B. PERMANENT STATION New Orleans, La.	3A. FUNDS											
5. PREVIOUS CIA PSEUDONYM OR ALIASES Charles K. Morledge (P) Douglas G. Gupton (alias at JMWAVE)	6. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) Staff Employee 1951-1952 Staff Employee 1952-1956 Staff Employee 1956-to Present											
7. SECURITY CLEARANCE (Type and date)	7A. MEDICAL CLEARANCE <input checked="" type="checkbox"/> RETAINED <input type="checkbox"/> INITIATED <input type="checkbox"/> NOT BRO'D.	8. CONTRACT IS TO BE WRITTEN IN STERILE FORM U.S. GOVERNMENT <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO										
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) Staff Employee										
SECTION II PERSONAL DATA												
11. CITIZENSHIP USA	12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	13. AGE 37	14. DATE OF BIRTH (Month, day, year) 9 May 1929									
15. LEGAL RESIDENCE (City and state or country) Herndon, Virginia		16. CURRENT RESIDENCE (City and state or country) Same										
17. MARITAL STATUS (Check as appropriate) <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED						<input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED						
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE: Wife - 35 Son - 12 Son - 11 Daughter - 10			19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP:									
SECTION III U.S. MILITARY STATUS												
20. RESERVE	21. VETERAN XXX	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)										
23. BRANCH OF SERVICE	24. RANK OR GRADE	25. DRAFT ELIGIBLE	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO									
SECTION IV COMPENSATION												
27. BASIC SALARY GS-13, Step 5	28. POST DIFFERENTIAL	Former Dept. of Army, Dept. of State, Dept. of Army Executive Secretary of Christian Fellowship Fund				30. FEDERAL TAX WITHHOLDING <table border="1"><tr><td>COVER</td><td>CIA</td></tr><tr><td><input checked="" type="checkbox"/> YES</td><td><input type="checkbox"/> YES</td></tr><tr><td><input type="checkbox"/> NO</td><td><input checked="" type="checkbox"/> NO</td></tr></table>	COVER	CIA	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> NO
COVER	CIA											
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> YES											
<input type="checkbox"/> NO	<input checked="" type="checkbox"/> NO											
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)												
31. QUARTERS NA	32. POST NA	33. OTHER *Non-official cover premium pay										
34. COVER (Breakdown, if any) None												
SECTION VI TRAVEL												
35. TYPES XXX PCS	36. DOMESTIC OPERATIONAL		37. FOREIGN OPERATIONAL		38. WITH DEPENDENTS XXX YES							
39. HME TO BE SHIPPED XXX YES	40. HME TO BE STORED NO	41. PERSONAL VEHICLE TO BE SHIPPED YES	42. PERSONAL VEHICLE TO BE SHIPPED NO	43. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL XXX YES								
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH												
Wife	USA	35	12 November 1930									
Son	USA	12	6 September 1963									
Son	USA	11	6 September 1952									
Daughter	USA	10	12 December 1953									
						Approved by CS/CS Agent Panel (Date) 7 July 1966						
						<i>John Collins</i> Secretary, CS/CS Agent Panel						
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH XXX CIA REGULATIONS						COVER POLICIES AND PROCEDURES						

SECRET

(When Filled In)

SECTION IX					MARITAL STATUS
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY					
2. NAME OF SPOUSE		Spouse	Spouse	Spouse	Married
3. DATE OF BIRTH		4. PLACE OF BIRTH (City, State, Country)			
12 NOV. 1930		COVINGTON, LA. - USA.			
5. OCCUPATION		6. PRESENT EMPLOYER			
HOUSEWIFE					
7. CITIZENSHIP		8. FORMER CITIZENSHIP(S), COUNTRY(IES)			9. DATE U. S. CITIZENSHIP ACQUIRED
US					
SECTION X DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE					
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS	
WILLIAM M., JR.	SON	6 SEPT. '53 - PANAMA US CANAL ZONE			
PAUL E.	SON	6 SEPT. '54 - PANAMA US CANAL ZONE			
KAREN A.	DAUGHTER	12 DEC. '55 - PANAMA US PANAMA CITY			
SECTION XI PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS					
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP	
HERNDON ROTARY CLUB	HERNDON, VA.			1961	
CATHOLIC ECONOMIC ASSOCIATION	WASHINGTON, D.C.			1966	
CATHOLIC ASN. FOR INT'L JUSTICE	WASHINGTON, D.C.			1966	
FOREIGN POLICY ASN. OF AM.	NEW ORLEANS, LA.			1966	
INTERNATIONAL HOUSE				1966	
DATE	SIGNATURE OF EMPLOYEE				
9 January 1965					
William M. Kent					
SECRET					

SECRET
(When filled in)

llc
OFFICIAL USE ONLY (and filled in)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

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

SECTION I		BIOGRAPHIC AND POSITION DATA		
1. EMP. SEE NO.	2. NAME (Last-First-Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE/GRADE/STEP
059198	Kent, W ^m	M	09/09/29	GS-13-05
6. ID	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country/City)	
D	IOBS OFFICER	DDO	WASH., D.C.	

SECTION II AGENCY OVERSEAS SERVICE			
AREA	TYPE TOUR	FROM	TO
MARACA BANANA CUBA - TOTAL 3 MONTHS GUATEMALA Total 6-7 weeks VENEZUELA WESTERN HEMISPHERE: PERU	PCB-XX TDY-XX TDY-64 TDY-64 PCB-46 TDY-51	52/06/01 56/07/01 57/06/01 58/01/01 58/08/01 64/04/09	56/05/01 56/07/14 57/06/01 58/01/01 58/03/23 64/04/18

OVERSEAS DATA

CITY: DATE: INITIALS:
18 MAR 1968 FG

SECTION III		EDUCATION	
DEGREE	MAJOR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			

<input type="checkbox"/> SECRET	<input type="checkbox"/> CONFIDENTIAL	<input type="checkbox"/> INTERNAL USE ONLY	<input type="checkbox"/> UNCLASSIFIED		
REQUEST FOR MEDICAL EVALUATION <small>(SCREENED AREAS WILL BE COMPLETED BY OMS)</small>		DATE	1. REQUEST DATE (DD-MM-YY)	2. APPLICANT - HAS APPLICANT PREVIOUSLY BEEN SEEN BY OMS	
		28 Oct. 76	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	3. DEPENDENT(S)	
3. NAME (Last, First, Middle)		4. SOCIAL SECURITY NO.	5. GRADE	6. DOB (DD-MM-YY)	
Kont, William M.		058-22-8472	7. GRADE	7. DOB (DD-MM-YY)	
8. GRADE		8. AFFILIATION CO	9. DIRECTORATE/OFFICE/DIVISION	10. EMP-EXT.	11. POSITION TITLE
GS-15		DDO/CMS/NDC	4103	Deputy Chief, NDC Branch	
COMPLETE 13-19 FOR EACH DEPENDENT TO ACCOMPANY OR RETURN WITH EMPLOYEE ONLY IF 2 IS CHECKED "DEPENDENT(S)"					
12. DEPENDENT NAME (L/F/M)		13. SOC SEC NO.	14. GRADE	15. DOB (MM/YY)	16. SEX
					17. RELATIONSHIP
18. REQUESTED ACTION (Mark those actions acceptable)					
APPLICANT	PRE-EMPLOYMENT		EDD		
ASSIGNMENTS	O/S POS		STATION		19. GRADE (MM-DD-YY)
	X O/S TDY		TYPE/LEVEL		NO. OF DEPENDENTS TO ACCOMPANY OR RETURN
	O/S RETURNEE		FITNESS FOR DUTY		OTHER (check)
	X O/S TDY STANDBY		RETURN TO DUTY		
O/S PLANNING		SPECIAL TRAINING			
SEPARATION	RETIREMENT		MOR/CDRS		MOR/CDRS
ROUTINE	REGULAR ANNUAL		EXECUTIVE ANNUAL		MEET/MEP
20. COMMENTS					
21. REQUESTING DIRECTORATE/OFFICE/DIR		22. ROOM/LOG	23. ATTENDANT	24. SIGNATURE OF REQUESTING OFFICER	
DDO/CMS/NDC		GG 2709	4103	William M. Keus	
FOR OMS USE ONLY				T.D.Y.	
APPROVE PROCESSING FOR EDD		COMMENTS		25. APPROVAL	
HOLD PENDING RECEIPT OF ADDITIONAL MEDICAL INFORMATION (Comments attached)				26. APPROVAL	
REQUEST PRE-EMP. MEDICAL EVALUATION				27. APPROVAL	
OTHER (any comments)				28. APPROVAL	
FOR OTHER ACTIONS				OMS SIGNATURE	
REQUESTED ACTION	QUAL	COND-QUAL	DEFER	DISQUAL	COMMENTS
TDY Stdby	XX				Expires 1 November 1978.
					7 January 1977
					William T. Golder, OMS/PEO
OMS RESPONSIBILITY CODE		EXAMINATION FACILITY		OMS SIGNATURE	
28		1A		S	

<input type="checkbox"/> SECRET	<input type="checkbox"/> CONFIDENTIAL	<input checked="" type="checkbox"/> INTERNAL USE ONLY	<input type="checkbox"/> UNCLASSIFIED
REQUEST FOR PCS OVERSEAS EVALUATION		1. REQUEST DATE (MM-DD-YY)	2. APPLICANT - HAS APPLICANT PREVIOUSLY BEEN SEEN BY DMS <input type="checkbox"/> YES <input type="checkbox"/> NO
		3 May 78	3. DEPENDENT(S) <input checked="" type="checkbox"/> EMPLOYEE
4. NAME (LAST, FIRST, MIDDLE)		4. SOCIAL SECURITY NO.	5. DOB (MM-DD-YY) 6. SEX
Kent William		053-22-8472	9 May 29 M
6. GRADE 7. AFFILIATION		8. DIRECTORATE/OFFICE/DIVISION	10. POSITION TITLE
GS-15 All		DDO/OED/NOC	Operations Officer
COMPLETE 13-19 FOR EACH DEPENDENT TO ACCOMPANY OR RETURN WITH EMPLOYEE ONLY IF 2 IS CHECKED "DEPENDENT(S)"			
13. DEPENDENT NAME (L/F/M)		14. SOC SEC NO.	15. DOB (MMY) 16. SEX 18. RELATIONSHIP
19. REQUESTED ACTION (mark other action if applicable)			
APPLICANT:	PRE-EMPLOYMENT	EOG	
ASSIGNMENTS	O/S/PDS	STATION	17. DEST (DA-MD-YR) 18. NO OF DEPENDENTS TO ACCOMPANY OR RETURN
	O/S/TDY	TYPE COVER	POSITION
	O/S/RETURNEE	FITNESS FOR DUTY	OTHER (specify)
	O/S/TDY STANDBY	RETURN TO DUTY	
SEPARATION	O/S/PLANNING	SPECIAL TRAINING	
ROUTINE	XX RETIREMENT	MONDAYROS	
ROUTINE	REGULAR ANNUAL	EXECUTIVE ANNUAL	
21. COMMENTS			
Mr. Kent is retiring effective 30 June 1978.			
22. REQUESTING DIRECTORATE/OFFICE/DIV	23. ROOM/BLDG	24. EXTENSION	25. SIGNATURE OF REQUESTING OFFICER
DDO-OED/Personnel	1-7-4155-H	7335	Robert F. O'Sullivan
26. OFFICE OF SECURITY DISPOSITION			
27. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION			
RETIREMENT	Retiree exam completed.		
16 June 1971 James J. Graham PEO/ONS			

SECRET

with your cover designation, will normally be at the direction of the Foreign Service. Such travel will be accomplished in conformance with applicable regulations of the Foreign Service except when you are directed for operational reasons to perform travel in accordance with CIA regulations.

4. You are entitled by this agreement to the payment of a post differential and allowances, based upon your CIA or Foreign Service salary rate, whichever is greater. Payment of your salary, post differential and allowances by the Foreign Service will be full compensation for your services when the total amount is equal to or greater than that payable by CIA. Otherwise, the balance will be paid directly to you by CIA in a manner designated by you in writing and acceptable to CIA. The schedule of allowances applicable to your grade (CIA and Foreign Service) and post of duty are subject to unilateral adjustment by the Government.

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

a. All annual and sick leave which will have accrued to your credit at the time of integration into the Foreign Service will be held by CIA pending your transfer from the Foreign Service to CIA. While assigned to the Foreign Service you will be permitted annual leave, sick leave, statutory leave, and leave without pay in accordance with the regulations of that organization. Upon completion of your integration in the Foreign Service your accrued leave will normally be transferred to your credit with CIA. If security conditions require that you be given a lump-sum payment for accrued annual leave, you will be required to pay the gross amount of any such lump-sum payment to the CIA at the time of your reinstatement including any withholding tax deducted by the Foreign Service.

b. Upon your integration in the Foreign Service, you will continue to be covered by the provisions of the Civil Service Retirement Act, as amended, and you will be subject to payroll deductions for retirement purposes (now six percent).

6. If the CIA considers it undesirable for you to continue the use of your Foreign Service cover, your services will be utilized whenever possible in some other appropriate capacity as designated by CIA, unless the circumstances are such as to warrant your termination for cause.

7. Consistent with your cover activity, you will continue to be responsible for compliance with CIA rules and regulations.

SECRET

C S

INTEGRAL AGREEMENT

Mr. William M. Kent
Washington, D. C.

Dear Mr. Kent

This is a memorandum of agreement between you and the United States Government in regard to your employment by CIA. It is hereby mutually agreed and understood that:

1. As an employee of CIA, at the present grade and salary of GS-11 \$7270 per annum, you will accept cover employment in the Foreign Service effective as of 23 July 58. You will, insofar as consistent with your basic responsibility to CIA, abide by all the rules, regulations, practices and policies of the Foreign Service in order to appear as a conventional member of that establishment. Your appointment to the Foreign Service is being effected at the class of FSR-7 and salary of \$6435 per annum.
2. It is understood and agreed that the minimum period of your overseas tour of duty is governed by and coincident with the prescribed tour of duty of your cover organization. Currently, your prescribed tour consists of a period of two (2) years from the date of your arrival at your overseas post of duty. Your assignment may be terminated earlier for the convenience of CIA, and the length of your tour of duty, as currently specified, may be unilaterally changed by CIA in order to conform with subsequent changes in the prescribed tour of the Foreign Service. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by the Agency to be beyond your control or if you are terminated for cause either by the Foreign Service or CIA before you have completed the minimum period of service prescribed above from the date of arrival at your overseas post of duty, you will not be entitled to return travel or transportation for yourself or your dependents to the United States at Government expense. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by the Agency to be beyond your control or if you are terminated for cause either by the Foreign Service or CIA before you have completed one (1) year of service from the date of your arrival at your overseas post of duty, you will be required to reimburse the Government for all its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.
3. Travel to your post of duty overseas and your return travel to the United States, as well as travel performed overseas which is consistent

SECRET

EXTERIOR OFFICIAL COMMUNICATIONS TO
THE SECRETARY OF STATE
WASHINGTON D. C.



DEPARTMENT OF STATE
WASHINGTON

February 19, 1959

Dear Sheet:

I would like to take this opportunity to thank you
for the outstanding help of the officers of your agency
in Caracas, Venezuela to our protection detail during
the recent inauguration of President Betancourt.

Specific mention should be made of Messrs. Jacob
Esterline, William Patterson, and William Kent, whose
untiring efforts were in no small way responsible for
the safety of the U.S. delegation.

As always, it has been a pleasure to work with you
and members of your agency, and we look forward to doing
so again in the future.

Sincerely yours,

E. Tolson Bailey
Director
Office of Security

Colonel Sheffield Edwards
Director of Security
Central Intelligence Agency
Washington, D.C.

CONFIDENTIAL

(When Filled In)

GPR

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave or government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. The original of this form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER
Kent	William	Morris	058 22 8472
RESIDENCE DATA			
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED New York, N.Y.	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)		
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE Herndon, Va.	HOME LEAVE RESIDENCE Same		
MARRITAL STATUS (Check one)			
SINGLE	<input checked="" type="checkbox"/> MARRIED	SEPARATED	DIVORCED
IF MARRIED, PLACE OF MARRIAGE New York, N.Y.		WIDOWED	
		ANNULLED	
		DATE OF MARRIAGE 17 May 1952	
IF DIVORCED, PLACE OF DIVORCE DECREE		DATE OF DECREE	
IF WIDOWED, PLACE SPOUSE DIED		DATE SPOUSE DIED	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)			
MEMBERS OF FAMILY			
NAME OF SPOUSE Dorothy B. Kent	ADDRESS (No., Street, City, Zone, State) 189 Van Buren St. Herndon, Va.	TELEPHONE NO. (703) 437-3018	
NAME OF CHILDREN William M., Jr.	ADDRESS same	SEX M	DATE OF BIRTH 6 Sept 1953
Paul E.	same	M	6 Sept 1954
Karen A.	same	F	12 Dec 1955
NAME OF FATHER (Or male guardian) Paul Kent	ADDRESS 2118 Washington Ave. N.Y. 58, N.Y.	TELEPHONE NO. WE 3-4425	
NAME OF MOTHER (Or female guardian) Beatrice Kent	ADDRESS same	TELEPHONE NO. same	
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY. Wife			
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Miss) (Last-First-Middle) Mr. Kent, Dorothy Bernadette	FATHER (NOT SITTING)	RELATIONSHIP Wife	
HOME ADDRESS (No., Street, City, Zone, State) 189 Van Buren St. Herndon, Va.	HOME TELEPHONE NUMBER (703) 437-3018		
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE Republic Bank & Trust Co., Herndon, Va.	BUSINESS TELEPHONE & EXTENSION (703) 437-3018		
IS THE INDIVIDUAL NAMED ABOVE SITTING OR YOUR AGENT? AFFILIATION? (If "No" give name and address of organization he belongs to work for.) Yes		YES	<input checked="" type="checkbox"/>
		NO	<input checked="" type="checkbox"/>
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.) Yes		YES	<input checked="" type="checkbox"/>
		NO	<input checked="" type="checkbox"/>
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.) The persons named in item 3 above may also be notified in case of emergency. If such notification is not desirable because of health or other reasons, please so state in item 6 on the reverse side of this form.			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

PAGE NO. 1
DATE, 1947
Replaces Form No. 53-2 which
may continue to be used.

CONFIDENTIAL
STATUS AND EFFICIENCY REPORT
(SEE INSTRUCTIONS ON REVERSE SIDE)

SECTION I THROUGH 3 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME (PRINTED)	LAST	FIRST	MIDDLE	CAP RATING	SALARY	DATE OF REPORT
				GS-7	\$4205	16 June 1952

2. DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST, BEING MORE CONCISELY BUT FULLY)
Agent at the Air Travel Control Field Office at Tocumen International Airport, maintaining all air travel control on both the atlantic and pacific sides of the isthmus, writing general operational reports and the monthly satellite travel reports, performing surveillances and acting as cut out for MEXICO.

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.

4. PROFICIENCY IN FOREIGN LANGS.	READING	SPEAKING	UNDERSTANDING	5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-50 STATE)
	ENGLISH SPANISH ITALIAN FRENCH GERMAN	ENGLISH SPANISH ITALIAN FRENCH GERMAN	ENGLISH SPANISH ITALIAN FRENCH GERMAN	TYPE OF DUTY Operations Officer LOCATION Panama Mexico USA Colombia (LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?
MARRITAL STATUS YES NO NUMBER OF DEPENDENTS YES NO EMERGENCY ADDRESSEE YES NO LEGAL ADDRESS YES NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

8 June 1952

Keat, William Morris

6. SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR	
7. PERIOD COVERED BY THIS REPORT DATE FROM DATE TO 1 June 52 31 May 52	OCCASION FOR REPORT ANNUAL <input type="checkbox"/> REASSIGNMENT OF <input type="checkbox"/> PROPOSED REASSIGNMENT <input type="checkbox"/> COVERING INITIAL 80 REPORTING OFFICER <input type="checkbox"/> OF EMPLOYEE REPORTED ON <input type="checkbox"/> DAYS OF EMPLOYMENT
8. IS THIS EMPLOYEE QUALIFIED TO <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO PERFORM ALL PRESENT DUTIES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS EMPLOYEE BETTER QUALIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO FOR OTHER DUTIES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF SO, WHAT DUTY OR DUTIES <input type="checkbox"/> Intelligence Officer C Operation after Headquarters training.	

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? YES NO IF NO, EXPLAIN IN SECTION 11.
HAS EMPLOYEE STRIVED FOR YES NO TO BECOME EMPLOYEE YES NO TO THAT GRADE AND FOR THAT POSITION PROFESSIONAL IMPROVEMENT? YES NO FOR PROMOTION? YES NO

9. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARED WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK 'NOT OBSERVED' ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSER- VED <input type="checkbox"/>	ABOUT- AVERAGE <input type="checkbox"/>	FAIR <input type="checkbox"/>	BEST <input type="checkbox"/>	VERY BEST <input type="checkbox"/>	EXCEL- LENT <input type="checkbox"/>	OUT- STAN- DING <input type="checkbox"/>
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE						X	
B. INTEREST AND ENTHUSIASM IN WORK						X	
C. SECURITY CONSCIOUSNESS						X	
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS						X	
E. ATTENTION TO DUTY						X	
F. JUDGMENT AND COMMON SENSE						X	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						X	
H. DISCRETION						X	
I. INITIATIVE						X	
J. ABILITY TO HANDLE AND DIRECT PEOPLE.						X	
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)						X	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION						X	
M. TACT						X	
N. SACACITY (NON-GULLIBILITY)						X	
O. LEADERSHIP						X	
P. PHYSICAL STAMINA						X	
Q. MENTAL STAMINA						X	

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU -
DEFINITELY NOT PREFER NOT BE SATISFIED BE PLEASED PARTICULARLY
NOT WANT HIM? TO HAVE HIM? TO HAVE HIM? TO HAVE HIM? DESIRE HIM?

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

Conclusion *[Redacted]* reliable, willing and dependable and has done an excellent job at the airport.

Comments:

Report prepared by Deinger because [Redacted] is immediate supervisor
is on his leave.

SECRET
(WHEN FILLED IN)

P&D

QUALIFICATIONS SYSTEM RECORD CHANGE Kent, William Jn

APPLICANT CODING DATA

1. ID	2. APPL. NO.	3. NAME											
< 2 *		0-DIGITS	MUST CONTAIN 20-DIGITS										
4. DATE OF BIRTH		5. DATE CODED		THE DATA ABOVE (ITEMS 2 THRU 5) WILL BE FILLED IN WHEN CODING AN APPLICANT FOR THE FIRST TIME. THIS FORM IS THEN ATTACHED TO FORM 1962, MASTER QUALIFICATIONS CODING RECORD.									
MO	DA	YR	MO	DA	YR								

LANGUAGE CODING DATA - FORM 444c

1. ID	2. EMPLOYEE NO.	3. NAME	4. LANGUAGE DATA CODE										
< 3 *		3-LETTERS	BASE CODE	R	W	P	S	U	T	YR			
5. DATE SUBMITTED		6. DATE OF BIRTH	WHEN FORM 444c DENOTES NO LANGUAGE COMPETENCE, ENTER THE FOLLOWING IN ITEM 4: "NO+LANGUAGE" (12-DIGITS)										
MO	DA	YR	MO	DA	YR								

LANGUAGE PROFICIENCY TEST DATA

1. ID	2. EMPLOYEE NO.	3. NAME	4. CODE	5. LANGUAGE DATA BEFORE TEST							
< 5 059198		3-LETTERS COR	C-A-D	BASE CODE	R	W	P	S	U	T	YR
6. LANGUAGE DATA AFTER TEST		7. DATE OF TEST		DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1273, LANGUAGE PROFICIENCY AND AWARDS DATA.							
BASE CODE	R	W	P	S	U	T	YR	MO	DA	YR	7 APR 1987 /2
• BK5070704670202167											

30 MAR 1987

The authorization to process this employee's disclaim of proficiency in the language factors indicated on this form is contained in a memorandum on file and designated "Language Proficiency Disclaim File", located in the Qualifications Analysis Branch, Office of Personnel.

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1

FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach.

2

FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (Last)	(First)	(Middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
KENT		William M.	5-9-29	058 22 8472
EMPLOYING DEPARTMENT OR AGENCY		LOCATION (City, State, ZIP Code)		

HAVE YOU EVER BEFORE FILED AN "ELECTION, DECLINATION, OR WAIVER OF LIFE INSURANCE COVERAGE"? YES NO
If "YES," your last such form remains in effect and you should not file this new form unless you want to change the old one. (See Instructions for Employees on page 4.)

3

MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here —————
if you
WANT BOTH
optional and
regular
insurance



ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here —————
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance



DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here —————
if you
WANT NEITHER
regular nor
optional
insurance



WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4

**DATE AND SIGN. RETURN THE ENTIRE FORM TO
YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

William M. Kent

DATE

March 30, 1970

FOR EMPLOYING OFFICE USE ONLY

(Official receiving date stamp)

1970

03 30 1970

03 30 1970

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

STANDARD FORM No. 276
APRIL 1968
GPO: 1968 O-760-1
FPM Supplement 870-1
176-102

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

<i>William M. Keet</i>		DO NOT COMPLETE	FOR HEADQUARTERS USE ONLY	
NAME OF EMPLOYEE (NAME BLANKS ONLY IF SAJ)		DATE (From Item 8-2)	NAME OF SUPERVISOR (From)	DATE (From Item 8-3)
		12 Feb. 1969	John G. Shaffer, Jr.	12 Feb. 1969
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
17 February 1969		TM 198253	12 Feb. 1969	
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE GRADE	3. YOUR CURRENT POSITION, TITLE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
9 May 1929	D	Ops Officer - GS-14/3	DO BASE WASHINGTON	WU INDIAN
6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU: 4 dependents, ages 38, 15, 14, 13				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT: Educational facilities for my children and medical facilities for my wife.				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (See special note on transmittal form). <i>(Also attach personnel cover questionnaire in accordance with CSS-F 240-8)</i>				
<ul style="list-style-type: none"> - - Initiate and develop contacts and operations in the Washington diplomatic and foreign press communities, encompassing all the major world geographical areas. - - Handle recruited agents resident in the Washington area. - - Establish and maintain self in commercial cover role. Perform cover duties. - - Prepare operational correspondence and conduct routine administrative tasks. 				
10. TRAINING DESIRED: <i>INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS</i>				

ADMINISTRATIVE — INTERNAL USE ONLY

TRAINING REPORT
OFFICE OF TRAINING
FUNCTIONAL TRAINING DIVISION

This certifies that William M. Kent (039198) has completed the two day Equal Employment Opportunity (EEO) Seminar for Supervisors held 17-18 August 1976. At the conclusion of this two-day session, each participant will be able to describe the following:

- a) The EEO Program and reasons for its existence;
- b) A supervisor's responsibility in implementing the program;
- c) The procedures for processing EEO complaints;
- d) The Agency's past record and the Agency's Affirmative Action Plans; and
- e) The significance of Upward Mobility, Federal Women's, and Hispanic Programs in the overall EEO Program.

FOR THE DIRECTOR OF TRAINING:


Donald R. Heady
DONALD R. HEADY
Course Administrator

ADMINISTRATIVE — INTERNAL USE ONLY

Establishing and maintaining a tentative travel control system in the Darien District of Panama for travel through the Panama-Colombia frontier. Agent at the Air Travel Control Field Office at Tocumen National Airport. Performing surveillances and conducting investigations. Writing reports.

8. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.

4. PROFICIENCY IN FOREIGN LANG.	READING	SPEAKING	UNDERSTANDING
	EXC GOOD FAIR POOR	EXC GOOD FAIR POOR	EXC GOOD FAIR POOR
Spanish	X	X	X
Italian	X	X	X
French		X	
German		X	X

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: IF IN US-50 STATE:

TYPE OF DUTY	LOCATION
Operations Officer	Mexico
Operations Officer	Cuba
Operations Officer	Guatemala

(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?

MARITAL STATUS	YES	NUMBER OF DEPENDENTS	YES	EMERGENCY ADDRESSEE	YES	LEGAL ADDRESS	YES
	<input checked="" type="checkbox"/>						

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO, IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

5 June 1953

Kent, William Morris

SIGNATURE OF EMPLOYEE

SECTION 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT DATE FROM DATE TO	OCCASION FOR REPORT		ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT OF REPORTING OFFICER <input type="checkbox"/> PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON	COVERING INITIAL 90 DAYS OF EMPLOYMENT
	16 Sept. 52	31 May 53		

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, WHAT DUTY OR DUTIES
		after Headquarters' training		Intell. Off. - Operations

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 8? YES NO. IF NO, EXPLAIN IN SECTION 11.
HAS EMPLOYEE STRIVEN FOR YES NO. DO YOU RECOMMEND EMPLOYEE YES NO, TO WHAT GRADE AND FOR WHAT POSITION
PROFESSIONAL IMPROVEMENT? YES NO FOR PROMOTION? YES NO GS-7

9. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK 'NOT OBSERVED' OR ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT SUITED FOR	WEAK- INPEC- TIVE	FAIR	GOOD	VERY GOOD	EXCEL- LENT	GUT- STAM- PINE
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE					X		
B. INTEREST AND ENTHUSIASM IN WORK						X	
C. SECURITY CONSCIOUSNESS							X
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS							X
E. ATTENTION TO DUTY						X	
F. JUDGMENT AND COMMON SENSE					X		
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						X	
H. DISCRETION					X		
I. INITIATIVE						X	
J. ABILITY TO HANDLE AND DIRECT PEOPLE					X		
K. PERFORMANCE OF PRESENT DUTIES (ITEM 8)						X	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION						X	
M. TACT					X		
N. CAPACITY (NON-SUGGESTIBILITY)						X	
O. LEADERSHIP					X		
P. PHYSICAL STAMINA						X	
Q. MENTAL STAMINA						X	

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU - DEFINITELY PREFER NOT BE SATISFIED BE PLEASED PARTICULARLY
NOT WANT HIM TO HAVE HIM TO HAVE HIM TO HAVE HIM DESIRE HIM

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET

1 July 1953

DATE

IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACED PRINTING ON THE REVERSE SIDE HEREOF.

Clarence B. Croyier
SIGNATURE OF REPORTING OFFICER

Z. T. Cady

SIGNATURE OF REVIEWING OFFICER

SECRET

(When Filled In)

W/T

FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

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

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisor to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in general why he stands.

*Ron L. Williams Jr.**Roth Rar 3/1/55*

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

SECTION I

		1. DATE OF BIRTH	2. SEX	3. SERVICE DESIGNATION
		9 May 1929	M	Operations EUPIRE
4. GRADE	5. STATION DESIGNATION (Current)			
OS-7b	Panama			
6. DUE DATE OF THIS REPORT		7. PERIOD COVERED BY THIS REPORT (Inclusive dates)		
30 November 1954		1 June 1954 to 30 November 1954		

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Operations Officer	16 June 1952

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

1. Navy liaison, including coverage and reporting of strategic materials transiting this area.
2. Water travel control, including reporting of satellite travel through this area, and assisting in air travel control.
3. Development of file material for CP leads and travel control check on persons of CP interest.
4. Cutout for one of the top CP penetrations in the area.
5. Occasional surveillances on persons of interest to the Mission.



SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES

1. NAME OF RATER (True)	2. NAME OF REVIEWING OFFICIAL IN FIELD (True)
Edward L. Anderson	John H. Jenkins, Jr.
3. THIS REPORT <input checked="" type="checkbox"/> WAS <input type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED.	
4. DATE REPORT AUTHEN- <i>30 JUN 1954</i>	5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE FITNESS REPORT AND SIGNATURES

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

SECRET

(4)

SECRET
(When Filled In)

EMPLOYEE SERIAL NUMBER

FITNESS REPORT

SECTION A GENERAL									
1. NAME (Last) KENT	(First) William	(Middle) M	2. DATE OF BIRTH 9 May 1929	3. SEX M					
4. GRADE GS-12	5. SERVICE DESIGNATION DI		6. OFFICIAL POSITION TITLE Area Operations Officer						
7. OFF/DIV/BR OF ASSIGNMENT DDF/WH/Venezuela		8. CAREER STAFF STATUS							
NOT ELIGIBLE X	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR					
PENDING	DECLINED	DENIED	ANNUAL	REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN G.P. 28 February 1960		11. REPORTING PERIOD From 1 Jan 59 To 31 Dec 59		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 that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>									
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent					
SPECIFIC DUTY NO. 1 Case officer responsible for two KUCAGE media projects.		RATING NO. 5	SPECIFIC DUTY NO. 4 Special KUCAGE target of opportunity, campaigns (eg. national elections, student congresses, etc.).						
SPECIFIC DUTY NO. 2 Development and contact with two political action assets.		RATING NO. 6	SPECIFIC DUTY NO. 5						
SPECIFIC DUTY NO. 3 Development of contacts in Dominican revolutionary circles.		RATING NO. 6	SPECIFIC DUTY NO. 6						
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION									
<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>									
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.				RATING NO. 5					
SECTION D DESCRIPTION OF THE EMPLOYEE									
<p>In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.</p>									
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree					
CHARACTERISTICS			NOT APPL-CABLE	NOT OBSERVED	RATING				
GETS THINGS DONE					1	2	3	4	5
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):									
SEE SECTION "E" ON REVERSE SIDE									

-3-

policy, CCS will not okay engaging in recruitment activities people who are under cover of legitimate firms (such as my cover firm, WWIS). The risk, he said, is too great, adding that where recruitment responsibilities are envisaged, a devised facility cover rather than that of a real firm, is provided. He suggested that I call Mr. Will Burke, current Chief of the Corporate Cover Branch in CCS, for further details and confirmation.

5. I spoke with Mr. Burke on the morning of 29 June. In essence, he said the same thing that Biladeaux had said, allowing that there are occasional exceptions such as an instance where an officer assigned abroad might use an alias, or on the rare occasion where a person might, in effect, recruit himself. With specific reference to WWIS, when I had that cover recruitment activity was precluded.

SECRET

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain rating 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.

Aug 19 1967
 Subject has been under the supervision of Branch's ~~chief~~ ~~assistant~~ August 1966. In August Subject was transferred PCS to New Orleans where he was responsible for all aspects of the operation of proprietary foundation, **JMCLIPPER**. During the reporting period, he has consistently demonstrated a high degree of enthusiasm and operational initiative. Although operating under instructions not to expand foundation activities too rapidly, he has not waited for an official "go-ahead" but has shown unflagging energy in planning operations for the period when **JMCLIPPER** could expand activities. He has shown an unusually keen perception of areas of CA operational needs and of imaginative thinking on how to fill these needs.

Subject has shown himself fully capable of exercising the self-disciplined and self-motivation necessary in an unofficial cover position. His proficiency in Spanish has been useful in meeting and entertaining Latin American travelers of potential operational interest passing through his city. He has handled his cover situation well. The cover office has been well run with no significant financial, administrative, or personnel problems having arisen during the period. Subject has exhibited an above-average cost consciousness.

SECTION D

CERTIFICATION AND COMMENTS

BY EMPLOYEE

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

DATE	SIGNATURE OF EMPLOYEE
------	-----------------------

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

5	Subject is assigned outside of the Washington area.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE <i>Lee E. Patton</i> Lee E. Patton

BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		

I agree with the rating officer's judgement that Mr. Kent's performance has been characterized by exceptional efficiency. He demonstrated unusual energy and imagination in developing plans for expansion of **JMCLIPPER** activities. His detailed reporting was also commendable.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE <i>Paul E. Oberst</i> Paul E. Oberst
31 March 1967	Chief, WH/6	

SECRET

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 059198											
SECTION A					GENERAL											
1. NAME <i>Kent William Jr.</i>		(First) (Middle)	2. DATE OF BIRTH <i>9 May 29</i>	3. SEX <i>M</i>	4. GRADE <i>GS-13</i>	5. SD <i>D</i>										
6. OFFICIAL POSITION TITLE <i>Ops. Officer</i>		7. OFF/DIV/BR OF ASSIGNMENT <i>DDP/WH/6</i>		8. CURRENT STATION <i>New Orleans</i>												
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER-PROVISIONAL (See Instructions - Section C)</small>		10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify) <small>SPECIAL (Specify)</small>		11. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE												
12. DATE REPORT DUE IN O.P. <i>28 February 1967</i>		13. REPORTING PERIOD (From - To) <i>1 August 1966 - 31 March 1967</i>														
SECTION B					PERFORMANCE EVALUATION											
<table border="0"> <tr> <td>W - Weak</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>A - Adequate</td> <td>Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</td> </tr> <tr> <td>P - Proficient</td> <td>Performance is more than satisfactory. Desired results are being produced in a proficient manner.</td> </tr> <tr> <td>S - Strong</td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td>O - Outstanding</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>							W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.	A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.	S - Strong	Performance is characterized by exceptional proficiency.	O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.
W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.															
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.															
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.															
S - Strong	Performance is characterized by exceptional proficiency.															
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.															
SPECIFIC DUTIES																
<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>																
SPECIFIC DUTY NO. 1 <i>Responsible as [redacted] for directing all operations conducted through proprietary foundation JMCLIPPER</i>					RATING LETTER <i>S</i>											
SPECIFIC DUTY NO. 2 <i>Administration and financial control of JMCLIPPER</i>					RATING LETTER <i>S</i>											
SPECIFIC DUTY NO. 3 <i>Development and planning of new operational support tasks for JMCLIPPER</i>					RATING LETTER <i>O</i>											
SPECIFIC DUTY NO. 4 <i>Supervision of JMCLIPPER secretary and contract agent/trustee</i>					RATING LETTER <i>P</i>											
SPECIFIC DUTY NO. 5 <i>28 April 1967 fm WP</i>					RATING LETTER											
SPECIFIC DUTY NO. 6 <i>POSTED ON OF-4b</i>					RATING LETTER											
OVERALL PERFORMANCE IN CURRENT POSITION																
<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>																
FOR 45 OBSOLETE PREVIOUS EDITIONS.		SECRET		<div style="border: 1px solid black; padding: 2px;">REF ID: A6571 Revised 1965 Replaces AFM 1 Replaces AFM 2 Replaces AFM 3 Replaces AFM 4 Replaces AFM 5</div>												

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Savv File

29 June 1971

MEMORANDUM FOR: Mr. Joseph Di Stefano
SUBJECT : Responsibilities During Assignment to
DO/Washington Base (re Fitness Report Jan 69 - Jan. '70)
FROM : Mr. William M. Kent

1. During the early days of my assignment to DO/Washington Base, the matter of my cover was discussed a number of times with DO Personnel and CCS. Eventually, CCS came up with ~~times~~ ~~World Wide Information Services, Inc., of New York, as~~ a legitimate firm which would provide me with the needed cover. It came out loud and clear during the discussions that this cover would allow me to spot, assess and develop targets of interest, and would allow me to handle recruited agents, but, because of the high risk involved in the use of a legitimate firm for cover purposes, I was not to engage in recruitments.

2. Despite its one limitation, the cover was ideal. Among other things, I:

- a. Handled a recruited Venezuelan agent assigned to the Venezuelan Embassy in Washington;
- b. Handled a recruited code clerk assigned to one of the embassies in Washington;
- c. Contacted and assessed a high official of the Soviet Embassy, made arrangements to have him met by another Base Case Officer under alias who continued the development which eventually was to lead to a recruitment pitch;

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SECRET

-2-

d. Established contact and developed a third national employed by the Algerian Embassy, gained access to the Embassy, went all through it, drew a sketch of the interior of the premises including the location of the code room;

e. Made contact with and developed two Arab officials assigned to the Arab Information Office in Washington;

f. Made contact with and developed officials in the Polish, Czech, Hungarian and other Embassies; was on particularly good terms with the Poles;

g. Made contact and developed an official of the Pakistani Embassy;

h. Made contact, developed and turned over to another case officer under alias a Swedish national who was subsequently recruited and was to be sent to India to work on the Chicom target.

i. Maintained my cover in a manner which was completely devoid of suspicion during the entire period I used it.

3. When the Base moved to its new offices in Washington, the COB gave me my instructions. He told me that I should avoid making or maintaining contacts in the Church and Latin American communities in Washington; that I was not being assigned any geographical area on which to concentrate but would be expected to use my judgment, seek out persons who might be of interest, and take advantage of opportunities which might arise; that I would be given recruited agents to handle as the need arose; that, per the limitation concerning my cover, I was not to engage in actual recruitments, but was to spot, assess, and develop persons of possible interest who would be turned over to other case officers under alias for further development and recruitment.

4. On 28 June 1971, I called Dick Biladeaux of CCS who was involved at the time I was given **the WWIS** cover. While I did not, purposely, make specific reference to the matter at hand, in response to my query he said that as a matter of

SECRET

REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
[REDACTED]	9 May 1909		02 Jun 53
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion (Staff Agent) <i>Recd. 100-10291-10022</i>			
B. POSITION (Specify whether establish, change grade or title, etc.)			
FROM— Intelligence Asst. GS-6 GS-6, \$3,755.00 p.a. MSP/RS Branch III, Cont. Adm. & Control, Denver City, Denver		TO— Intelligence Asst. GS-7 GS-7, \$4,205.00 p.a. MSP/RS Branch III, Cont. Adm. & Control, Denver City, Denver	
6. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	7. POSITION TITLE AND NUMBER	8. SERVICE GRADE AND SALARY	9. ORGANIZATIONAL DESIGNATIONS
10. HEADQUARTERS	11. FIELD OR DEPARTMENTAL	12. FIELD <input type="checkbox"/> DEPARTMENTAL	
13. REMARKS (Use reverse if necessary) Elect. Rm. 2 DIRECT APPROVAL CROSS - REFERENCE			
14. REQUESTED BY (Name and title) <i>C/MS</i>			
15. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) V. G. [Signature] Extension 457			
16. REQUEST APPROVED BY Signature: <i>Davis B. Powell</i> Title: <i>F-1/CHD</i>			
17. VETERAN PREFERENCE			
NON	WWII OTHER S-PF	18. POSITION CLASSIFICATION ACTION	
	DISAB OTHER	NEW	VICE
SEX	RACE	S-A	REAL
19. FROM:	10. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	
TO:	<i>100-10291-10022</i>	19. DATE OF APPOINTMENT AFFIRMANTS (ADDRESSING ONLY)	
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:			
21. STANDARD FORM 30 REBARS <i>Pasted 7/17/53 DOB - 7/5/53 OF 16 7/17/53 SHEDD - 6/10/53 SFS CSEOD -> 7/17/53 LCD -></i>			
22. CLEARANCES			
A.	INITIAL OR SIGNATURE	DATE	REMARKS:
B. CIVL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR ENCL			
E.			
23. APPROVED BY SECRET SECURITY INFORMATION			
<i>Approved JUL 5 1953 EJS Personnel Division (Concert) Distribution: CFS-10 PERS. FILE ✓ PHTR SSQ/1050 ORG. CONCERNED SPS/T&R OTHER Burrows 6/30/53</i>			

REQUEST FOR PERSONNEL ACTION																					
RECORDED OFFICE FORM NO. 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.																					
1. NAME (Last, first, middle initial, and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST																		
[REDACTED]	9 May 1929		22 Oct 54																		
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) PROMOTION (STAFF AGENT)		6. EFFECTIVE DATE A. PROPOSED: 30 Jan 55																			
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: JAN 30 1955																			
FROM: INTELLIGENCE ASST , [REDACTED] GS-7, \$4330.00 p.a. DDP/WH BRANCH III, CENT AMER & CARIB. PANAMA CITY, PANAMA		TO: INTELLIGENCE OFFICER, [REDACTED] GS-9, \$5060.00 p.a. DDP/WH PROJECT HYPOTHESIS PANAMA CITY, PANAMA																			
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL 7. FIELD OR DEPARTMENTAL		8. POSITION TITLE AND NUMBER 9. RANK, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATION 11. HEADQUARTERS																			
12. REMARKS (Use reverse of reverse if necessary) COVER - Military		13. APPROVAL CANCELLED JAN 30 P. I. X 16 Jan 55 Jones P. Humphries (and) FECOM 10 Jan '55 Signature: <i>Jones P. Humphries (and)</i> Title: <i>FECOM</i>																			
14. VETERAN PREFERENCE <table border="1"> <tr> <td>None</td> <td>WWII</td> <td>OTHER</td> <td>MFT.</td> <td>10-POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>DISABILITY OTHER</td> </tr> </table>		None	WWII	OTHER	MFT.	10-POINT					DISABILITY OTHER	15. POSITION CLASSIFICATION ACTION <table border="1"> <tr> <td>NEW</td> <td>VIE</td> <td>I.A.</td> <td>REAL</td> </tr> <tr> <td></td> <td></td> <td></td> <td>D.FI</td> </tr> </table>		NEW	VIE	I.A.	REAL				D.FI
None	WWII	OTHER	MFT.	10-POINT																	
				DISABILITY OTHER																	
NEW	VIE	I.A.	REAL																		
			D.FI																		
16. SEX	17. RACE	18. APPROPRIATION FROM: S-3525-55-051 TO: S-3525-55-051		19. SUBJECT TO C. S. RETIREMENT ACT (1953-1962)	20. DATE OF APPOINT- MENT AFFIDAVITS (REGISTRATION ONLY)	21. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:															
22. STANDARD FORM 30 REMARKS <p>PURSUANT TO CGI DIRECTIVE EFFECTIVE 10 MAR. 1955 SALARIES ADJUSTED TO \$440</p> <p style="text-align: center;">POSTED ON</p>						APPROVED SPECIAL CONTRACTOR, ALIMENTACION AND PROCESSING STAFF Effective: JAN 30 1955 DISTRIBUTION: GPO (2) P.E. FLO. PI E.O./REC OWN HOME/EJ COMS OTHER <i>John L. Bischoff</i> 16-11229-2															
23. CLEARANCES		INITIAL OR SIGNATURE	DATE	REMARKS:																	
A.																					
B. CIVIL OR POS. CONTROL																					
C. CLASSIFICATION																					
D. PLACEMENT OR ENPL.			1-30-55																		
E.																					
F. APPROVED BY																					

CONFIDENTIAL FUNDS PERSONNEL ACTION

KENT, William M.		DATE 13 July 1951
NATURE OF ACTION Appointment		EFFECTIVE DATE 27 December 51
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM	TO <i>(Signature)</i> Administrative Clerk, GS-5
		GS-5, \$3100.00 per annum
		OSO
		FDT
		DNC
		Quayacuyl, Ecuador
CLASSIFICATION <i>Mophlype</i>	APPROVAL FOR ASSISTANT DIRECTOR <i>for 25</i>	EXECUTIVE
CLASSIFICATION <i>TS-3-3Y</i>	PERSONNEL OFFICER <i>Thomas M. Fisher P J Goodhart</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON 2 January 52		
SECURITY CLEARED ON 6 December 51		
OVERSEAS AGREEMENT SIGNED 2 January 52		
ENTERED ON DUTY 27 December 51		
REMARKS: Slot # 13.		<i>Robert J. Hayes</i> <small>SIGNATURE OF AUTHENTICATION OFFICER</small> <i>C-1099-#168/</i> <small>301</small>
<i>H. L. Graham</i> <small>CHIEF, FDT</small>		
<small>CONFIDENTIAL FUNDS BRANCH</small> <small>U.S. GOVERNMENT PRINTING OFFICE: 1949 1-1000</small>		

FORM NO. 37-1
NOV 1949

GPO 63-500339

SECRET

William M. KENNEDY		DATE 10 January 1952
Transfer		EFFECTIVE DATE 3 February 1952
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM Admin. Clerk, GS-5 GS-5 \$3410.00 per annum (old) GS-5 \$3410.00 per annum (new)	TO Admin. Clerk, GS-5 GS-5 \$3410.00 per annum
	GSO	-
	FDT	WH
	NMC	Branch I
	Quayaguil, Ecuador	Maracaibo, Venezuela
		3530
APPROVAL		
QUALIFICATIONS <i>Thomas M. Fahey</i>	FOR ASSISTANT DIRECTOR <i>Gran L. Greaves</i> PERSONNEL OFFICER	EXECUTIVE <i>J. Mulcahy</i>
CLASSIFICATION 1530		
POST CONFIDENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SHARED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS: Slot No. 3	301	
ACW:	10 January 1952	
COPY TO FAIRBULL, 111 CONFIDENTIAL FUNDS BRANCH		

FORM NO. 37-1
REV 1949

SECRET

GPO : 16-6020-1

(2)

NAME <i>John Williams</i>		DATE 7 May 1952
NATURE OF APPOINTMENT - Staff Agent		EFFECTIVE DATE 10 JUNE 1952
		UPON ARRIVAL AT STATION <i>Assist</i>
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM	
	Intell. Officer, GS-6	
	GS-6, \$3795.00 per annum	
	WH	
	III	
	<i>(#3532-001)</i> Fort Amador, C.Z. (Project <i>Goodhart</i>)	
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT DIRECTOR <i>Co-deg</i>	EXECUTIVE
QUALIFICATION <i>T 599</i>	PERSONNEL OFFICER <i>J. Goodhart</i>	
POSS DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHORIZING OFFICER)		
REMARKS: <i>Cover - military</i>	30/	
C/NR _____ DATE _____		

FORM NO. 37-1
NOV 1949

SECRET

GPO 18-42206-1

(2)

CONFIDENTIAL FUNDS PERSONNEL ACTION

TITLE OF APPOINTMENT - Staff Agent <i>Ronald Wilson 10</i>		DATE May 1952
		EFFECTIVE DATE 10 June 1952 Upon arrival at station
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM	<i>asst</i>
		Intell. Officer, GS-6
		GS-6, \$3795.00 per annum
		WB
		III
		(#3532-001) Fort Meade, C.Z. (Project <i>Apparatus</i>)
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT DIRECTOR <i>Goodhart</i>	EXECUTIVE
CLASSIFICATION <i>Inf</i>	PERIODICAL OFFICER <i>F 599</i>	
PORT DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
DATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS: <div style="border: 1px solid red; padding: 2px; display: inline-block;">Cover - military</div> 30/		
C/MIS		DATE

FORM NO. 37-1
NOV 1949

SECRET

GPO: 16-10206-2

(2)

REQUEST FOR PERSONNEL ACTION				UNVouchered	
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.					
1. NAME (Mr., Mrs., Dr., Capt., Lt., etc.) [REDACTED]		2. DATE OF BIRTH 9 May 1929		3. REQUEST NO. -	
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Staff Agent, Appointment (Correction)		5. EFFECTIVE DATE 4. PROPOSED: 10 June 1952		6. DATE OF REQUEST 4 Nov. 52	
B. POSITION (Specify whether establish, change grade or title, etc.) *		5. APPROVED: 10 June 1952		7. C. S. OR OTHER LEGAL AUTHORITY	
FROM—		TO— Intelligence #3745-40 , OS-6 OS-6, #39975-60 p.s.s. WH III Panama City, Panama (#3531-001)			
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD OR DEPARTMENTAL		<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
8. NUMBER (Use reference if necessary) Project - HYPOXIDE Cover - Military		9. REQUEST APPROVED BY Signature: Davis B. Powell			
10. FOR ADDITIONAL INFORMATION CALL (Name and telephone number) W. G. Tamm, 24-1457		11. TITLE F1/PO.			
12. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION			
<input type="checkbox"/> HOME <input type="checkbox"/> WIFE <input type="checkbox"/> OTHER <input type="checkbox"/> S.P.T. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DRUG <input type="checkbox"/> OTHER		15. NEW	16. VICE	17. I.A.	18. REAL
13. SEX RACE M. F. TO: A1531-001		19. SUBJECT TO C. S. RETIREMENT ACT (1929-1952)		20. DATE OF APPOINTMENT AFFIDAVITS (Accompany GRV) 21. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
22. STANDARD FORM 1745-2					
23. CLEARANCES		INITIAL OR IMMATURE		DATE	
A.					
B. CIVL. OR POS. CONTROL					
C. CLASSIFICATION		2888			
D. PLACEMENT OR EMPL.					
E.					
F. APPROVED BY				SECURITY SECRET SECURITY M.L. Shae 10/52	

SF-1030-2

STANDARD FORM 14
January 1972
PREPARED BY U.S. CIVIL SERVICE COMMISSION
Federal Personnel Manual Ch. 299
SF-104

SECRET

Official Personnel Folder

SECRET

Received 15 Aug 1966 71 days used (1)
68 days used (1)

24 Jan used
78 days used

31 Aug 1965

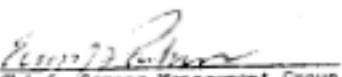


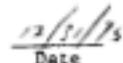
6. Kent has been in his present grade for the past seven years. He has clearly earned, and I strongly recommend that he be considered for, promotion to GS-15.


Harris Greene
Harris Greene

Chief
Nonofficial Cover Branch

CONCUR:


E. J. J. P.
Chief, Career Management Group


Date
12/1/74

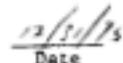
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Chief
Nonofficial Cover Branch

CONCUR:


E. J. P.
Chief, Career Management Group


Date

SECRET

(4 Rev. 10-16-64)

REQUEST FOR PERSONNEL ACTION				DATE REQUESTED 2 February 1970																																					
1. SERIAL NUMBER	2. NAME (Last, First, Middle)																																								
059198	KENT, WILLIAM																																								
3. NATURE OF PERSONNEL ACTION <i>G EXCEPTED APPOINTMENT (Career)</i>				4. SPECIFIC DATE REQUESTED MONTH DAY YEAR 02 08 70 REGULAR																																					
5. GRADE		6. PAY GRADE		7. FINANCIAL ANALYSIS NO. CHARGEABLE 0135 0620																																					
X TO Y		X TO Y		8. LEGAL AUTHORITY APPROVED BY OFFICE OF PRESIDENT																																					
9. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 3 PERU SECTION				10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.																																					
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER (14)		13. CAREER SERVICE DESIGNATION D																																					
14. CLASSIFICATION SCHEDULE (GS, E&W)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP 14 4																																					
GS		0136.01		\$ 20,385																																					
17. APPROVAL VICE RICHARD CONOLLY																																									
18. APPROVAL STAFF EMPLOYEE SPECIAL <i>C 12/54!</i>																																									
19. SIGNATURE OF APPROVING OFFICER <i>Jayne Mayellin</i> <i>2-11-70</i>				20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>A. B. G.</i> <i>2-11-70</i>																																					
21. APPROVAL OF EXCLUSIVE USE OF THE OFFICE OF PERSONNEL <table border="1"> <tr> <td>22. APPROVAL DATE</td> <td>23. OFFICE ADDRESS</td> <td>24. TELEPHONE</td> <td>25. APPROVAL DATE</td> <td>26. APPROVAL DATE</td> <td>27. APPROVAL DATE</td> <td>28. APPROVAL DATE</td> </tr> <tr> <td>13 10 51400 WH 7703</td> <td>2000 AUTOMATIC</td> <td>1000</td> <td>05 09 29 12 15 68</td> <td>12 14 69</td> <td>12 14 69</td> <td>12 14 69</td> </tr> <tr> <td>NO. 14 15</td> <td>REFERENCE</td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> </tr> <tr> <td></td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> </tr> <tr> <td></td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> <td>1000</td> </tr> </table>							22. APPROVAL DATE	23. OFFICE ADDRESS	24. TELEPHONE	25. APPROVAL DATE	26. APPROVAL DATE	27. APPROVAL DATE	28. APPROVAL DATE	13 10 51400 WH 7703	2000 AUTOMATIC	1000	05 09 29 12 15 68	12 14 69	12 14 69	12 14 69	NO. 14 15	REFERENCE	1000	1000	1000	1000	1000		1000	1000	1000	1000	1000	1000		1000	1000	1000	1000	1000	1000
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	1000	1000	1000	1000	1000	1000																																			
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30. APPROVAL DATE	31. APPROVAL DATE	32. APPROVAL DATE	33. APPROVAL DATE	34. APPROVAL DATE	35. APPROVAL DATE	36. APPROVAL DATE																																			
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38. APPROVAL DATE	39. APPROVAL DATE	40. APPROVAL DATE	41. APPROVAL DATE	42. APPROVAL DATE	43. APPROVAL DATE	44. APPROVAL DATE																																			
07 03 50 01 02 52	07 03 50 01 02 52	07 03 50 01 02 52	07 03 50 01 02 52	07 03 50 01 02 52	07 03 50 01 02 52	07 03 50 01 02 52																																			
NO. 14 15	REFERENCE	1000	1000	1000	1000	1000																																			
	1000	1000	1000	1000	1000	1000																																			
	1000	1000	1000	1000	1000	1000																																			
45. POSITION CONTROL CERTIFICATION <i>C 11-70 JK</i>																																									
46. APPROVAL DATE <i>J. Markler 9706-70</i>																																									

SECRET

(When filled in)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
1. SERIAL NUMBER 059198		NAME (Last, First, Middle Initial) Kurt, William M.				17 JUNE 1966
3. NATURE OF PERSONNEL ACTION EXCEPTED		4. OFFICER'S GRADE REQUESTED WEEKLY DAY TIME 07 31 66		5. CLASSIFICATION NUMBER 7135 0630		6. LEGAL AUTHORITY (Completed by Office of Personnel)
8. FUNDS OF TO V OF TO V		OF TO V OF TO V				10. LOCATION OF OFFICER'S STATION NEW ORLEANS, Louisiana
9. ORGANIZATIONAL DESIGNATIONS DDP/WIL LUS PIED JMPOLAR-12						
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 9001		13. CARRIER SERVICE DEMONSTRATION D	
14. CLASSIFICATION SCHEDULE (GS, EA, etc.) GS			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP F-5 13	
18. REMARKS XEROX THE ABOVE POSITION IS BEING TRANSFERRED TO THE US FIELD TO ACCOMODATE SUBJECT. C-12-54					17. SALARY OR RATES CMB 14,445 \$ 14990	
19. APPROVING OFFICER Robert D. Cashman CIVIL/Pers			20. DATE SIGNED 16 July '66		21. SIGNATURE OF CARRIER SERVICE APPROVING OFFICER John Collins 7 July '66	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
22. ACTION O&P 13 10		23. PAYROLL NUMBER 51800 WH 75033		24. PAYROLL NUMBER 1388		25. DATE OF BIRTH 2 05 09 29 06 23 63 06 19 66
26. PAY GRADE MO. SA. HL		27. SPECIAL REFERENCE 1-C 2-B 3-HR		28. SEPARATION DATA CODE TYPE MO. DA. YR. MO. DA. YR.		29. SECURITY INFORMATION SECURITY REF. NO. 36.10 00000 112
30. PAY PERIOD CODE 1 1-4 W 1-5 W 1-10 W		31. PAY PERIOD 07 03 50 01 02 52		32. PAYROLL NUMBER CODE 1 1-10 1-11 1-12		33. FULL NAME HEALTH INSURANCE CODE 1-MED. COOP. 1-TSS 1-10 1-11 1-12
34. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 1-ME PREVIOUS SERVICE 1-ME BREAK IN SERVICE 1-ME BREAK IN SERVICE MORE THAN 2 YEARS 1-ME BREAK IN SERVICE MORE THAN 2 YEARS		35. PAYROLL TAX DATA CODE 1 1-11 1-12		36. FORM APPROVED CODE 0 1-M 1-10 1-11 1-12		37. DATE TAX DATA CODE 1 1-10 1-11 1-12
38. POSITION CONTROL CERTIFICATION 0809661				39. FORM APPROVED CODE 0 1-M 1-10 1-11 1-12		40. DATE APPROVED John H. Lutcher 11 July '66
FORM 1152 USE PREVIOUS EDITION						

SECRET

EXPIRES 1 AUGUST 1967
GSA GEN. REG. NO. 27

CS

NOTIFICATION OF PERSONNEL ACTION

Mr. William N. Kent 5-9-59 PMA 6 6-26-58

Limited Appointment 7/23/58 Section 522.1
PL 72d 79th as amended

Political Officer

Assistant Attaché

FIR-7 \$605

Careers

I Regular

S-7

New

1-1011-110

N 94-8011 DDCG 7/23/58 VA.

Reserve SV-61a

Marital Status - Married - Three

Reserve Status - None

SECRET

(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION						V to V	V to UV					
Mo	Da	Yr							UV to V	UV to UV					
1. Serial No.			2. Name (Last/First/Middle)			3. Date of Birth		4. Vet. Recd.		5. Sex		6. CS - EOD			
			KENT, William M			Mo	Da	Tr	Non-AQ S-P-1X To P-3	Code		Mo	Da	Tr	
7. SCD			8. CSC Recd. 9. CSC Or Other Legal Authority			10. Agen. Affidav.			11. FEGLI		12. LCD		13. MIL. SERV. CREDIT - LCD		
Mo	Da	Yr	Yes - 1	Code	No - 2	Mo	Da	Yr	Yes - 1	Code	Mo	Da	Tr	Yes - 1 No - 2	Code

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP/WH Branch 1 Caracas, Venezuela Station		Code	15. Location Of Official Station Caracas, Venezuela		Station Code
16. Dept.-Field Dept.: WHL Frgn: X	17. Position Title 10/FI	Code	18. Position No. 537	19. Serv. GS	20. Occup. Series 0136.51
21. Grade & Step II 2	22. Salary Or Rate \$ 7270	23. SD DI	24. Date Of Grade 10 10 56	25. PSI Due 06 128 57	26. Appropriation Number 9-3588-55-066

ACTION

27. Nature Of Action Integration Department of State	Code	28. Eff. Date 58	29. Type Of Employee Regular	Code 30. Separation Date 01/
--	------	---------------------	---------------------------------	---------------------------------

PRESENT ASSIGNMENT

31. Organizational Designations		Code	32. Location Of Official Station 4450		Station Code 77003
33. Dept.-Field Dept.: WHL Frgn: X	34. Position Title Assistant Attache Pol Officer	Code	35. Position No.	36. Serv.	37. Occup. Series FSR
38. Grade & Step 7	39. Salary Or Rate \$ 6435	40. SD	41. Date Of Grade Mo Da Tr	42. PSI Due Mo Da Tr	43. Appropriation Number

SOURCE OF REQUEST

A. Requested By (Name And Title) OPSER/DCD/DCL	C. Request Approved By (Signature And Title) F. Eggleston Cover Officer
B. For Additional Information Call (Name & Telephone Ext.) B. Eggleston x8104	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			B. Placement		
B. Pos. Control	223	2/1	C.		
C. Classification			D. Approved By		

Remarks

Standard Remarks

Wofle

SECRET**REQUEST FOR PERSONNEL ACTION**

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prest.	5. Sex	6. Cr. To
559198	KENT WILLIAM H	Mo. Da. Yr. 05 09 29	None-0 5 P-1 10 P-2	M 1	Mo. Da. Yr. 01 02 52
7. SCD	8. CSC Recd.	9. CSC Or Other Legal Authority	10. Accts. Allday.	11. REGU	12. LCD
Mo. Da. Yr. 07 03 50	Yeo-1 Mo-2	1 50 USCA 403 d	Mo. Da. Yr. 01 02 52	Yeo-1 Mo-2	Yeo-1 Mo-2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
DOP WH BRANCH 1 CARACAS, VENEZUELA STATION	4650	CARACAS VENEZUELA	77003		
16. Dept. - Field	17. Position Title	18. Position No.	19. Serv.		
Dept - USAF - Frgn -	Code ASST ATTA POL OFF 1.0. (F1)	0537	FSR 08		
20. Grade & Step	21. Salary Or Rate	22. SD	23. Date Of Grade	24. PS Due	25. Appropriation Number
07 11 2	\$ 6435 7270	DI	07 101 56	06 28 59	9 3500 55 066

ACTION

27. Nature Of Action	Code	28. EH. Date	29. Type Of Employee	Code	30. Separation Date
PROMOTION	30	Mo. Da. Yr. 5 117 15 9	REGULAR	OM	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
	4650		77003		
33. Dept. - Field	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series	
Dept - USAF - Frgn -	Code O-10 OFF	0-10	08	0186-01	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PS Due	43. Appropriation Number
12 1	\$ 8330		Mo. Da. Yr. 5 117 15 9	11 11 5 16 0	

SOURCE OF REQUEST

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)
P. C. Bowers MIL Personnel Officer	
B. For Additional Information Call (Name & Telephone Ext.)	
John Washington X5242	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>Arnold C. Bowers</i>	2/2/50	D. Present		
B. Pos. Control	<i>Arnold C. Bowers</i>	1/1/50	E. Approved By	<i>Robert E. Richards</i>	14/1/50
C. Classification					
Remarks					

CLEAR 2/2/50
W/11 1513M 23

Recorded by
CEPD
1/1/50

SECRET**REQUEST FOR PERSONNEL ACTION**

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Rel.	5. Sex	6. CS - EOD
	KENT, WILLIAM H.	Mo. Da. Yr. 05 09 29	Name-0 Code F Pt-1 10 Pt-0	M. F M. 1	Mo. Da. Yr.
7. SCD	8. CSC Ref:	9. CSC Or Other Legal Authority	10. Acct. Affidav.	11. POCU	12. LCD
Mo. Da. Yr. Mo. Da. Yr. Yes - 1 No - 2 1			Mo. Da. Yr. Yes-1 No-2	Mo. Da. Yr. Yes-1 No-2	Mo. Da. Yr. Yes-1 No-2

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP WE BRANCH 4	Code	15. Location Of Official Station WASH., D. C.	Station Code	
16. Dept. - Field Dept - X Code Lvl/ld - Prog - /	17. Position Title ASST AT&T POL OFF OPS OFF	18. Position No. RA-625	19. Serv. PER 03	20. Occup. Series 0136.01
21. Grade & Step 07 12 1	22. Salary Or Rate \$ 6600 8330	23. SD D	24. Date Of Grade 07 17 59	25. PSI Due 11 17 60
				26. Appropriation Number 0135 1000 1000

ACTION

27. Nature Of Action CONVERSION FROM PER STATUS	Code	28. Eff. Date Mo. Da. Yr. 04 16 60	29. Type Of Employee REGULAR	Code	30. Separation Date 01
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PRESENT ASSIGNMENT

31. Organizational Designations DDP WE BRANCH 4	Code	32. Location Of Official Station WASH., D. C.	Station Code	
33. Dept. - Field Dept - X Code Lvl/ld - Prog - /	34. Position Title OPS OFF	35. Position No. RA-625	36. Serv. PER 03	37. Occup. Series 0136.01
38. Grade & Step 12 1	39. Salary Or Rate \$ 8330	40. SD D	41. Date Of Grade Mo. Da. Yr. 04 20 60	42. PSI Due 11 17 60
				43. Appropriation Number 0135 1000 1000

SOURCE OF REQUESTA. Requested By (Name And Title)
P. C. BOWERS WH/PERSONNEL OFFICERB. For Additional Information Call (Name & Telephone Ext.)
JOHN WASHINGTON X 8242**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>O. C. Bowers</i>	4-18-60	D. Research		
B. Pos. Control	WK	4-20-60	E.		
C. Classification			F. Approved By	<i>W. Keeney</i>	4-20-60

Remarks
Subject resigned from the Department of State effective 16 April 1960, COB.**RECORDED IN
CPO****SECRET**

4-18-60 (4)

SECRET**REQUEST FOR PERSONNEL ACTION**

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vet. Prest.	5. Sex	6. CS - EOB
559198	KENT WILLIAM H			Mo. Do. Yr.	None-0 5 R-1 10 R-2	I M 1	Mo. Do. Yr.
7. SCD	8. CSC Recd.	9. CSC Or Other Legal Authority	10. Accts. Affdgx.	11. REGU	12. LCD	13. REGU LCD	
Mo. Do. Yr. 07 03 50	Yes - 1 No - 2 1	50 USCA 403 J	Mo. Do. Yr. Yes-1 No-2	Code 01	Mo. Do. Yr. 01 02 52	Yes - 1 No - 2 2	Code 01

PREVIOUS ASSIGNMENT

14. Organizational Designation	Code	15. Location Of Official Station	Station Code
DDP WH BRANCH 1 CARACAS, VENEZUELA STATION	4650	CARACAS, VENEZUELA	77003
16. Dept. - Field	17. Position Title	18. Position No.	19. Serv. 20. Occup. Series
Dept - USM Frgn -	Code ASST ATTA POL OFF 5 OPS OFF	0537	FSR GS 0136.01
31. Grade & Step	32. Salary Or Rate	33. SD	34. Date Of Grade 35. PSI Due 36. Appropriation Number
07 12 1	\$ 6600 8330	D	Mo. Do. Yr. Mo. Do. Yr. 0135 5880 3000 05 17 52 11 13 60

ACTION

27. Nature Of Action	Code	28. ER. Date	29. Type Of Employee	Code	30. Separation Date
REASSIGNMENT	61	Mo. Da. Yr. 01 01 60	REGULAR	OM	

PRESENT ASSIGNMENT

31. Organizational Designation	Code	32. Location Of Official Station	Station Code
DDP WH BRANCH 4	4617	WASH., D. C.	
33. Dept. - Field	34. Position No.	35. Position No.	36. Serv. 37. Occup. Series
Dept - USM Frgn -	Code ASST ATTA POL OFF 5 OPS OFF	Code 36-625	FSR GS 0136.01
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade 42. PSI Due 43. Appropriation Number
07 12 1	\$ 6600 8330	D	Mo. Do. Yr. Mo. Do. Yr. 0135 1000 1000

SOURCE OF REQUESTA. Requested By (Name And Title) *P. C. BOWERS* C. Request Approved By (Signature And Title)B. For Additional Information Call (Name & Telephone Ext.)
JOHN WASHINGTON 15242**CLEARANCES**

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>W. A. Dever</i>	1/15/62	D. Placement		
B. Pos. Control			E.		
C. Classification			F. Approved By	<i>W. White</i>	4-15-62

Remarks
Staffing Complement Change.

2 copies to Security.

FORM NO. 1158
1 MAY 57**SECRET**

(4)