

SECRET

ESTABLISHMENT OF OFFICIAL COVER BACKSTOP		DATE 13 APR 78	FILE NO. 2705
CHIEF, CONTROL DIVISION, OP		SUBJECT 058-22-8472	
CHIEF, CONTRACT PERSONNEL DIVISION, OP		EMPLOYEE NUMBER 59198	
X CHIEF, PCS/CSS (OPERATING COMPONENT FOR ACTION) ATTN: SUPPORT STAFF		ID CARD NUMBER	
RETIREMENT (CIA)		OFFICIAL COVER	
STATUS	X STAFF	ESTABLISHED	X CANCELLED
SUBJECT KENT, WILLIAM M.		CONTINUED	

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)		CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)	
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE	<input checked="" type="checkbox"/> EFFECTIVE DATE: FDD	FORM 3254 K-2 TO BE ISSUED	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR TOY OTHER (Specify)	<input checked="" type="checkbox"/> FORM 3254 K-2 TO BE ISSUED	SUBMIT FORM 3254 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY 1	
SUBMIT FORM 3254 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY 1		X RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
FORM 3254 K-2 TO BE ISSUED		X SUBMIT FORM 3254 FOR HOSPITALIZATION CARD	
SUBMIT FORM 3252 FOR ANY CHANGE AFFECTING THIS COVER. (RM 245)		DO NOT WRITE IN THIS BLOCK	
SUBMIT FORM 3253 FOR ANY CHANGE AFFECTING THIS RESPONSIBILITY. (RM 245)		THIS MEMO MUST REMAIN ON TOP OF FILE	
X CATEGORY 1		SUBMIT FORM 3254 FOR HOSPITALIZATION CARD	
SUBMIT FORM 3254 FOR HOSPITALIZATION CARD		REMOVED AND/OR COVER HISTORY	

Subject will be acknowledged as CIA for entire
period of employment and is not to reveal specific
places or locations of cover assignments.

DISTRIBUTION:
COPY 1 - CONTROL DIVISION, OP
COPY 2 - OPERATING COMPONENT
COPY 3 - COVER
COPY 4 - SECURITY
COPY 5 - COVER

SECRET

CHIEF, OFFICIAL COVER: CHIEF, CENTRAL COVER STAFF

10. IMPDET CL BY 021966 (15-05-82)

AREA KNOWLEDGE (RESIDENCE OR STUDY)		CONFIDENTIAL	
<p>He is a student in the University of the Pacific, San Francisco, California.</p>			
<p>LANGUAGE FACILITY</p> <p>He speaks Italian fluently.</p>			
<p>EVALUATION AND RECOMMENDATIONS (BE COMPLETE AND JUSTIFY DECISIONS. NOTE ANY UNFAVORABLE CIRCUMSTANCES.)</p> <p>A tall, slim boy, dark hair, brown eyes, salted complexion - nice looking kid - <u>State Dept cover</u> type. He wants a job in govt although he has been warned by professors - that the salaries are limited, jobs are insecure, etc as compared to private industry. He appears to be young but not as young as he actually is. Also wants intelligence type work. Speaks fluent Italian and Spanish - has worked in Latin America (El Salvador) and has graduated from Latin American Institute in New York. Good thing starting salary was 3000, but I am testing him at a 35-1.</p>			
FORMS GIVEN:	<input type="checkbox"/> PHS	<input type="checkbox"/> MEDICAL	<input type="checkbox"/> RESERVE
<p><i>E. M. Navarro</i></p> <p>1000 1 OF INTERVIEWER</p>			

CONFIDENTIAL

REPORT OF INTERVIEW

TO: CFB

VIA:

12 July 1957

Name of Candidate: William M. KeatPosition Considered for Admin Clerk GS-6 Office FOI/OSOInterviewer W. Graham

Personal Appearance	Dignified.....	<input checked="" type="checkbox"/>	Natural....	<input checked="" type="checkbox"/>	Hard.....	<input type="checkbox"/>
	Well-groomed....	<input checked="" type="checkbox"/>	Clean.....	<input checked="" type="checkbox"/>	Steady....	<input type="checkbox"/>
	Wide-awake.....	<input checked="" type="checkbox"/>	Social....	<input type="checkbox"/>	Adaptative....	<input type="checkbox"/>
	Impassive.....	<input type="checkbox"/>	Ordinary..	<input type="checkbox"/>	Significant	<input type="checkbox"/>
Personality	Persuasive.....	<input type="checkbox"/>	Responsive	<input checked="" type="checkbox"/>	Turn.....	<input type="checkbox"/>
	Imperturbable...	<input type="checkbox"/>	Steady....	<input checked="" type="checkbox"/>	Stable....	<input type="checkbox"/>
	Cheerful.....	<input checked="" type="checkbox"/>	Tranquil..	<input type="checkbox"/>	Directed....	<input type="checkbox"/>
	Straight-forward	<input checked="" type="checkbox"/>	Reserved..	<input type="checkbox"/>	Evasive....	<input type="checkbox"/>
	Modest.....	<input checked="" type="checkbox"/>	Complacent	<input type="checkbox"/>	Committed....	<input type="checkbox"/>
	Dominant.....	<input type="checkbox"/>	Confident.	<input type="checkbox"/>	Submissive...	<input type="checkbox"/>

Is education adequate? Yes (X) No () Is language facility adequate? Yes (X) No ()

Area knowledge has lived and worked in Latin America. Fluent Spanish and PortuguesePrevious intelligence or related experience NoneSalary level requested 0 Lowest Salary Acceptable 0

GENERAL RECOMMENDATION:

1. Candidate is not recommended for employment. Reasons: _____
2. Candidate is recommended for employment. Justification background, motivation, personality

SPECIFIC RECOMMENDATION for employment:

Position: Admin Clerk Branch 1 Division FOI/OSO
 Location: Georgetown, Ecuador
 Salary Level: GS-5

RECOMMENDATION as to potential value of candidate to the organization in other than the position immediately under consideration: After suitable training and field experience, subject may qualify as a personnel officer
 (Enter any additional remarks on reverse side.)

Signature W. Graham Interviewer

SECRET
(When Filled In)

REQUEST FOR SECURITY CLEARANCE

NAME (LAST, FIRST, MIDDLE) [REDACTED]		REQUEST NO. (42055)	
POSITION TITLE Ops Officer		REQUEST DATE (23 June 1966)	
LOCATION (CITY, STATE/COUNTRY) New Orleans, La.		YEAR OF BIRTH (1929)	
ASSIGNMENT OFFICE (DOWNS, BRANCH) DDP/WH/JMPOPLAR-12		GRADE (GS-13)	
TYPE OF APPLICANT REGULAR <input checked="" type="checkbox"/> CONTRACT <input type="checkbox"/> CONSULTANT <input type="checkbox"/> MILITARY <input type="checkbox"/>		GRADE (GS-13)	
NAME OF SUPERVISOR (DOWNS, BRANCH) Dow H. Luetscher, Chief/CPD		TYPE OF APPL. (100)	
CLEARANCE RECEIVED Covert Security Clearance		MONTHS & YEARS (100)	
ATTACHMENTS PERSONAL HISTORY STATEMENT <input type="checkbox"/> APPENDIX I <input type="checkbox"/> REQUEST FOR MATTER <input type="checkbox"/> PHOTOGRAPH(S) <input type="checkbox"/> APPENDIX II <input type="checkbox"/> REPORT OF INTERVIEW <input type="checkbox"/>		RECEIVED (101)	
VETERAN STATUS MALE - VETERAN <input type="checkbox"/> MALE - NON-VETERAN <input type="checkbox"/> FEMALE - VETERAN <input type="checkbox"/> FEMALE - NON-VETERAN <input type="checkbox"/>		RECEIVED (102)	

Security#: 54514

Case Officer: Maurice Currie x6032

Clearance Memo to SA/Branch/CPD
Attn: Jo Ann Varney
5 E 69 x7170

SPACE BELOW FOR OS USE ONLY

SECRET			
NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP			DATE 14 Apr 70
TO: (Check)	<input checked="" type="checkbox"/>	CHIEF, RECORDS AND CONTROL	FILE NUMBER 059198
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER
	<input checked="" type="checkbox"/>	CHIEF, OPERATING COMPONENT (For action)	JO CARD NUMBER
ATTN: C/WH/Support		OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED <input type="checkbox"/> DISCONTINUED
REF:		UNIT US Army Staff Group	
SUBJECT KENT, WILLIAM M.			
KEEP ON TOP OF FILE WHILE COVER IN EFFECT			
<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (OPM 20-400-111)		<input type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (OPM 20-400-111)	
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE COB _____		DATE (OPM 20-400-111)	
B. CONTINUING AS OF 7/70 RDD			
<input checked="" type="checkbox"/> SUBMIT FORM 542 TO CHANGE LIMITATION CATEGORY. (OPM 20-7)		<input type="checkbox"/> SUBMIT FORM 542 TO CHANGE LIMITATION CATEGORY. (OPM 20-7)	
<input checked="" type="checkbox"/> ASCERTAIN THAT Army W-2 BEING ISSUED. (OPM 20-21)		RETURN ALL OFFICIAL DOCUMENTATION TO COB.	
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (OPM 240-242)		DO NOT WRITE IN THIS BLOCK - FOR COB INTERNAL USE ONLY	
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (OPM 240-242)			
<input checked="" type="checkbox"/> SUBMIT FORM 2646 <input checked="" type="checkbox"/> AGE FOR HOSPITALIZATION DAYS			
REMARKS AND/OR COVER HISTORY			
<p>Dec 51 = Jun 52 DAC/WH Jun 52 = Jun 56 DAC/WH Jun 56 = Jul 58 DAC/WH Jul 58 = Mar 60 ST/WH Mar 60 = Jul 61 NOC/WH Jul 61 = Aug 66 DAC/WH Sep 66 = Jun 67 NOC/Field (Domestic) Jul 67 = Feb 70 NOC/Field (Domestic)</p>			
DISTRIBUTION: (OPM 1-1-1) OPM 1 - OPERATING COMPONENT OPM 2 - ST/WH OPM 3 - ST/WH OPM 4 - ST/WH OPM 5 - ST/WH OPM 6 - ST/WH OPM 7 - ST/WH OPM 8 - ST/WH OPM 9 - ST/WH OPM 10 - ST/WH		James H. Franklin CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF SECRET (13-20-40)	

PJH: 10 AUG 66

SECRET
(When Filled In)

OAB

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 059198		2. NAME (LAST-FIRST-MIDDLE) Kest, William M.	
3. NATURE OF PERSONNEL ACTION EXCEPTED APPT CAREER		4. EFFECTIVE DATE 07 31 66	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS X TO X X TO Y X TO Z		7. COST CENTER NO. CHARGEABLE 7135 0830 0000	8. USE OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS DOP/WH PROJECT ANNEX U.S. FIELD UNPOPULAR- 12		10. LOCATION OF OFFICIAL STATION NEW ORLEANS, LOUISIANA	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 8001	13. SERVICE DESIGNATION D
14. CLASSIFICATION CATEGORY (GS, GS, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 5	17. SALARY OR RATE 14665
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION IN CODE 13	20. OFFICE CODE 10	21. STATION CODE 51800 WH	22. STATION CODE 75033
23. DATE OF BIRTH 05 09 29	24. DATE OF GRADE 06 23 63	25. DATE OF LST 06 19 66	26. SECURITY 00000 M1
27. YET PREFERENCE 1	28. DATE COMP DATE 07 03 50 01	29. DATE COMP DATE 02 52	30. CAREER CATEGORY C
31. PREVIOUS GOVERNMENT SERVICE DATE 1	32. LEAVE EXT. 8	33. FEDERAL TAX DATA C MO	34. STATE TAX DATA C MO
35. SIGNATURE OR OTHER AUTHENTICATION 087066N			

POSTED ON
OF-4b

EOD DATA

SECRET

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(When Filled In)

15 AUG 67

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER: 558198

2. NAME (LAST-FIRST-MIDDLE): [REDACTED] Kent, William M.

3. NATURE OF PERSONNEL ACTION: REASSIGNMENT

4. EFFECTIVE DATE: 67 1 30 67

5. CATEGORY OF EMPLOYMENT: REGULAR

6. FORMAL ANALYSIS NO. CHARGES: 8125 0103 0000

7. CEC OR OTHER LEGAL AUTHORITY: 30 USC 403 J

8. ORGANIZATIONAL DESIGNATION: U.S. FIELD UNITED STATES STATION: CREDIT OPERATIONS GROUP

9. LOCATION OF ORIGINAL STATION: WASH., D.C.

10. POSITION TITLE: CFS OFFICER

11. POSITION NUMBER: 0203

12. SERVICE DESIGNATION: D

13. CLASSIFICATION SCHEDULE (SEE 1A, 4B): GS

14. OCCUPATIONAL SERIES: 0136.01

15. GRADE AND STEP: 13 5

16. SALARY OR RATE: 14665

17. REMARKS:

POSTED ON 5/14/67

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

18. ACTION CODE	19. OFFICE CODE	20. STATION CODE	21. INTEREST CODE	22. NAME	23. DATE OF BIRTH	24. DATE OF LEAVE	25. DATE OF LEAVE
37 10	43620 000	75013		2	05 09 25		
26. NTS EXPENSE	27. SPECIAL REFERENCE	28. RETIREMENT DATA	29. SEPARATION DATA CODE	30. CORRECTION/AMENDMENT DATA	31. SECURITY REG NO	32. SEX	
33. RES. PREFERENCE	34. LEAVE COMP. DATE	35. LEAVE COMP. DATE	36. LEAVE CATEGORY	37. FEEL/HEALTH INSURANCE	38. SOCIAL SECURITY NO.		
39. PREVIOUS CIVILIAN GOVERNMENT SERVICE	40. LEAVE (A)	41. FEELING TAG DATA	42. STATE TAG DATA				

SIGNATURE FOR OTHER AUTHENTICATION

FROM WH:

POSTED 5/14/67

FORM 1350 Use Previous Edition.

SECRET

DO NOT FOR AUTOMATICALLY (When Filled In)

15 FEB 70

SECRET
(When Filled In)

DAF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER: 059150
2. NAME, LAST FIRST MIDDLE: KENT WILLIAM

3. NATURE OF PERSONNEL ACTION: EXCEPTED APPOINTMENT CAREER

4. EFFECTIVE DATE: 021 09 70
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: ☒ V TO W ☐ V TO CF ☐ CF TO W ☐ X ☐ CF TO CF

7. ORGANIZATIONAL DESIGNATION: DDP/WH
BRANCH 3
PERU SECTION

8. POSITION TITLE: OPS OFFICER

9. CLASSIFICATION SYMBOL (GS OR PL): GS
10. ORGANIZATIONAL SERIES: D135.01
11. GRADE AND STEP: 14 4
12. SERVICE DESIGNATION: 0
13. SALARY OR RATE: 20385

14. REMARKS: STAFF EMPLOYEE SPECIAL.
HOME BASE: WH

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

15. ACTION CODE	16. DATE	17. OFFICE	18. NUMBER	19. ADVANCE	20. CODE	21. DATE OF BIRTH	22. DATE OF GRADE	23. DATE OF JR
13	10		51400	WH	75013	091 04 24	12/ 14 63	12/ 14 63
24. LIFE SERIES	25. SPECIAL REFERENCE	26. RETIREMENT DATA	27. SEPARATION DATA	28. COMMAND / CONSULTANT DATA	29. TIME	30. NO.	31. YES	32. NO
33. NET PREFERENCE	34. NO. COMP. DATA	35. NO. COMP. DATA	36. CARRIER CATEGORY	37. POST / HEALTH INSURANCE	38. NO.	39. YES	40. NO	41. YES
1	01 021 50 01	021 32	01	1				
42. PREVIOUS GOVERNMENT SERVICE	43. NO. GOV. SERVICE	44. NO. GOV. SERVICE	45. NO. GOV. SERVICE	46. NO. GOV. SERVICE	47. NO. GOV. SERVICE	48. NO. GOV. SERVICE	49. NO. GOV. SERVICE	50. NO. GOV. SERVICE
51. SIGNATURE OF OTHER AUTHORIZATION								

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