

MATERIAL REVIEWED AT CIA HEADQUARTERS BY
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: Hidalgo, R.
CP FILE

INCLUSIVE DATES: _____

CUSTODIAL UNIT/LOCATION: _____

ROOM: _____

DELETIONS, IF ANY: PERSONAL MATERIAL & SENSITIVE OPS

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
<u>7-16-78</u>	<u>8/9/78</u>	<u>Dan Hardway</u>	<u>Dan Hardway</u>

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

14-00000

Personal - Post agency
activity

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED		
										26 FEBRUARY 1970		
1 SERIAL NUMBER	2 NAME (Last-First-Middle) 027630 HIDALCO, BARTHOLOME N. JR.											
3 NATURE OF PERSONNEL ACTION RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM										4 EFFECTIVE DATE REQUESTED 02 28 70	5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS	X	V TO C	7 FINANCIAL ANALYSIS NO: CHARGEABLE 0235 0620							8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 87-343 Sec. 2.3		
9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 PANAMA SECTION										10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.		
11 POSITION TITLE OPS OFFICER										12 POSITION NUMBER 1318	13 CAREER SERVICE DESIGNATION D.	
14 CLASSIFICATION SCHEDULE 7GS (28.64)				15 OCCUPATIONAL SERIES GS 0136.01			16 GRADE AND STEP 12 5	17 SALARY OR RATE \$15,173				
18 REMARKS LSD - 7 Feb 70 <i>Excess SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970.</i>												
<i>NOT Recommended in Agency Reserve Program due to Health of Recipient in 13. Date 1/22/70 H.H./PGS</i>												
1 - FINANCE												
18A SIGNATURE OF REQUESTING OFFICIAL <i>HENRY L. BERTHOLD, CIVIL PERS</i>				DATE SIGNED 2/6/70			18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Peter M. Hayes</i>				DATE SIGNED 2/7/70	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE	20 EMPLOY CODE	21 DATE CODING NUMERIC ALPHABETIC	22 STATION CODE	23 INTEGEE CODE	24 MOISER CODE	25 DATE OF BIRTH MO DA YE	26 DATE OF GRADE MO DA YE	27 DATE OF LES MO DA YE				
45 10					35 27 19							
28 DATE EXPIRES MO DA YE		29 SPECIE REFERENTIAL 1-LSC 2-DRGA 3-FICA 4-RGAE		30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE	EOD DATA			33 SECURE REG NO	34 SEC REG NO	
35 RET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36 GEN COMP DATE MO DA YE		37 LONG COMP DATE MO DA YE	38 CAREER CATEGORY SAB RESR PROV TEMP	39 FEGIT HEALTH INSURANCE CODE 0-NO 1-YES	40 SOCIAL SECURITY NO					
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE LESS THAN 3 YEARS 3-BREAK IN SERVICE MORE THAN 3 YEARS				42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED 1-PHS 2-RCO	44 STATE TAX DATA NO TAX EXEMPTIONS 1-YES 2-NO	45 STATE APPROVED CODE NO TAX EXEMPT 1-YES 2-NO	46 C.P. APPROVAL CODE NO TAX EXEMPT 1-YES 2-NO	47 DATE APPROVED 3/1/70			
48 POSITION CONTROL CERTIFICATION <i>12-26-70 MR. GENE COOPER</i>												

SECRET**EMPLOYEE NOTICE OF RESIGNATION**

RESIGN EFFECTIVE

FOR THE FOLLOWING REASON

Mar 2

10-20-1970

MY LAST WORKING DAY WILL BE

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

403 Silver Rock Rd.
Rockville, Maryland 20851

INSTRUCTIONS

Items 1 thru 7, and Items 9 thru 18a } The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary-Part Time		

Item 9 - "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

Major Component (Director, Deputy Director, etc.)
Office, Major Staff, etc.
 Foreign Field or U.S. Field (*if pertinent*)
 Division or Staff (*subordinate to first line*)
 Branch
 Section
 Unit

Items 11 and 15 - "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, *the gaming Career Service should approve* and the other Career Service should concur in Item 18, Remarks.

ROUTING - The original only of this form will be forwarded to the Office of Personnel *through* the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET

14-00000

MEDICAL

25 JUL 1969

MEMORANDUM FOR: Mr. Balmes N. Hidalgo, Jr.**SUBJECT : Exceptional Service Emblem**

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.

2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert S. Wattles
Robert S. Wattles
Director of Personnel

Distribution:

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BCD/HMAB

S E C R E T

24 June 1969

MEMORANDUM FOR: Balmer M. Hidalgo

VIA : WH/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.

2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.

3. A copy of this memorandum will be placed in your official personnel folder.

E. Marelius
EDWARD A. MARELIUS
DDP Records Management Officer

cc: Personnel File of Addressee

S E C R E T

GROUP I
Excluded from automatic
downgrading and
declassification

14-00000

SENSITIVE OPERATIONALS
1968

SECRET

6-38

(B) Nov. 1, 1964

DATE PREPARED

10 August 1966

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (Last - First - Middle)		4. EFFECTIVE DATE REQUESTED			5. CATEGORY OF EMPLOYMENT		
027630		HIDALGO, LAMARO N., JR.		MONTH	DAY	YEAR	REGULAR		
6. FUND SOURCE		<input checked="" type="checkbox"/> V TO V	<input type="checkbox"/> V TO C	08	14	66	7. COST CENTER NO CHARGEABLE		
		C TO V	C TO C	7235-0620			8. LEGAL AUTHORITY (Completed by Office Personnel)		
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
DDP/WB				WASHINGTON, D.C.					
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
						D			
14. CLASSIFICATION SCHEDULE (GS E.B. IN)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
					12		8		
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.									
18A. SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC	22. STATION CODE ALPHABETIC	23. INTEGRATE CODE	24. MOONRS CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR	
28. RTE EXPIRES NO DA TO	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-1SC 2-1CA 3-NONE	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE	33. SECURITY REG NO	34. SEX			
		CODE 2		MO DA YR					
35. VET PREFERENCE CODE 0-HOME 1-1 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CAB RESV PROV-TEMP	39. FEGLI HEALTH INSURANCE CODE 0-B-WATER 1-MIS	40. SOCIAL SECURITY NO				
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-100, BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 2 YEARS) 3-BREAK IN SERVICE (MORE THAN 2 YEARS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED 1-YES 2-NO						
45. POSITION CONTROL CERTIFICATION P-16-6411					46. O.P. APPROVAL See memo signed by D/Pers dated 26 JUL 1966		DATE APPROVED		

SECRET

DATE PREPARED:

TO DECEMBER 1965

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME / GRADE/PROFESSIONAL		3. DATE OF PERSONNEL ACTION		4. PRACTICE DATES/QUOTED		5. CATEGORY OF EMPLOYMENT	
027630		HIDALGO, BALTES N.		REASSIGNMENT		DEC 19 65		REGULAR	
6. RANKS		V TO V	V TO O			7. LAST CENTER NO/CHARGE NAME		8. LEGAL AUTHORITY (Explain by Date of Personnel)	
		C TO V	O TO O			6235 - 0620			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION				11. POSITION TITLE		12. POSITION NUMBER	
DOP/WH BRANCH 2 PANAMA SECTION		WASHINGTON, D. C.				OPS OFFICER		13. CAREER SERVICE DESIGNATION	
14. CLASSIFICATION SCHEDULE (GS, FBS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		12 2		S-10,987			
18. REMARKS FROM: WH/C/MIAMI OPS BR/FI SECTION/5235 - 1162/1145/WASHINGTON, D. C.									
Recorded by CSPD <i>8/1</i>									
1 - FINANCE									
19A SIGNATURE OF REQUESTING OFFICIAL		20. DATE SIGNED		21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		22. DATE SIGNED			
ROBERT D. CASHMAN C/WH/PERSONNEL		10/26/65		<i>DeMille</i>					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
23. ACTION CODE	24. EMPLOY CODE	25. OFFICE CODING	26. STATE CODE	27. INTEGRATE CODE	28. RATES CODE	29. DATE OF BIRTH	30. DATE OF GRADE	31. DATE OF LEI	
37 16	27 330	004	2212			MO DA YR	MO DA YR	MO DA YR	
29. SITE EXPIRES		30. SPECIAL REFERENCE	31. RETIREMENT DATA	32. SEPARATION DATA CODE	33. CORRECTION DATA CODE	34. CANCELLATION DATA	35. SECURITY REG. NO.	36. SET	
MO DA YR			1-CRA 3-FICA 5-GORE	CODE	CODE	MO DA YR	REG. NO.	SET	
35. VET PREFERENCE		36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER LIFETIME	39. REGISTRATION	40. MEDICAL INSURANCE	41. SOCIAL SECURITY NO.		
CODE	0-HOME 1-1 PT 2-10 PT	MO DA YR	MO DA YR	LAB TEMP PROV TEMP	CODE	REG. NO. EXEMPT EXEMPT	41. SOCIAL SECURITY NO.		
42. PREVIOUS GOVERNMENT SERVICE DATA		43. LEAVE CAT	44. FEDERAL TAX DATA	45. STATE TAX DATA					
CODE	0-NO PREVIOUS SERVICE 1-HAD 10+ SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	CODE	POW EXEMPTION CODE	NO TAX EXEMPTIONS	NON EXEMPTED	CODE	NO TAX STATE CODE		
46. POSITION CONTROL CERTIFICATION		47. APPROVAL		48. APPROVAL		DATE APPROVED			
<i>DeMille 10/15/65</i>									

CONFIDENTIAL
(When Filled In)

NOTICE OF LONGEVITY COMPUTATION DATE

NAME (Last, First, Middle)

HIDALGO S. N. Jr.

VOUCHERED

UNVOUCHERED

SERIAL NUMBER:

037630

OFFICE (AND DIVISION)

DDP/ WH

ORIGINAL	LONGEVITY COMPUTATION DATE
X CORRECTION	02-18-572
THIS DATE:	SIGNATURE (Office of Personnel)
12-13-65	J. C. Bellard

FORM 171a
11-60

CONFIDENTIAL

(4)

SECRET

(D) 44-10101-101

DATE PREPARED

23 October 1964

REQUEST FOR PERSONNEL ACTION							
1. NAME/ TITLE A. S. D. S.	B. DATE REQUESTED 10-30-64			C. DATE APPROVED 23 October 1964			
3. NATURE OF PERSONNEL ACTION CLASSIFICATION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 10 64	5. CATEGORY OF EMPLOYMENT FEDERAL		
6. FUNDS ➤		V TO V CPO C	V 10.0 0 100	7. COST CENTER NO CHARGEABLE 275-1162		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS FDP Special Affairs Staff Counter-Intelligence Staff Operations Section				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPEN OFFICER				12. POSITION NUMBER 0007	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (G-1, G-2, etc.) GS		15. OCCUPATIONAL SERIES (S)		16. GRADE AND STEP 12 (1)	17. SALARY OR RATE \$10,300		
18. REMARKS From: DPP/543/23/S Rev. 0 - May 43G							
10/28/64 Secured by [Signature] 10/28/64 11/12/64 Recorded by CSPD							
19. OFFICE OF SECURITY [Signature]							
18A. SIGNATURE OF REQUESTING OFFICIAL [Signature] 10-30-64			DATE SIGNED 10-29-64	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER A. B. Boos			DATE SIGNED 10-30-64
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 37 10	20. EMPLOYEE CODE 49150 515	21. OFFICE CODING NUMERIC ALPHABETIC 75613	22. STATION CODE CODE	23. INTEGRIE CODE 1	24. MOONS CODE MO DA YE 05 27 19	25. DATE OF BIRTH MO DA YE	26. DATE OF GRADE MO DA YE
20. RITE EXPIRES NO. DA YE		29. SPECIAL REFERENCE 1-CSC 2-TIB 3-NONE		30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE TYPE	32. CORRECTION CANCELLATION DATA MO DA YE	33. SECURITY REQ. NO 34. SEX
35. VET PREFERENCE CODE 0-REG 1-3 PT 2-10 PT		36. SERV COMP. DATE MO DA YE		37. LONG COMP. DATE MO DA YE	38. CAREER CATEGORY CAT. REG PROV TEMP	39. FEDLT. HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-BREAK IN SERVICE 2-BREAK IN SERVICE LESS THAN 3 YEARS 3-BREAK IN SERVICE MORE THAN 3 YEARS		42. STATE CAT CODE		43. FEDERAL TAX DATA FORM EXCUTED 1-YES 2-NO	44. STATE TAX DATA FORM EXCUTED 1-YES 2-NO	45. O.P. APPROVAL A. B. Boos	46. DATE APPROVED 10-30-64
Form 1152 USE PREVIOUS EDITION 5-63							
SECRET							
GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION							

SECRET

DATE PREPARED

2-11-64

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (Last, First, Middle)		3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE REQUESTED			5. CATEGORY OF EMPLOYMENT					
02737		EDDICO, E. W. Jr.		EXCUTED APPOINTMENT (cont'd)			MONTH DAY YEAR			REGULAR					
6. FUNDS		X V TO V		V TO C					7. COST CENTER NO CHARGE AMOUNT			8. LEGAL AUTHORITY (Completed by Office of Personnel)			
				CR TO V		CR TO C		4232-1000-1000							
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION													
EOP Special Affairs Staff CS/CS Development Complement		Washington, D.C.													
11. POSITION TITLE				12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION								
OPO OFFICER				1234567			D								
14. CLASSIFICATION SCHEDULE (GS, FRS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			Recorded by						
GS		0136.01		12 (1)		\$960			CSTD KMR						
18. REMARKS															
<p>*For medical reasons, not to exceed one year. For duration of period that the individual is on sick leave; not to exceed one year. Pending PCS</p>															
<p>1 by Payroll; 1 by Security</p>															
18A. SIGNATURE OF REQUESTING OFFICER				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED					
<i>George L. Jackson</i>				6/6/64		<i>James L. Clement</i>				13 Apr 64					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI							
13	10	NUMERIC 44997	ALPHABETIC SAS	75013	1	13 1 7 19	12 12 63	12 2 63							
25. RETIREES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA	32. CORRECTION CANCELLATION DATA	33. SECURITY REQ. NO	34. SEL									
MO DA YR		CODE	DATA CODE	TYPE	MO DA YR	EOD DATA	U6660	L1							
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FED. HEALTH INSURANCE	40. SOCIAL SECURITY NO										
CODE	MO DA YR	MO DA YR	CAR RES PROV TEMP	CODE	CODE	0-0-0-0	0-0-0-0								
0-BORN 1-1 PT 2-10 PT	6 06	2 1 64	1	1	1	-	-								
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA												
CODE	CODE	NOV EXECUTED CODE	NO TAX EXEMPTIONS	NOV EXECUTED	CODE	NO TAX EXEMPT STATE CODE									
0-NO PREVIOUS SERVICE 1-NO BORN IN SERVICE 2-BREAK IN SERVICE LESS THAN 3 YEARS 3-BREAK IN SERVICE MORE THAN 3 YEARS	1 2-80	C	C	1-YES 2-80											
45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL	47. APPROVED	DATE APPROVED												
1152	USE PREVIOUS EDITION	13 Apr 64	George L. Clement												

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

(B) Not Searched

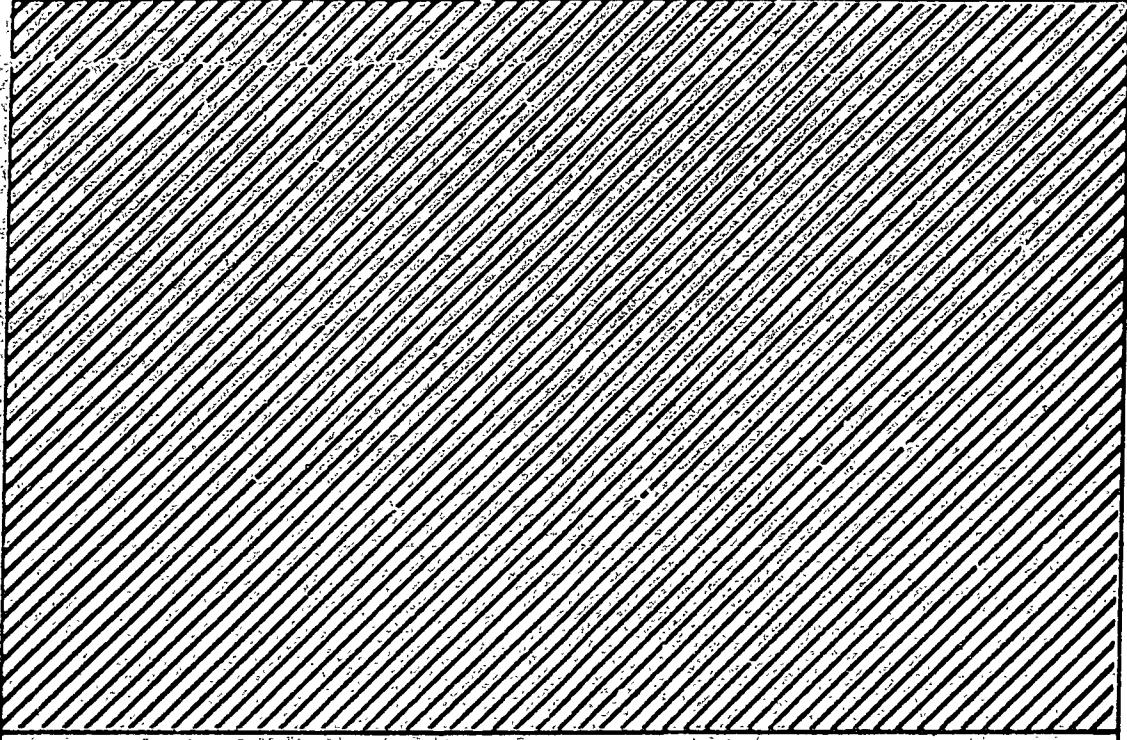
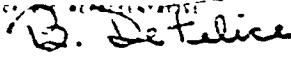
DATE PREPARED

0 APR 1 1964

REQUEST FOR PERSONNEL ACTION

1-SERIAL NUMBER 02763		2-NATURE OF PERSONNEL ACTION Reinstatement		3-EFFECTIVE DATE REQUESTED MONTH YEAR APR 1964		4-CATEGORY OF EMPLOYMENT PRACTIC	
5-FUNDS DOD		6-VIO V DOD		7-COST CENTER NO CHARGEABLE 4352-2001-1000		8-LEGAL AUTHORITY (Completed by Office of Personnel)	
9-ORGANIZATIONAL DESIGNATIONS DOD/Special Missions Staff U. S. Field Forward Operations Station - JMWAVE CI Section				10-LOCATION OF OFFICIAL STATION JMWAVE			
11-POSITION TITLE OPS OFFICER				12-POSITION NUMBER 0733		13-CAREER SERVICE DESIGNATION D	
14-CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15-OCCUPATIONAL SERIES 0135.01		16-GRADE AND STEP 12 (1)		17-SALARY OR RATE \$ 0000	
18-REMARKS 1 cy Security 1 cy Payroll							
19-SIGNATURE OF REQUESTING OFFICIAL Charles C. Thompson OEN/111 U. S. AIR FORCE, USAF/PFT		DATE SIGNED 17 April 64		20-SIGNATURE OF CAREER SERVICE APPROVING OFFICER John G. Miller, Jr.		DATE SIGNED 17 April 64	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21-ACTION CODE 45 10	22-OFFICE CODING NUMERIC	23-STATION CODE ALPHABETIC	24-INTEGEE CODE CODE	25-DATE OF BIRTH MO DA YR 2 5 19	26-DATE OF GRADE MO DA YR NO CA TB	27-DATE OF LES MO DA YR NO CA TB	
28-DATE EXPIRES MO DA YR	29-SPECIAL REFERENCE 1-CSC 2-FICA 3-NONE	30-RETIREMENT DATA CODE	31-SEPARATION DATA CODE CODE	32-CORRECTION CANCELLATION DATA TYPE MO DA YR	EOD DATA	33-SECURITY REG RD REG RD	34-SEA
35-VET PREFERENCE CODE 0-NONE 1-1 PT 2-10 PT	36-SERV COMP DATE MO DA YR	37-LONG COMP DATE MO DA YR	38-CAREER CATEGORY CAR RSP PROV TEMP	39-FEDERAL HEALTH INSURANCE CODE 0-BE YRS 1-10%	40-SOCIAL SECURITY NO HEALTH INS. CODE		
41-PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-10 YEARS IN SERVICE 2-REIN 10 YEARS (NOT 3 YEARS) 3-REIN 10 YEARS (MORE THAN 3 YEARS)		42-LEAVE CAT CODE	43-FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO	44-STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	45-POSITION CONTROL CERTIFICATION R. Kline 4/27/64		O.P. APPROVAL J. F. B. P. R. [Signature] DATE APPROVED 17 April 64

SECRET

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
HIDALGO, BALMES N.	#819 self	60-264
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>30 May 1963</u>. Broken left foot.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF 	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

(When Filled In)

DATE PREPARED

18 April 1963

REQUEST FOR PERSONNEL ACTION					
SERIAL NUMBER	E. NAME (Last, First, Middle)		F. DATE REQUESTED		
G. SIGNATURE OF PERSONNEL ACTION		H. EFFECTIVE DATE REQUESTED		I. CATEGORY OF EMPLOYMENT	
EXCITED APPOINTMENT		04	28	33	
J. FUNDS	V TO V	V TO CP	K. COST CENTER NO. CHARGED		
	CP TO V	CP TO CP	L. LEGAL AUTHORITY (Completed by Office of Personnel)		
M. ORGANIZATIONAL DESIGNATIONS			N. LOCATION OF OFFICIAL STATION		
DD/P/Special Affairs Staff U.S. Field Forward Operations Station - JMWAVE CI Section			JMWAVE		
O. POSITION TITLE			12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION	
OPS OFFICER			0732	D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE	
GS		0136.01	11 (4)	\$ 8840	
18. REMARKS					
<p style="text-align: center;">P - 359</p> <div style="text-align: right; border: 1px solid black; padding: 5px; margin-top: 10px;"> Recorded by CSPD <i>Gma</i> </div>					
19. SIGNATURE OF REQUESTING OFFICER		DATE SIGNED	20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		
Louis W. Armstrong, C/SAS/Pete.		18 Apr 63	L. M. Collins		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
21. OFFICE GEN. NO.	22. STATE CODE	23. STATE CODE	24. STATE CODE	25. STATE OF BIRTH	
13 10	61770 515 9999	2	45 27119	42 17 58 791 6 62	
26. RITE EXPIRES	27. SPECIAL REFERENCES	28. ALIGNMENT DATA	29. SEPARATION DATA CODE	30. CORRECT INSURANCE AT 30 DATA	
40 yrs		1			
31. RET. PREFERENCE	32. TERM. COMM. DATE	33. FEDERAL COMP. DATA	34. CAREER CATEGORY	35. FED. / HEALTH INSURANCE	36. SOCIAL SECURITY NO.
1 - Now 2 - Then 3 - At 30 yrs	07/01/63		1		X
37. PREVIOUS GOVERNMENT SERVICE DATA	38. CLEAR. INT. CODE	39. FEDERAL TAX DATA	40. STATE TAX DATA		
1	8				
41. POSITION CONTROL CERTIFICATION		42. P. APPROVAL		DATE APPROVED	
25 Kearny 4/22/63		<i>Joseph B. Bagley, Jr.</i>		18 Apr 63	

FORM 1152 OBSOLETE EDITION 4-62
GSA GEN. REG. 1152A

SECRET

GROUP I
DEFINITIVE MARKINGS
AND DECLASSIFICATION

SECRET

(This Form is Valid Until 12-31-63)

DATE PREPARED

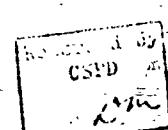
18 April 1963

REQUEST FOR PERSONNEL ACTION						DATE PREPARED																																																																																																				
1. SERIAL NUMBER	2. NAME (Last-First-Middle)																																																																																																									
027630	HILLMAN, R. N., Jr.																																																																																																									
3. NATURE OF PERSONNEL ACTION RESIGNATION						4. EFFECTIVE DATE REQUESTED	5. CATEGORY OF EMPLOYMENT																																																																																																			
						MONTH DAY YEAR Apr 27 63	REGULAR																																																																																																			
6. FUNDS		X V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. LEGAL AUTHORITY (Completed by Office of Personnel)																																																																																																				
		CF TO V	CF TO CF	3012-1000-1000																																																																																																						
9. ORGANIZATIONAL DESIGNATIONS DEP Special Affairs Staff FI/CI Branch						10. LOCATION OF OFFICIAL STATION Washington, D.C.																																																																																																				
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0682	13. CAREER SERVICE DESIGNATION D																																																																																																			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES GS		16. GRADE AND STEP 0136.01	17. SALARY OR RATE 11 (4)	18. REMARKS																																																																																																				
<p style="text-align: right;">Recorded by CSRD <i>[Signature]</i></p> <p>1 cy Security</p> <p>19. SIGNATURE OF REQUESTING OFFICER <i>Louis W. Armstrong</i> LOUIS W. ARMSTRONG, GS-15, Etc. 18 Apr 63</p> <p>20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Walter P. Johnson</i> 18 Apr 63</p> <p>21. SIGNATURE OF APPROVING OFFICER <i>[Signature]</i></p> <p>22. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL</p> <table border="1"> <tr> <td>IN ACTION CODE</td> <td>21. OFFICE CODE</td> <td>22. STATE IN WHICH APPLIED</td> <td>23. WORKING CODE</td> <td>24. PAYMASTER IN CHARGE OF PAY</td> <td>25. DATE OF PAY</td> <td>26. PAY PERIOD</td> </tr> <tr> <td>45/10</td> <td>NUMBER ALPHABETIC</td> <td>UN</td> <td>CODE</td> <td>1 - 05 2 - 17</td> <td>M 24 66</td> <td>W 24 67</td> </tr> <tr> <td>27. PREV. EXP. RES.</td> <td>28. SPILLER REFERENCE</td> <td>29. RET. REIMB. DATA</td> <td>30. SEPARATION</td> <td>31. SEPARATION PAY AND ALLOWANCE DATA</td> <td>32. SICK PAY</td> <td>33. SEA</td> </tr> <tr> <td>PER. DA. YR.</td> <td></td> <td></td> <td>DATA CODE</td> <td>DATA CODE</td> <td>200. 00</td> <td>200. 00</td> </tr> <tr> <td>34. VIT. PREFERENCE</td> <td>35. SERV. COMM. DATE</td> <td>36. LIVING COMM. DATE</td> <td>37. CAREER CATEGORIES</td> <td>38. REG. / HEALTH. ALLOWANCE</td> <td>39. SOCIAL SECURITY</td> <td></td> </tr> <tr> <td>CODE</td> <td>Y - HOME</td> <td>N - GS</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td></td> </tr> <tr> <td></td> <td>Y - HOSP.</td> <td>N - GS</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td></td> </tr> <tr> <td></td> <td>Y - COMM.</td> <td>N - GS</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td></td> </tr> <tr> <td>40. PREVIOUS GOVERNMENT SERVICE DATA</td> <td>41. PREVIOUS COMM. DATA</td> <td>42. PREVIOUS COMM. DATA</td> <td>43. STATE TAX DATA</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CODE</td> <td>Y - NO PREVIOUS SERVICE</td> <td>Y - NO COMM. IN SERVICE</td> <td>Y - COMM. IN SERVICE LESS THAN 5 YEARS</td> <td>Y - COMM. IN SERVICE 5 YEARS OR MORE</td> <td>CODE</td> <td>STATE TAX CODE</td> </tr> <tr> <td></td> <td>Y - NO COMM.</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td>Y - COMM.</td> <td></td> </tr> <tr> <td></td> <td>Y - COMM.</td> <td></td> </tr> <tr> <td>44. POSITION CONTROL CERTIFICATION</td> <td>45. O.P. APPROVAL</td> <td>46. DATE APPROVED</td> <td colspan="4"></td> </tr> <tr> <td colspan="6"><i>W. K. Armstrong</i></td> <td><i>Ruth G. Johnson</i></td> <td>May 1 63</td> </tr> </table>								IN ACTION CODE	21. OFFICE CODE	22. STATE IN WHICH APPLIED	23. WORKING CODE	24. PAYMASTER IN CHARGE OF PAY	25. DATE OF PAY	26. PAY PERIOD	45/10	NUMBER ALPHABETIC	UN	CODE	1 - 05 2 - 17	M 24 66	W 24 67	27. PREV. EXP. RES.	28. SPILLER REFERENCE	29. RET. REIMB. DATA	30. SEPARATION	31. SEPARATION PAY AND ALLOWANCE DATA	32. SICK PAY	33. SEA	PER. DA. YR.			DATA CODE	DATA CODE	200. 00	200. 00	34. VIT. PREFERENCE	35. SERV. COMM. DATE	36. LIVING COMM. DATE	37. CAREER CATEGORIES	38. REG. / HEALTH. ALLOWANCE	39. SOCIAL SECURITY		CODE	Y - HOME	N - GS	Y - COMM.	Y - COMM.	Y - COMM.			Y - HOSP.	N - GS	Y - COMM.	Y - COMM.	Y - COMM.			Y - COMM.	N - GS	Y - COMM.	Y - COMM.	Y - COMM.		40. PREVIOUS GOVERNMENT SERVICE DATA	41. PREVIOUS COMM. DATA	42. PREVIOUS COMM. DATA	43. STATE TAX DATA				CODE	Y - NO PREVIOUS SERVICE	Y - NO COMM. IN SERVICE	Y - COMM. IN SERVICE LESS THAN 5 YEARS	Y - COMM. IN SERVICE 5 YEARS OR MORE	CODE	STATE TAX CODE		Y - NO COMM.	Y - COMM.	Y - COMM.	Y - COMM.	Y - COMM.			Y - COMM.		44. POSITION CONTROL CERTIFICATION	45. O.P. APPROVAL	46. DATE APPROVED					<i>W. K. Armstrong</i>						<i>Ruth G. Johnson</i>	May 1 63				
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<i>W. K. Armstrong</i>						<i>Ruth G. Johnson</i>	May 1 63																																																																																																			

RZRI 25 APR 63

NOTIFICATION OF PERSONNEL ACTION										
DEF.										
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)									
027630	MIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION										
RESIGNATION										
4. FUNDS ➤ <input checked="" type="checkbox"/>	V TO V	V TO CP	5. EFFECTIVE DATE		6. CATEGORY OF EMPLOYMENT					
	EE TO V	EE TO CP	04	27	63	REGULAR				
7. COST CENTER NO. (CHARGEABLE)										
3232 1000 1000										
8. CSC OR OTHER LEGAL AUTHORITY										
10. LOCATION OF OFFICIAL STATION										
11. POSITION TITLE										
OPS OFFICER										
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS		0136.01		11 4		8840				
18. REMARKS										
SIGNATURE OR OTHER AUTHENTICATION										

SECRET

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
SERIAL NUMBER 027630	NAME / LAST FIRST MIDDLE [REDACTED]			11 December 1963		
2. NATURE OF PERSONNEL ACTION PROMOTION			3. EFFECTIVE DATE REQUESTED NOV 1964		4. CATEGORY OF EMPLOYMENT REGULAR	
5. FUNDS	V TO V	X TO CF	X TO CF	COST CENTER NO. CHARGED 4132-2001-1000	6. LEGAL AUTHORITY (Completed by Office of Personnel) DCP	
7. ORGANIZATIONAL DESIGNATIONS Special Affairs Staff U. S. Field Forward Operations Station - JKAFF CI Section			8. LOCATION OF OFFICIAL STATION JM WAVE			
9. POSITION/TITLE OPS OFFICER			10. POSITION NUMBER (07)	11. GRADE AND STEP 12 (1)	12. CAREER SERVICE DESIGNATION D	
13. CLASSIFICATION SCHEDULE (GS, LD, PCS.) GS (8)	14. OCCUPATIONAL SERIES 0136.01		15. SALARY OR RATE \$ 9475			
16. REMARKS ORVILLE DAWSON, C/SAS Pers. 						
17A. SIGNATURE OF REQUESTING OFFICER Orville L. Dawson			DATE SIGNED 12/11/63	18A. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]		DATE SIGNED 12/12/63
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19. ACTION CODE 22 1C 44270		20. GRADE REQUESTED 800	21. GRADE STEP 000	22. PAY RATE 1	23. PAY RATE 2	24. PAY RATE 3
25. PAY BASIS WY, GA, TA		26. SPECIAL REFERENCE 1. GS 2. CIIS 3. CSC	27. RESPONSIBILITY 1. DPO 2. CPO 3. CSC	28. SEPARATION 1. NO 2. YES	29. APPROVAL DATE 12/12/63	30. APPROVAL DATE 12/12/63
31. HT. PREFERENCE CSC		32. SERV. COMM. DATA 1. None 2. None 3. None	33. CARRIER CARRIER 1. CSC 2. CIIS 3. CSC	34. REL. / DATA 1. None 2. None	35. CSC. RE. SEL. NUMBER 1. None 2. None	
36. PREVIOUS GOVERNMENT SERVICE DATA CSC		37. PAY RATE 1. CSC 2. CIIS 3. CSC	38. PAY RATE 1. CSC 2. CIIS 3. CSC	39. PAY RATE 1. CSC 2. CIIS 3. CSC	40. PAY RATE 1. CSC 2. CIIS 3. CSC	
41. POSITION CONTROL CERTIFICATION [Signature]				42. O.P. APPROVED [Signature]	43. DATE APPROVED 12/12/63	

SECRET

(BASIC FORM 1152)

REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1. SERIAL NUMBER	2. NAME (Last-First-Middle)							6-Nov-1962	
C27630	JOHN JAMES ALLEN, JR.								
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT			
INCREASE PAY RATE				MONTH	DAY	YEAR	REGULAR		
				11	10	62			
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGE		8. LEGAL AUTHORITY (Completed by CSPD)			
		CP TO V	CP TO CP	3801100-3000		Office of Personnel			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
2 A DIP Task Force W PC-CI Branch				Wright-Patterson AFB, OH					
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
DPS OFFICER				00000000		O-92			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS 000		00000000		O-92 4		\$3840			
18. REMARKS				Recorded By CSPD					
From DMP/JR/PI/ADM, At, 2nd. 1st, Rm. 600, 6041 Tracy				Sgt. 3C1 Bemis, Jr. Philip C. Bemis, Jr./Tech. Ofc.					
19. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED
Hansie Armstrong, 67862				67862		Col. R. L. Clark			67862
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
21. ACTION CODE	22. EMPLOYEE CODE	23. OFFICE CODING	24. STATION CODE	25. INTERVIEW CODE	26. MOBIL. CODE	27. DATE OF BIRTH	28. DATE OF GRADE	29. DATE OF LEI	
37	10	61300 TFW			1	5 27 19			
30. RETIREMENT DATA	31. SEPARATION DATA	32. CORRECTION/CANCELLATION DATA	33. SECURITY INFO. NO.	34. SSN					
NO. OF yrs.	SPECIAL REFERENCE	DATA CODE	TYPE	NO. DA. YR.	NO. DA. YR.				
1 - CSC 3 - FICA 4 - RIF	CODE								
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO.				
CODE	MO DA YR	MO DA YR	CAR/RES PROV/TEMP	CODE	O - DRIVER 1 - PASSENGER	HEALTH INS. CODE			
1 - POW 2 - CAPT 3 - 10 PT									
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE					
CODE	1 - NO PREVIOUS SERVICE 2 - NO BREAK IN SERVICE 3 - BREAK IN SERVICE (LESS THAN 3 YRS) 4 - BREAK IN SERVICE (MORE THAN 3 YRS)	FEDERAL TAX DATA					STATE TAX DATA		
		FORM ISSUED CODE	ALL TAX EXEMPTIONS		FORM ISSUED	CODE	REG. TAX EXEMPT.	STATE CODE	
		1 - 1962 2 - 1963			1 - 1962 2 - 1963				
43. POSITION CONTROL CERTIFICATION					44. O.P. APPROVAL			DATE APPROVED	
3.7 Kearney 11/19/62					EUGENE J. KEARNEY 11/19/62			11/19/62	

SECRET

(This form is to be filled in by)

DATE PREPARED

4 January 1962

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (Last-First-Middle)			3. EFFECTIVE DATE REQUESTED			4. CATEGORY OF EMPLOYMENT		
027630	HIDALGO, RAMES M. JR.			MONTH	DAY	YEAR	REGULAR		
5. NATURE OF PERSONNEL ACTION REASSIGNMENT				6. COST CENTER NO. CHARGEABLE			7. LEGAL AUTHORITY (Completed by Office of Personnel)		
8. FUNDS	X	V TO V	V TO CP	2235 1000 1000					
9. ORGANIZATIONAL DESIGNATIONS DDP WH SECTION A PLANS & OPERATIONS STAFF				10. LOCATION OF OFFICIAL STATION			WASHINGTON, D. C.		
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER BR-641			13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, ER, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		11 3		\$6,000			
18. REMARKS FROM: DDP/WH/L/FT-CI/1681									
18A. SIGNATURE OF REQUESTING OFFICIAL P. C. BOWERS C/WH/Personnel			DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER R. Hickey			DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING	22. STATION CODE	23. UNIT/TYPE CODE	24. PAY RATE CODE	25. DATE OF PAY	26. DATE OF PAY	27. DATE OF PAY	
22	C	NUMERIC	ALPHABETIC		1	0512719	00	00	
20. PAY EXPIRES		21. SPECIAL REFERENCE	22. RETIREMENT DATA	23. SEPARATION PAYMENT DATA			24. SECURITY REG. NO.	25. SEC. SER. NO.	
MO. DA. YR.			1 - 152 3 - 4128 5 - 8786	CODE	1 - 152 3 - 4128 5 - 8786	MO. DA. YR.			
35. VET. PREFERENCE		36. SERV. COMM. DATE	37. LONG COMM. DATE	38. MIL. SERV. END DATE	39. FEAT / HEALTH INSURANCE	40. SOCIA SECURITY NO.			
CODE 0 - NO 1 - 5 PT 2 - 10 PT		MO. DA. YR.	MO. DA. YR.	1 - 152 2 - 40	0 - 000 1 - 000 2 - 000	0 - 000 1 - 000 2 - 000	0 - 000 1 - 000 2 - 000	0 - 000 1 - 000 2 - 000	
41. PREVIOUS GOVERNMENT SERVICE DATA		42. PREV. CAT. CODE	43. --> 44. TAX DATA			45. --> 46. APPROVAL			
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 12 MO. 3 - BREAK IN SERVICE MORE THAN 12 MO.			FROM PREVIOUS 1 - YES 2 - NO	TO PREVIOUS 1 - YES 2 - NO	FROM PREV. 1 - YES 2 - NO	CODE 0 - NO 1 - YES 2 - NO	CODE 0 - NO 1 - YES 2 - NO	CODE 0 - NO 1 - YES 2 - NO	
45. POSITION CONTROL CERTIFICATION		46. O.P. APPROVAL			47. DATE APPROVED				
1/16/62 J.M.		R. Hickey							

SECRET

(When Filled In)

DATE PREPARED

8 August 1961

REQUEST FOR PERSONNEL ACTION						
1. SERIAL NUMBER	2. NAME (Last, First, Middle)					
027630	HIDALGO, B. N., Jr.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT (And Transfer to Vouchered Funds)				4. EFFECTIVE DATE REQUESTED	5. CATEGORY OF EMPLOYMENT	
				MONTH DAY YEAR 19 61	REGULAR	
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE	8. LEGAL AUTHORITY (Completed by Office of Personnel)	
		X - CP TO V	CP TO CP	2635-5000-8021		
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DDP Branch 4 PI-CI Sec.				10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE OPS OFFICER (E)				12. POSITION NUMBER 0681	13. PCS CONTROL NO.	14. CAREER SERVICE DESIGNATION D
15. CLASSIFICATION SCHEDULE (E.G. LD, SEC.) CS (12)		16. OCCUPATIONAL SERIES 0136.01		17. GRADE AND STEP 11 (3)	18. SALARY OR RATE \$ 8,030	
19. REMARKS From: DDP/WH, Br. 4, #0626						
20. SIGNATURE OF REQUESTOR (FICIAL) HERBERT V. JULY, CH/WH/47 Pers.				21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER R. Reedy		
22. SIGNATURE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
23. PREVIOUS EMPLOYMENT DATA		24. DATE OF BIRTH	25. DATE OF DEATH	26. DATE OF SEPARATION	27. DATE OF LAST PAY	
CODE	CODE	CODE	CODE	CODE	CODE	CODE
16	16 64152	11 14	75013	1	05 2719	
28. DATE OF RE-ENLISTMENT		29. DATE OF SEPARATION	30. DATE OF DISCHARGE	31. SECURITY REG. NO.	32. SECURITY REG. NO.	
CODE	CODE	CODE	CODE	CODE	CODE	CODE
33. STATE OF RESIDENCE		34. STATE OF COMB. CODE	35. STATE OF COMB. CODE	36. FEUDAL STATE IN JAPAN	37. SOCIAL SECURITY NO.	
CODE	CODE	CODE	CODE	CODE	CODE	CODE
38. PREVIOUS CIVILIAN SERVICE DATA		39. STATE TAX CODE	40. STATE TAX CODE	41. STATE TAX CODE	42. STATE TAX CODE	
CODE	CODE	CODE	CODE	CODE	CODE	CODE
43. PREVIOUS MILITARY SERVICE DATA		44. STATE TAX CODE	45. STATE TAX CODE	46. STATE TAX CODE	47. STATE TAX CODE	
CODE	CODE	CODE	CODE	CODE	CODE	CODE
48. POSITION CONTROL CERTIFICATION 7/2 Kearney 08/1/61		49. O.P. APPROVAL R. Reedy				

~~SECRET~~

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vot. Prefer.	5. Sex	6. Co-FOU
	HIDALGO, BALMES M., JR.	Mo. Da. Yr.	Normal Code S P 1	M	Mac. Da. Yr.
7. SCD	8. CSC Rec'd.	9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr.	Yes - 1 Code No - 2		Mo. Da. Yr.	Yes - 1 Code No - 2	Mo. Da. Yr.

2

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP/OPR OPERATIONS SCHOOL COVERT TRAINING	Code	15. Location Of Official Station WASH., D. C.	Station Code		
16. Dept. - Field Dept : Code USMld : Frqn :	17. Position Title INSTRUCTOR OPERATIONS	18. Position No. 1014	19. Serv. 20. Occup. Series GS 1211.50		
21. Grade & Step 11 2	22. Salary Or Rate \$ 7270	23. SD D	24. Date Of Grade 03/17/54	25. PSI Due 13/11/61	26. Appropriation Number 0125-2533

ACTION

27. Nature Of Action REASSIGNMENT	Code	28. EH. Date Mo. Da. Yr. 06/26/60	29. Type Of Employee REGULAR	Code	30. Separation Date 7/1
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3A

PRESENT ASSIGNMENT

31. Organizational Designations DDP WH BRANCH 4	Code	32. Location Of Official Station WASH., D. C.	Station Code
33. Dept. - Field Dept : Code USMld : Frqn :	34. Position Title OPS OFFICER	35. Position No. BA-626	36. Serv. 37. Occup. Series GS 0136.01
38. Grade & Step 11 2	39. Salary Or Rate \$ 7270	40. SD D	41. Date Of Grade Mo. Da. Yr. 42. PSI Due Mo. Da. Yr. 43. Appropriation Number 0135 1000 1000

SOURCE OF REQUEST

A. Requesting Agency And Title P. C. POWERS WH/PERSONNEL OFFICER	C. Request Approved By (Signature And Title) ELMER R. WINGROVE 17 Jun 60
B. For Additional Information Call (Name & Telephone Ex.) JOHN WASHINGO X8242	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>L. K. Kelly</i>	6-21-60	D. Placement		
B. Pos. Control	<i>L. K.</i>	6-23-60	E.		
C. Classification			F. Approved By	<i>W. L. Gandy</i>	6-23-60

Remarks

Mr. E. R. Wingrove 6/24/60
2 copies to Security. 1 Loss Notice.

~~SECRET~~

SECRET

(When Filled In)

DATE PREPARED Mo. Da. Yr. 5 20 59			REQUEST FOR PERSONNEL ACTION						V-16 V XX	V-16 UV XX	UV-16 V XX	UV-16 UV XX	
1. Serial No. SCD			2. Name (Last-First-Middle) HIDALGO, Palma N., Jr.			3. Date of Birth Mo. Da. Yr. 5 27 19		4. Ver. Prof. None-0 Code 1 P-2		5. Sex M		6. CS - EOD Mo. Da. Yr.	
			7. CSC Refno. 8. CSC Or Other Legal Authority			10. Appnt. Affidav. II. FEGLI		11. FEGLI		12. LCD		13. MIL SERV CREDITS LCD	
Mo. Da. Yr. Yes - 1 Code No - 2						Mo. Da. Yr. Yes - 1 Code No - 2		Mo. Da. Yr. Yes - 1 Code No - 2		Mo. Da. Yr. Yes - 1 Code No - 2			

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP/WH Branch III Central America Section			Code	15. Location Of Official Station Washington, D. C.			Station Code			
16. Dept.-Field Area Ops Officer	17. Position Title				18. Position No. 0486	19. Serv.	20. Occup. Series GS 0136.01			
Dept. Usfld. D	Code	18. Position No. 0486	19. Serv.	20. Occup. Series GS 0136.01	21. Grade & Step 11 1	22. Salary Or Rate. \$ 7,030	23. SD D	24. Date Of Grade 03 17 58	25. PSI Due 09 20 59	26. Appropriation Number 8-3500-20

ACTION

27. Nature Of Action Reassignment + Transfer to Confidential Grade	Code	28. Eff. Date 06 16 59	29. Type Of Employee Regular	Code	30. Separation Date 01
--	------	----------------------------------	--	------	----------------------------------

PRESENT ASSIGNMENT

31. Organizational Designations DDS/OTR Operations School Covert Training			Code	32. Location Of Official Station 1172 Washington, D. C.			Station Code 75C13				
33. Dept.-Field Instructor Operations	34. Position Title				35. Position No. 1014	36. Serv.	37. Occup. Series GS 1711.50				
Dept. Usfld. D	Code	34. Position Title Instructor Operations	35. Position No. 1014	36. Serv.	37. Occup. Series GS 1711.50	38. Grade & Step 11 1	39. Salary Or Rate. \$ 7,030	40. SD D	41. Date Of Grade Mo. Da. Yr.	42. PSI Due Mo. Da. Yr.	43. Appropriation Number 9-7500-30-018

SOURCE OF REQUEST

A. Requested By (Name And Title) Mr. Glen Moorhouse, G/OS	C. Request Approved By (Signature And Title) Matthew Baird Director of Training
B. For Additional Information Call (Name & Telephone Ext.) Mr. Elmer R. Wingrove, x-3078	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	<i>11 JUN 59</i>	D. Placement		
B. Pos. Control	<i>[Signature]</i>	<i>11 JUN 59</i>	E.		
C. Classification	<i>[Signature]</i>	<i>11 JUN 59</i>	F. Approved By	<i>C. Powell</i>	<i>11 JUN 59</i>

Remarks

One copy forwarded to UNVoucherED Payroll. Two copies forwarded to Security.

Recorded by CSPD

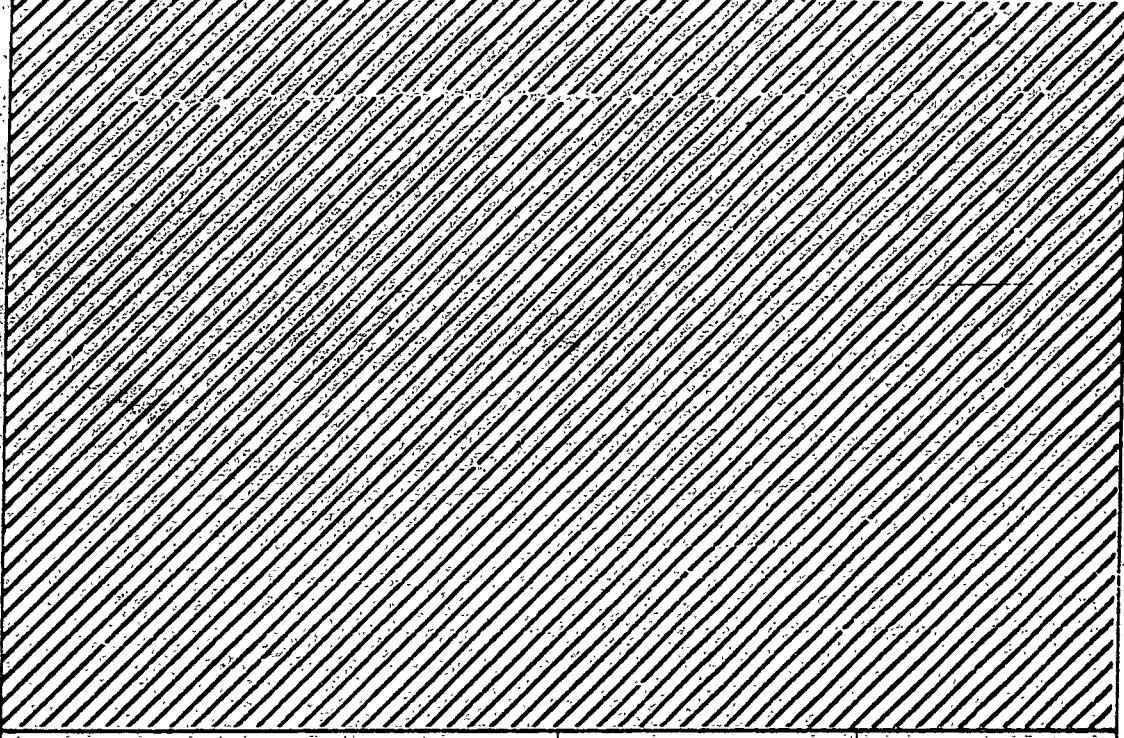
FORM 1152a (USE PREVIOUS EDITION)
1152a (1957)

1152a (1957)

SECRET Security Approval Card 1152a (1957) 1152a (1957)

1152a (1957) 1152a (1957)

SECRET
(This page is secret)

		
NAME OF EMPLOYEE (LAST-FIRST-MIDDLE) HEDALGO, Ermes	DATE OF BIRTH 1940	CASE OR CLAIM NUMBER 58-112
<p>There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on <u>1 Oct 57</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE 24 Sept 58	SIGNATURE OF BCO REPRESENTATIVE <i>[Signature]</i>	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRETClassification According
To Content**REQUEST FOR PERSONNEL ACTION**

1. Serial No.	2. Name (Last, First, Middle)			3. Date Of Birth	4. Vet. Prefer.	5. Sex	6. CS. EOD
12707	MR. BALMIS N. HIDALGO, Jr.			Mo 5 Da 27 Yr 19	No. 0 Code S. P-1	I	Mo 2 Da 17 Yr 51
7. SCD	8. CSC Rec'd			9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI	12. LCD
Mo 7 Da 16 Yr 46	Yes - 1 Code No - 2			504194431	Mo 3 Da 10 Yr 56	Yes - 1 Code No - 2	Mo 1 Da 2 Yr 21

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station		Station Code
16. Dept.- Field	17. Position Title		18. Position No.	19. Serv.	20. Occup. Series
Dept - I Code Usfd - I Fran -					
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
	\$		Mo 3 Da 17 Yr 56	Mo 9 Da 26 Yr 57	

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
Excepted Appointment	13	Mo 3 Da 17 Yr 56	Regular	C1	

PRESENT ASSIGNMENT

31. Organizational Designations		Code	32. Location Of Official Station		Station Code
DDP/WH Branch III Central America Section		4613	Washington, D.C.		
33. Dept.- Field	34. Position Title		35. Position No.	36. Serv.	37. Occup. Series
Dept - X Code Usfd - Area Ops Officer			# BA-166-11	GS	0136.01
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11-i	\$ 6390	D	Mo 3 Da 17 Yr 56	Mo 9 Da 26 Yr 57	8-3500-20

SOURCE OF REQUEST

A. Requested By (Name And Title) P.C. BOERS WH Personnel Officer	C. Request Approved By (Signature And Title)
B. For Additional Information Call (Name & Telephone Ext) JOHN WASHINKO X 8242	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	3/12/58	D. Placement	<i>[Signature]</i>	3/14/58
B. Pos. Control	<i>[Signature]</i>	3/11/58	E.	<i>[Signature]</i>	
C. Classification			F. Approved By	<i>[Signature]</i>	10 APR 1958

Remarks

Subject is presently engaged as a Contract Employee with the WH Division.
* For slotting purposes Only.

*Approved for DOD purpose
K.W. Johnson
SSA [Signature]*

STANDARD FORM 52 FEDERAL PAYROLL U.S. GOVERNMENT PERSONNEL APPROVED FOR USE 1950 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. - Miss - Mrs. - One given name, initial(s), and surname)		2. DATE OF BIRTH	3. REQUEST NO.																		
Mr. Balme N. HIDALGO, Jr.		27 May 1919	8 July 55																		
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment; promotion, separation, etc.)		5. EFFECTIVE DATE A. PROPOSED	6. C.S. OR OTHER LEGAL AUTHORITY																		
Excepted Appointment		B. APPROVED:																			
7. POSITION (Specify whether civilian, change grade or title, etc.)																					
FROM—		8. POSITION TITLE AND NUMBER 9. SERVICE GRADE AND SALARY	TO— 10. I. O. (FI) BAF-277 GS-0136.51-11, \$6390.00 p.a., K DDP/WH Panama City, Panama																		
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		11. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL																		
A. REMARKS (Use reverse if necessary) <p>Subject is presently a contract employee with Project HYPOTHESIS.</p>																					
B. REQUESTED BY (Name and title) <i>James J. Schmitz</i> , CNH		C. REQUEST APPROVED BY Signature: _____ Title: _____																			
D. FOR ADDITIONAL INFORMATION (Name and telephone extension) P. C. Bowens, X3692																					
E. VETERAN PREFERENCE <table border="1"> <tr> <td>NAME</td> <td>WWII</td> <td>OTHER</td> <td>S PT</td> <td>13 POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>DISAB. OTHER</td> </tr> </table>		NAME	WWII	OTHER	S PT	13 POINT					DISAB. OTHER	F. POSITION CLASSIFICATION ACTION <table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>I.A.</td> <td>REAL</td> </tr> <tr> <td>.</td> <td>.</td> <td>.</td> <td>.</td> </tr> </table>		NEW	VICE	I.A.	REAL
NAME	WWII	OTHER	S PT	13 POINT																	
				DISAB. OTHER																	
NEW	VICE	I.A.	REAL																		
.	.	.	.																		
G. RACE SLEX: M W		H. APPROPRIATION FROM: <i>6-3525-56-051</i>																			
I. TO:		J. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <i>Yes</i>																			
		K. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) STATE: <i>SD: DO 1/26</i>																			
L. STANDARD FORM 50 REMARKS <p style="text-align: center;"><i>17 1/26</i></p>																					
M. CLEARANCES		N. INITIAL OR SIGNATURE	O. DATE																		
P. APPROVED BY <i>Robert A. Stue, Jr. 7/28/55</i>		Q. REMARKS																			
R. CLERICAL																					

SECRET

(Form 1416-1)

1. PERSONAL ID NO. 027630		BIOGRAPHIC PROFILE (PART I) (CD) 16 Jul 1976			
2. NAME (Last-First-Middle) HUMES, B. N., Jr.		3. SEX M	4. DATE OF BIRTH 27 May 1910	5. LENGTH OF COM. DATES 1970-1976	
6. MARITAL STATUS Widowed	7. DEPENDENTS (Excl. Chd.) 0	8. YEAR OF BIRTH 2 1914 1892	9. NATURALIZATION DATES PR Puerto Rico NA		
10. CAREER STATUS STAFF ALAVI	11. MEMBERSHIP Year 1961	12. OTHER STATUS	13. LAST MO. PAY Jul 1967	14. DUAL POS. Dpt Only	
15. CHECKED SECRET	16. PREVIOUS SERVICE X	17. GRADE O-6	18. ACTIVE DUTY WITH CIA CAT-3	19. RELEASE NO. MIL SEC. CAT-3	
20. APPROVAL DATE None	21. PROFESSIONAL TEST DATE Feb 1958	22. LANGUAGE PROFICIENCY TEST DATE None			
23. MILITARY SERVICE: US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Depot; Jersey City, NJ - Inspector 1945-47 Francis H. Lazzari Co (Food Wholesaler), NYC - Corres. Valence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951-52 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
24. NON-CIA EDUCATION: High School Graduate 1945-46 New York University - Foreign Trade, Business Law					
25. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Testcd)	Portuguese - R Inform; W, P, S, U None (Oct 1959); T None - May 1958 Spanish - R High; W Inform; P, S, U Native (Nov 1959); Translate, Interpret - May 1958				
26. AGENCY SPONSORED TRAINING 1958 Comm Party Org & Ops 1958 CI Famil 1958 Info Rptng, Rpts & Rpts 1958 Operations 1958 Int'l Orient 1959 Picks & Locks 1959 Audio Surveil Mgmt 1966 Undetermined Entry (Cont)					
27. CIA EMPLOYMENT HISTORY SINCE 13 SEPT 1947 (Personnel Actions, Military Orders, and Detainee Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	RD	ORGANIZATION & COUNTRY, TITLE (If any)	LOCATION
Mar 1958	Pob 1952 - Mac 1958, Contract Employee for DDP/WI/Project HYDROGEN	11	D	DDP/WI-III/Control Americas	Panama
	Area Ops Off 0136.01	11	D	DDP/WI-III/Control Americas	Hq
	Jan - Feb 1959, TDY Mexico end Guatemala				
Jun 1959	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covered Trng	Hq
Jun 1960	Ops Off 0136.01	11	D	DDP/WI-4	"
AUG 1961	" "	11	D	DDP/WI-4/CI Sec	"
Jan 1962	" "	11	D	DDP/SAS/Plans & Ops Sec/Sec & Ops	"
Apr 1963	" "	11	D	DDP/SAS/US Flt/Forward, Ops Sec	JAPAN
Dec 1963	" "	12	D	" " " " "	"
Apr 1964	" "	12	D	DDP/SAS/CS/CS Dev Corp	Hq
Nov 1964	" "	12	D	DDP/SAS/CI Staff/Ops	"
May 1965	" "	12	D	DDP/WI/C/Genl Ops Dir	"
Dec 1965	" "	12	D	DDP/WI-2/Panama	"
28. DATE REVIEWED 22 Jun 1976	29. PROFILE REVIEWED BY John / JSA	30. ITEMS 1-10 REVIEWED & VERIFIED BY DIRECTOR			31. FOR 1960
32. FORM 1200 (PART I) USE PREVIOUS EDITIONS 08-57					

SECRET

PROFILE

SECRET

(When Filled In)

REF ID: SERIAL NO. 022630	BIOGRAPHIC PROFILE (PART 2)	
NAME: (Last-First-Middle) MURKIN, P. N., Jr.		DATE OF BIRTH 27 May 1919
23. SUMMARIES OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS		
 <p>A black and white portrait photograph of a man with short, light-colored hair, wearing a suit jacket, white shirt, and tie. Below the photo is a name tag that reads "MURKIN, P. N., Jr."</p>		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION Appreciation 1948 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.		
27. DATE REVIEWED 23 Jun 1969	28. PROFILE REVIEWED BY bms/ots	

FORM NO. 1200 (PART 2) REPLACES FORM 1000 (PART 2) SECRET
1 FEB 57 WHICH IS OBSOLETE.

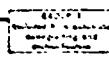
PROFILE

148

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 027630	
SECTION A					GENERAL	
1. NAME Hidalgo, Balme, N.	2. DATE OF BIRTH 05/27/19	3. SEX M	4. GRADE GS-12	5. SD D		
6. OFFICIAL POSITION TITLE Ops Officer	7. OFF/ON DAY OF ASSIGNMENT DDP/RH/2	8. CURRENT STATION HQS				
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER/PROVISIONAL (See Instructions - Section C)	10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISION REASSIGNMENT EMPLOYEE					
11. DATE REPORT DUE IN O.P. 31 January 1969	12. REPORTING PERIOD (From To) 1 January 1968 - 31 December 1968					
SECTION B PERFORMANCE EVALUATION						
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						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1 Desk Case Officer for Panama City Station FI operations. Prepares cables and dispatches to Panama City and other Stations and internal Headquarters correspondence.						RATING LETTER P
SPECIFIC DUTY NO. 2 Conducts required coordination with other offices within the agency.						RATING LETTER P
SPECIFIC DUTY NO. 3 Supervises and/or maintains files and regulates indexing relating to his cases.						RATING LETTER P
SPECIFIC DUTY NO. 4						RATING LETTER
SPECIFIC DUTY NO. 5						RATING LETTER
SPECIFIC DUTY NO. 6						RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER
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



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

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the Panama Desk this officer provides the valuable service of operational history and continuity; he served six years in the Station and has been on the desk for three.

Continued

SECTION D**CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

9 Jan 1969

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

4

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

9 January 1969

C/WII/2/P

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

9 JAN
1969

C/WII/2

Edwin M. Terrell~~SECRET~~

~~SECRET~~**SECTION C Continued****Hidalgo, Balme N.**

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

In sum, Mr. Hidalgo serves a satisfactory function on the Panama Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

~~SECRET~~

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630			
SECTION A							
GENERAL							
1. NAME HIDALGO, Balme N., Jr.		(Last) (First) (Middle)		2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12	5. SD D
6. OFFICIAL POSITION TITLE Ops Officer				7. OFF/ DIV/ BN OF ASSIGNMENT DDP/WH/2	8. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify) 10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR ANNUAL REASSIGNMENT EMPLOYEE SPECIAL (Specify)				11. DATE REPORT DUE IN O.P. 13 JULY 1967	12. REPORTING PERIOD (From To) 13 JULY 1966 to 12 JUN 1967		
SECTION B							
PERFORMANCE EVALUATION							
<p>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.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1		Responsible for all FI/CI Projects for the Desk				RATING LETTER S	
SPECIFIC DUTY NO. 2		Initiates, prepares and coordinates all operational communications to the field on FI/CI matters				RATING LETTER P	
SPECIFIC DUTY NO. 3		Prepares project renewals, studies and papers on FI/CI matters				RATING LETTER P	
SPECIFIC DUTY NO. 4		Translates Spanish language material for the Branch				RATING LETTER O	
SPECIFIC DUTY NO. 5		Coordinates FI/CI matters for the Desk with other Hqs components				RATING LETTER S	
SPECIFIC DUTY NO. 6		Occasionally handles visiting indigenous assets				RATING LETTER S	
OVERALL PERFORMANCE IN CURRENT POSITION							
<p>31 MAR 1967</p> <p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>							
RATING LETTER S							

SECRET

SECTION C

NARRATIVE COMMENTS

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

Comment by Mr. Tsikerdanos, previous supervisor: 151 F11 '67

Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.

Comments by Present Supervisor:

I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.

Ken Knaus

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

10 March 67

Baldemar Hidalgo

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

11

DATE

OFFICIAL TITLE OF SUPERVISOR

9 MAR
1967

TYPED OR PRINTED NAME AND SIGNATURE

Formerly C/WH/2/P
Present C/WH/2/P*Eduardo J. Tsikerdanos*

Ken Knaus

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties.

Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

8 MAR
1967

C/WH/2

Edwin W. Terrell

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)	(Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD		
H. ALDO, Fulgencio A., Jr.		27-1-19	M	O-12	D		
6. OFFICIAL POSITION TITLE	7. OFF/DIV/DR OF ASSIGNMENT	8. CURRENT STATION					
C.I.C. D/C	DD-1/C	HQ-QUARTERS					
9. CHECK (X) TYPE OF APPOINTMENT	10. CHECK (X) TYPE OF REPORT						
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY	11. INITIAL	12. ANNUAL	13. SPECIAL (Specify):	REASSIGNMENT SUPERVISOR			
CAREER-PROVISIONAL (See Instructions - Section C)				REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):							
11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From To)	13. RATER					
	16-1-65 - 30-1-65	Owenor 1/65					
SECTION B							
PERFORMANCE EVALUATION							
<u>W - Weak</u>	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.						
<u>A - Adequate</u>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.						
<u>P - Proficient</u>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.						
<u>S - Strong</u>	Performance is characterized by exceptional proficiency.						
<u>O - Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.							RATING LETTER
							P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and							RATING LETTER
							S
SPECIFIC DUTY NO. 3 Briefing representatives of personnel. foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.							RATING LETTER
							S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.							RATING LETTER
							S
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
4 JAN 1965							S
FORM 45 OBSOLETE PREVIOUS EDITIONS 4-62				SECRET			
Table 1 Instructions for Rating Performance and Determining Rating Letters							

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain rating given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>Mr. Hidalgo is an able intelligence officer, dedicated to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p> <p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE		I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>Susan L. Darling</i>		
2. BY SUPERVISOR		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION			
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>Susan L. Darling</i>	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with the exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	<i>Walter T. Cini</i>	

SECRET

SECRET

(Form 1200, Edition 1A)

1. FILE NUMBER 27630		BIOGRAPHIC PROFILE (PART I/SCD: 16 Jul 1946)					
2. NAME (Last, First, Middle) Raimo Kihnes, Jr.			3. SEX	4. DATE OF BIRTH M May 1919	5. LONGEVITY COM. DATE 17 Mar 1958		
6. MARITAL STATUS Married		7. DEPENDENT(S) <input checked="" type="checkbox"/> Child	8. YEAR(S) OF BIRTH 3 1927-1945-1950	9. NATURALIZATION DATE(S) NA Puerto Rico NA			
10. CARRIER STATUS <input checked="" type="checkbox"/>		11. MEMBERSHIP <input checked="" type="checkbox"/>	12. PAST STATUS Pending	13. LAST D.D. PTY. DUAL POS. Sep 1962	14. EVAL. FOR Dpt Only	15. TO BE RELEASED BY CIA CAT-1	16. RELEASED BY CIA CAT-1
17. CURRENT RESERVE STATUS <input checked="" type="checkbox"/>		18. NON-CIA SERVICE <input checked="" type="checkbox"/>	19. GRADE None	20. ACTIVE DUTY WITH CIA CAT-1	21. RELEASED TO CIA CAT-1	22. RELEASED BY CIA CAT-1	23. RELEASED BY CIA CAT-1
24. ASSESSMENT DATE None		25. PROFESSIONAL TEST DATE Feb 1958		26. LANGUAGE PROFICIENCY TEST DATE None			
27. MILITARY SERVICE 1940-43 Military Service US Army, Cpl - Infantry 1943-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Lovett Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co(Bank), NYC - Collections Clerk 1951 Dept of Defense, New York QM Procurement Agency, NYC - Inspector							
28. NON-CIA EDUCATION 1945-46 New York University - Foreign Trade, Business Law							
29. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Portuguese - R Intern; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Intern; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
30. AGENCY SPONSORED TRAINING 1958 Comm Party Org & Ops 1958 CI Famil 1958 Info Rptng, Rpts&Rpts 1958 Operations 1958 Intel Orient 1959 Picks & Locks 1959 Audio Surveil Mgmt							
31. CIA EMPLOYMENT HISTORY SINCE 10 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)							
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SD	ORGANIZATION & ORGAN. TITLE (if any)	LOCATION		
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WI/Project HYPOTHESIS Panama Area Ops Off.	0136.01	11 D	DDP/WI-III/Central America	Hq		
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala Instructor(Ops)	1711.50	11 D	OTR/Ops School/Covert Trng	Hq		
Jun 1960	Ops Off	0136.01	11 D	DDP/WI-4	"		
Aug 1961	" "	0136.01	11 D	DDP/WI-4/FI-CI Sec	"		
Jan 1962	" "	0136.01	11 D	DDP/WI-Plans & Ops Stf/Sec A	"		
Apr 1963	" "	0136.01	11 D	DDP/SAS/US Fld/forward Ops Sta	JMWAVE		
32. DATE REVIEWED 24 Oct 1963	33. PROFILE REVIEWED BY OP/POP/01/hmc/rwh	34. ITEMS 1-10 REVIEWED & VERIFIED BY [Signature]	35. PROFILE 9 Feb 1960				

Form 1200 (PART I) see previous entries

SECRET

PROFILE

60

SECRET
(This form is valid for one year from date of issue)

PERIODICAL NO. 27630	BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HIDALGO, Balzres Nieves, Jr.		DATE OF BIRTH May 1919
		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION		
27. DATE REVIEWED 1 JULY 67	28. PROFILE REVIEWED BY OP/PCD/QAB	

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630											
SECTION A				GENERAL											
1. NAME <i>Hidalgo, Balmes</i>		(Last) (First) (Middle)	2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-11										
5. OFFICIAL POSITION TITLE Ops. Officer		5. OFF/DIV/ON OF ASSIGNMENT DDP WH PGO SEC. A.		6. CURRENT STATION D											
7. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):		8. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL SPECIAL (Specify):		9. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE											
11. DATE REPORT DUE IN O.P. 30 October 1962		12. REPORTING PERIOD (From - To) 17 Jan 62 - 30 Sep 62													
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															
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).															
SPECIFIC DUTY NO. 1		RESPONSIBILITY		RATING LETTER P											
Responsible for initiation and development of WH Division durable assets program.															
SPECIFIC DUTY NO. 2		RESPONSIBILITY		RATING LETTER P											
Collate and maintain files on espionage laws of LA countries.															
SPECIFIC DUTY NO. 3		RESPONSIBILITY		RATING LETTER P											
Served as interpreter and translator for Division LA contacts.															
SPECIFIC DUTY NO. 4		RESPONSIBILITY		RATING LETTER P											
Coordinated with Branch 1 of WHD on FI and CI matters.															
SPECIFIC DUTY NO. 5		RESPONSIBILITY		RATING LETTER S											
Gives lectures as guest instructor to students attending School of International Communism.															
SPECIFIC DUTY NO. 6		RESPONSIBILITY		RATING LETTER											
OVERALL PERFORMANCE IN CURRENT POSITION															
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER P											

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 ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

18 Sept 62

Delmer L. Hidalgo

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

18 September 1962

C/WH/PO/A

Clark W. Simmons

CLARK W. SIMMONS

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
13 September 1962	C/WH/OPS	<i>Vernet L. Greenham</i> VERNET L. GREENHAM

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 027630	
SECTION A			GENERAL			
1. NAME HIDALGO Ballos N. Jr.	2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11			
5. SERVICE DESIGNATION D	6. OFFICIAL POSITION TITLE Operations Officer	7. OFF. DIV. OR OF ASSIGNMENT DDP/WH, Br. 4, D.C.				
8. CAREER STAFF STATUS			9. TYPE OF REPORT			
NOT ELIGIBLE PENDING	MEMBER DECLINED	DEFERRED DENIED	INITIAL <input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT/SUPERVISOR REASSIGNMENT/EMPLOYEE		
10. DATE REPORT DUE IN O.P. 31 October 1961		11. REPORTING PERIOD 6Oct60 - 30Sep61		12. SPECIAL (Specify)		
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
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).						
1. Unsatisfactory	2. Barely adequate	3. Acceptable	4. Competent	5. Excellent	6. Superior	7. Outstanding
SPECIFIC DUTY NO. 1 Hqs. C.O. for 3 major CI/FI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.		RATING NO. 5	SPECIFIC DUTY NO. 4 Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.		RATING NO. 5	
SPECIFIC DUTY NO. 2 Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.		RATING NO. 4	SPECIFIC DUTY NO. 5		RATING NO. -	
SPECIFIC DUTY NO. 3 Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.		RATING NO. 6	SPECIFIC DUTY NO. 6		RATING NO. -	
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION						
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:						
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						
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.						
1. Least possible degree	2. Limited degree	3. Normal degree	4. Above average degree	5. Outstanding degree		
CHARACTERISTICS				NOT APPLI-CABLE	NOT OBSERVED	RATING
GETS THINGS DONE						X
RESOURCEFUL						X
ACCEPTS RESPONSIBILITIES						X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES						X
DOES HIS JOB WITHOUT STRONG SUPPORT						X
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X
WRITES EFFECTIVELY						X
SECURITY CONSCIOUS						X
THINKS CLEARLY						X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS						X
OTHER (Specify):						

SEE SECTION "E" ON REVERSE SIDE

SECRET

(This Form is Confidential)

SECTION E**NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.

He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.

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

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE

SIGNATURE OF EMPLOYEE

2.**BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

11

Subject hospitalized.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

20 March 62

D/Chief, WH/4/C1

Robert W. Andrews
Robert W. Andrews**3.****BY REVIEWING OFFICIAL** I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

21 March 1962

C/WH/4/C1

Clark W. Simmons
CLARK W. SIMMONS**SECRET**

SECRET

NOTIFICATION OF CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE
		14 September 1966
TO: (Check)	CHIEF, PERSONNEL OPERATIONS DIVISION	SUBJECT
	CHIEF, OPERATING COMPONENT (For Action)	Hidalgo, Bimes N., Jr.
	X CHIEF, CONTRACT PERSONNEL DIVISION WH	
ATTN: Mr. Hannah		
REPI: Form 1322 dated 9 September 1966		FILE NO.: 9927
OFFICIAL COVER DISCONTINUED		ID. CARD NO.: 1140 (Returned)
Joint Operations Group		

Unblock Records:
x (TOP Memo 20-800-11)

Effective **EOD**

Submit Form 642 To Change Limitation Category.
x (HB 20-800-2 to be redesignated HHB 20-7)

Return All Official Documentation To CCS.

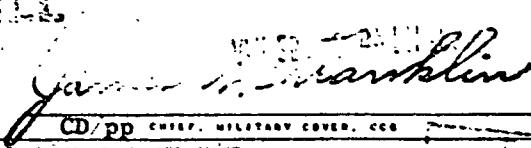


I-PSD/OS
CRET

SECRET

NOTIFICATION OF ESTABLISHMENT OF MILITARY COVER BACKSTOP		DATE
TO: <i>(Check)</i>	<input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
	<input type="checkbox"/> CHIEF, OPERATING COMPONENT : SAS	HIDALGO, Balmes N., JR.
ATTN:	Mr. Dawson	FILE NO.
REF:	Request for Cover, 9 April 1964	ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED		X-7412
US Army Element, Joint Operations Group		NA
<input type="checkbox"/> BLOCK RECORDS: <small>(FORM 20-800-11)</small>		
<input type="checkbox"/> a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____ <input checked="" type="checkbox"/> b. CONTINUING, EFFECTIVE <u>ED</u>		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. <small>(HB 20-800-2)</small>		
<input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED. <small>(HB 20-661-1)</small>		
<input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. <small>(E 240-250)</small>		
<input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. <small>(E 240-250)</small>		
<input type="checkbox"/> REMARKS:		
'S MEMO MUST REMAIN TOP OF FILE'		
<input type="checkbox"/> COPY TO CPO/OP		
<small>CD/SL1 CHIEF, MILITARY COVER, CCC</small>		
<small>DISTRIBUTION: 1-OSD/US, 1-PSD/OS, 1-ADPD/COMPT</small>		
<small>7-62 FORM 1551 OBSOLETE PREVIOUS EDITIONS.</small>		
<small>SECRET</small>		
<small>60-1373-20-429 Cecil</small>		

SECRET

NOTIFICATION OF ESTABLISHMENT OF MILITARY COVER BACKSTOP		DATE
TO: <input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION <small>(CMB-2)</small> CHIEF, OPERATING COMPONENT SAS ATTN: Mr. Durham REF: Verbal request for cover MILITARY COVER BACKSTOP ESTABLISHED US Army Element Joint Operations Group		23 April 1963 ESTABLISHED FOR
<input checked="" type="checkbox"/> BLOCK RECORDS: <small>(OPMEMO 20-800-11)</small> <ul style="list-style-type: none"> a. TEMPORARILY FOR ____ DAYS, EFFECTIVE ____. b. CONTINUING, EFFECTIVE ____ EOD ____. 		FILE NO. HIDALGO, Balme N., Jr. ID CARD NO. K-7412
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. <small>(BB 20-800-2)</small>		
<input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED. <small>(BB 20-661-1)</small>		
<input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. <small>(R 240-230)</small>		
<input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. <small>(R 240-230)</small>		
<input type="checkbox"/> REMARKS: <p style="text-align: center;">THIS NOTIFICATION REMAIN IN THE OFFICE</p>		
<input type="checkbox"/> COPY TO CPD/OP		
 CD/PP CHIEF, MILITARY COVER, CGC		
DISTRIBUTION: 1-OSD OS, 1-PSD US, 1-ADP D/COMPT		
FORM 7-62 1551 OBSOLETE PREVIOUS EDITIONS.		
SECRET		

112-20448M

SECRET

NOTIFICATION OF CANCELLATION OF MILITARY COVER BACKSTOP		DATE
<input checked="" type="checkbox"/> TO: (Check)	CHIEF, RECORDS AND SERVICES DIVISION	9 March 1962
	CHIEF, OPERATING COMPONENT - WH Div	SUBJECT: HIDALGO, BALMES N. JR.
ATTN:	WH/SS 1405 Barton Hall	
REF:	Your request of 1322 dated undated MILITARY COVER DISCONTINUED	FILE NO. K-7412
US Army Element, Joint Operations Group		ID CARD NO. 832
<input checked="" type="checkbox"/> UNBLOCK RECORDS: (OP memo 20-800-11)		
EFFECTIVE <u>27 October 1960</u>		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HD 20-800-2)		
<input type="checkbox"/> RETURN ALL MILITARY DOCUMENTATION.		
<input type="checkbox"/> REMARKS:		
THIS ACTION DOES NOT OBTAIN ON LATER USE FILE		
<input type="checkbox"/> COPY TO CPD/OP		
<u>39165</u>		
EDR CHIEF, MILITARY COVER, CCG DISTRIBUTION: 1-SS/DS, 1-PSD/OS, 1-WRD/AMPT		

FORM 12-61 1551a

SECRET

(13-20-43)

S E C R E T

7 March 1968

RETRIBUTION TO: Chief, Records and Services Division
Office of Personnel

TO: Personnel Security Division
Office of Security

SUBJECT: Balme N. HIDALGO, Jr., Contract Employee

1. Cover arrangements have been completed for the above named subject.

2. Effective immediately, it is requested that your records be properly (blocked) (XXXXXX) to (deny) (XXXXXXXXXX) subject's current Agency employment by an external inquirer. Subject is to be converted to Staff Employee status within the next few days.

3. This memorandum confirms an oral request of 7 March 1968.

Edward J. Barton
for JOSEPH M. ADAMS
Chief, Official Cover & Liaison, CCB

cc: PSD/CS
EN

THIRD SECRET PERTINENT INFORMATION
100-1234567890
JW

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCT 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME HIDALCO, B. N., JR.	SERIAL ORGN. F-13-SR-STEP 00730 51 250 V 12 5	NEW SALARY \$16,034
-----------------------------	--	------------------------

1. LAST NAME HIDALCO, B. N. JR.	FIRST NAME	INITIAL(S)	2. APPOINTMENT DATA Entered on duty F.T. P.T.	3. TOTAL SERVICE FOR LEAVE (as of _____ of separation)
4. DATE AND NATURE OF SEPARATION RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70		Subject to Sec 203(d) 1931 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/> Ceased to be subject to Sec 203(d) on _____ Annual Leave Bal _____		Years Months Days <input type="checkbox"/> More than 15 years
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)			SUMMARY OF HOME LEAVE (DAYS)	
5. Balance from prior leave year ended 1/10 1970	ANNUAL 46	SICK 8	14. Date arrived abroad for HI purposes _____ 15. Current balance as of _____ 19 _____ 16. 12 month accrual rate _____ 17. Dates leave used, prior 24 months _____ 18. Monthly accrual date _____ 19. Calendar days credit for next accrual date _____ 20. Date basic service period completed _____	REMARKS SCD 7/16/46
6. Current leave year accrual through 2/21 1970	24	12		
7. Total	70	20		
8. Reduction in credits, if any (current year)				
9. Total leave taken	4	20		
10. Balance	66	-0-		
11. Total hours paid in lump sum	66 hrs			
12. Salary rate(s)	\$15,173.00			
13. Lump sum leave dates From 0830 3/02/70 to 3/11/70 1030 (Hours)				
20. Certified - object by <i>B. N. Hidalco</i> (Signature) for Chief Payroll (Title)	3/13/70	Date 113-2585 (Telephone)	21. Dates during current calendar yr _____ to _____ 22. Dates during preceding calendar yr _____ to _____	
			23. During leave year in which separated 24. During step increase waiting period which began on 12/15/68 25. During 12-month HI accrual period (separ.)	LWOP or AWOL or Furlough Suspension (Hours)

5-21-70

70-1271

70-1551

Mr. Barnes N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

31 MAR 1970

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

Richard Helms
Richard Helms
Director

Distribution:

0 - Addressee
1 - DDCI
1 - ER
1 - C/EAB/OS
1 - D/Pers
1 - OPF
1 - ROR Soft File *Concur
1 - FOB Reader

Originator:

OP/RAD/ROB/PJSeidel:jat/3257 (5 March 1970)

Director of Personnel

C/EAB/OS

P B SFP 1970

Mr. Raines N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay
Personnel Officer

Enclosures:
Questionnaire
Return Envelope

Distribution:
Original - Addressee
1 - OPF
1 - RAD Subject's File

OP/RAD/EFAB/MLShobe:dag (31 Aug 70)

SECRET

(When Filled In)

DDU:

14 MAY 70

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
027630		HIDALGO, G N R		MO DA YR		6. FINANCIAL ANALYSIS NO CHARGEABLE		
3. NATURE OF PERSONNEL ACTION RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		7. CSC OR OTHER LEGAL AUTHORITY		P.L. 88-463		8. CSC OR OTHER LEGAL AUTHORITY		
FUNDING		V TO V	V TO CF	0405 0000 0000		Sect. 1231		
CF TO V		CF TO CF						
9. ORGANIZATIONAL DESIGNATIONS DDP/VH BRANCH 2 PANAMA SECTION				10. LOCATION OF OFFICIAL STATION WASH. D.C.				
11. POSITION TITLE CPS OFFICER				12. POSITION NUMBER 1310		13. SERVICE DESIGNATION		
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES OF38.01		16. GRADE AND STEP 12 5		17. SALARY OR RATE 13173		
18. REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. MDRNS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEFT
45	10	NUMERIC	ALPHABETIC			MO DA YR	MO DA YR	MO DA YR
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. Correction / Cancellation Data		33. SECURITY REG. NO.	34. SEN	
MO DA YR	CSC 2. CIA 3. NSA 4. None	CODE	-E0000	TYPE	MO DA YR			
35. VET PREFERENCE	36. SERV COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO		
CODE 0. NONE 1. 5 PT 2. 10 PT	MO DA YR	MO DA YR	CAR BUSY PROV TEMP	CODE	CODE 0. WATER 1. YES	HEALTH INS CODE		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA	
CODE 0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE (LESS THAN 3 yrs) 3. BREAK IN SERVICE (MORE THAN 3 yrs)		FORM EXECUTED 1. YES 2. NO	CODE	NO TAX EXEMPTIONS		FORM EXECUTED 1. YES 2. NO	CODE NO TAX STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION								
POSTED 63-05-70 jsc								

FORM

5-66

1150
MAY 10-67Use Previous
Edition

SECRET

BBG

EXEMPT FROM AUTOMATIC
ARCHIVING AND
DESTRUCTION

(When Filled In)

BSW: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

CSP				
1. SOCIAL NUMBER	2. NAME (LAST FIRST MIDDLE)			
027630	MIDALOO D N JR			
3. NATIVE & PERSONNEL ACTION		4. EFFECTIVE DATE		
RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		NO 04 1978		
5. FUND	V TO V	V TO CP	6. CATEGORY OF EMPLOYMENT	
X	C TO V	C TO CP	REGULAR	
7. ORGANIZATIONAL DESIGNATIONS			8. FINANCIAL AUTHORITY NO Chargeable	
			9. CSC CS CIVILIAN AUTHORITY	
			P.L. 88-643	
10. LOCATION OF OFFICIAL STATION			SECT. 231	
11. POSITION TITLE			12. POSITION NUMBER	13. SERVICE DESIGNATION
CSP OFFICER			1310	D
14. CLASSIFICATION SCHEDULE (GS, ETC.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS		0136.01	12 5	13173
18. REMARKS				
SIGNATURE OR OTHER AUTHENTICATION				

PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF FUNDS PROVIDED IN THE CIV ACT OF 1969, AS AMENDED, AND A DSI DIRECTIVE DATED OCTOBER 1968.

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL NO.	FUND SOURCE	NEW SALARY
HIDALGO B N JR	027630	51 330 V	GS 12 \$13,392 \$15,173

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
027630	HIDALGO B N JR	51 330	V						
OLD SALARY RATE		NEW SALARY RATE		B. TYPE ACTION					
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 12	4	\$13,392	12/18/68	GS 12	9	\$15,173	12/19/68		

CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: *Entomell* DATE: *10 October 68*

NO EXCESS LWOP

IN PAY STATUS AT END OF WAITING PERIOD

LWOP STATUS AT END OF WAITING PERIOD

CLEFS INITIALS: *K P O S D J G C H Y*

FORM 560 E Use previous
7-68 editions PAY CHANGE NOTIFICATION (183)

JP

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212-A-215 OF PL 90-266 AND EXECUTIVE ORDER 11613 PURSUANT TO AUTHORITY OF SEC. 15 AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	SI 350	V	GS 12 4	\$12,607	\$13,392

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-266 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	SI 350	V	GS 12 4	\$12,604	\$12,607

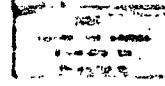
C/WK/2

630

1. Employee Name	2. Grade	3. Home	4. Cost Center Number	5. Lwop Hours				
027630 HIGALGO B N JR.			51-390 V					
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION				
Grade	Step	Salary	LWOP Date	Grade	Step	Salary	Effective Date	PW LSP AD
GS 12	3	\$11,685	12/19/65	GS 12	4	\$12,064	12/14/66	77.32
9. Remarks and Action Taken								29.7
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY <i>[Signature]</i>								29.7
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.								29.7
SIGNATURE: <i>[Signature]</i> DATE: Oct 12 1966								29.7
PAY CHANGE NOTIFICATION								29.7
10. DATE REC'D BY REC'D BY								29.7

SECRET
(Not for Public Release)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)							
027630		HAROLD B N CR							
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE				5. CATEGORY OF EMPLOYMENT			
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM		1974-04-01				REG AR			
6. FUNDS		7. COST CENTER NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		(P TO V)		COST CENTER NO CHARGEABLE		CSC OR OTHER LEGAL AUTHORITY			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DOP/WI		WASH., D. C.							
11. POSITION/TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION					
14. CLASSIFICATION SCHEDULE (CS, LS, MS)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE REGS. 1 AND 2 OF MR 20-L-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION BY Agency		20. OFFICE CODING		22. STATION, 23. STATE/PROV.		24. Grade		25. Date of Birth	
CODE		CODE		CODE		CODE		MM DD YY	
26. PAY EXPENSES		27. SPECIAL DIFFERENCE		28. RETIREMENT DATA		29. SEPARATION DATA		30. CONVERSION/COMBINATION DATA	
MM DD YY		CODE		CODE		CODE		MM DD YY	
31. VET PREFERENCE		32. SEED LOAN DATE		33. 1974 COMP. DATE		34. CARRYOVER CONTRACT		35. FISCHER RESTATE REQUEST	
CODE		MM DD YY		MM DD YY		CODE		MM DD YY	
36. PREVIOUS GOVERNMENT SERVICE DATA		37. LEAVE CAC		38. RETIREMENT DATA		39. OTHER DATA		40. OTHER DATA	
CODE		CODE		CODE		CODE		CODE	
SIGNATURE OF PERSONNEL ACTING									
1974-04-01		1974-04-01		1974-04-01		1974-04-01		1974-04-01	
Use Previous Edition									
SECRET									
FBI - WASH. D. C. - 1974 EDITION									



FBI - WASH. D. C.

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 6 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT IS JULY 1966

NAME	SERIAL OR BN. FURNIS GRASSTEE	OLD SALARY	NEW SALARY
MEDALLO H N JR	027638	\$1,350	\$1,685

EMPLOYEE NAME		Date	Salary Rate		WAGE PAY	
027638	MEDALLO H N JR		\$1,350	V		
OLD SALARY RATE			NEW SALARY RATE		TYPE ACTION	
100%	100%	100% 12/20/64	100%	100%	100%	AD
65 12 2	30,900		33,355		12/1/66	
NO EXCESS LWOP						
IN PAY STATUS AT END OF WAITING PERIOD						
LWOP STATUS AT END OF WAITING PERIOD						
CLERKS INITIALS: AUDITED BY						
I CERTIFY THAT THE WORA OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE						
SIGNATURE: PAY CHANGE NOTIFICATION						

JH: 17 DEC 65

SECRET
(When Filed)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027630		HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						12-19-65		REGULAR			
6. FUNDS		X	7. TO W	8. TO C	9. TO O	10. COST CENTER NO. CHARGEABLE		11. CSC OR OTHER LEGAL AUTHORITY			
			0 TO W	0 TO C	0 TO O	6235 0620 0000		50 USC 403 J			
12. ORGANIZATIONAL DESIGNATIONS						13. LOCATION OF OFFICIAL STATION					
DDP/WH BRANCH 2 PANAMA SECTION						WASH., D.C.					
14. POSITION TITLE						15. POSITION NUMBER		16. SERVICE DESIGNATION			
OPS OFFICER						1318		D			
17. CLASSIFICATION SCHEDULE (FSC, GS, etc.)			18. OCCUPATIONAL SERIES			19. GRADE AND STEP		20. SALARY OR RATE			
GS			0136.01			12 3		11355			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING		22. STATION CODE	23. INTELLIGENCE CODE	24. GRADE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEA	28. SECURITY REG. NO.	29. SOC. SEC. NO.
37	10	51350 WH		75013	1	05	27 19	00 00 00 00 00	00 00 00	00 00 00	00 00 00
30. HIRE EXPIRES		31. SPECIAL REFERENCE		32. RETIREMENT DATA		33. SEPARATION DATA		34. CORRECTION/CANCELLATION DATA		35. SECURITY REG. NO.	
00 00 00		00 00 00		00 00 00		00 00 00		00 00 00		00 00 00	
36. VET PREFERENCE		37. SERV. COMP. DATE		38. LONG. COMP. DATE		39. CAREER CATEGORY		40. SECURITY / HEALTH INSURANCE		41. SOCIAL SECURITY NO.	
CODE		00 00 00		00 00 00		00 00 00		00 00 00		00 00 00	
42. PREVIOUS GOVERNMENT SERVICE DATA						43. LEAVE CAT. CODE		44. FEDERAL TAX DATA		45. STATE TAX DATA	
CODE						00 00 00		00 00 00		00 00 00	
0. NO PREVIOUS SERVICE 1. NO SERVICE IN SERVICE 2. SERVICE IN SERVICE LESS THAN 1 YEAR 3. SERVICE IN SERVICE MORE THAN 1 YEAR						00 00 00		00 00 00		00 00 00	
50. NATURE OF OTHER AUTHENTICATION											

FORM 1150
11-62

Use Previous Editions

SECRET

1. FEDERAL TAX DATA
2. STATE TAX DATA
3. LOCAL TAX DATA
4. EMPLOYEE BENEFITS
5. OTHER INFORMATION1. FEDERAL TAX DATA
2. STATE TAX DATA
3. LOCAL TAX DATA
4. EMPLOYEE BENEFITS
5. OTHER INFORMATION

(When Filed)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 4 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
MIDALGO R N JR.	027630	SI 500	V	GS 12 2	\$10,605	\$10,987

SECRET
(When filled in)

NOTIFICATION OF PERSONNEL ACTION

DOS: 04/27/65

1. SERIAL NUMBER		2. NAME (LAST/FIRST/MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027610		HIDALGO, B. N. JR.		REASSIGNMENT		05 31 65			
6. FUNDS		X	V 10 V	V 10 C		7. COST CENTER, NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
			0 10 V	0 10 C		5235 1162 0000			
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DIVISION WH C MIAMI OPS BR F1 SEC					10. LOCATION OF OFFICIAL STATION WASH., D. C.				
11. POSITION TITLE OPS OFFICER					12. POSITION NUMBER 1145		13. CAREER SERVICE DESIGNATION U		
14. CLASSIFICATION SCHEDULE (GS, LD, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12		17. SALARY OR RATE			
18. REMARKS									
POSTED 6-9-65 HT									
SIGNATURE OR OTHER AUTHENTICATION									

GFC PAYROLL CHART

Dec 22, 1968

3CF

1. Serial No.	2. Name	3. Civil Service Number	4. LWOP Period							
027430	HIGALGO B N JR	49 997	43F							
5. OLD SALARY RATE		6. NEW SALARY RATE								
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSD	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
8. Remarks and Authorization										
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>[Signature]</i> AUDITED BY <i>[Signature]</i>										
I CERTIFY THAT THE WORK OF THE ABOVE-NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>[Signature]</i> DATE <i>4-1-68</i>										
PAY CHANGE NOTIFICATION										

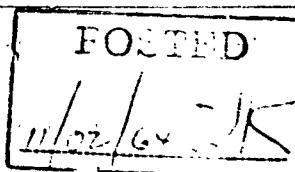
Form 500

October Previous Edition

(4-51)

SECRET
(When Filled In)

MHC: 2 NOV 64

NOTIFICATION OF PERSONNEL ACTION											
OCF											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027630		HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT		11 02 64		REGULAR							
6. FUNDS		V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
		CF TO V	CF TO CF	5235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION		WASH., D. C.									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		0887		D							
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		12 1		10250					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. HGTNS. CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES		
37	10	49150 SAS		75013	1	05	27 19	NO DA YR	NO DA YR		
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	34. SEX	
NO DA YR				CODE		TYPE	NO DA YR	EOD DATA			
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE		40. SOCIAL SECURITY NO		
CODE		0 - NONE 1 - BFT 2 - TPT	NO DA YR	NO DA YR	NO DA YR	CODE	CODE	0 - WAIVER 1 - YES	HEALTH INS. CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE		CODE		FORM EXECUTED CODE		NO TAX EXEMPTIONS		FORM EXECUTED CODE	NO TAX EXEMPT	STATE LOC	
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS), 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				1 - YES 2 - NO				1 - YES 2 - NO			
SIGNATURE OR OTHER AUTHENTICATION											
FROM: DEV COMP 2 											

FORM 11-62 1150

Use Previous Edition

SECRET

APR 1962
EX-100 FORM 1150
GSA GEN. REG. NO. 27
GSA GEN. REG. NO. 27

14-00000
(When Filled In)

ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL INTELLIGENCE DATED 8 OCTOBER 1962.

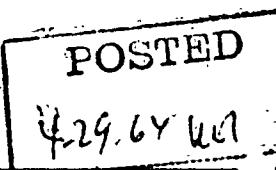
SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

GENERAL SCHEDULE RATES
Federal Employees Salary Act of 1964

SECRET
(When Filled In)

DTP: 28 APR 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
027530		HIDALCO, S. N. US		MO.	DA.	YR.					
3. NATURE OF PERSONNEL ACTION				6. FUND SOURCE		7. COST CENTER NO. (CHARGEABLE)					
CAREER PROVISIONAL EXCEPTED APPT				7. FUND SOURCE	8. FUND SOURCE	8. CSC OR OTHER LEGAL AUTHORITY					
FUND SOURCE		V TO V	V TO CP	CP TO V		CP TO CP		4232 1980 1000		50 USC 403	
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP/SAS CS/CS DEVELOPMENT COMPLEMENT				WASH., D.C.							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS OFFICER				2227							
14. CLASSIFICATION SCHEDULE (GS, LS, GS.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
CS		0130.01		12.1		2280					
18. REMARKS OTHER											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. MOBILISATION CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI			
13	18	42327	SAS	2E013	1	05 27 13	12 22 13	12 22 13			
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO	34. SEX		
			1. CSC	CODE				00000	M		
			2. FICA								
			3. NONE								
35. VET PREFERENCE		36. SERV COMP DATE	37. LONS COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO					
CODE		0. NONE	MO DA YR	MO DA YR	FEGL CODE	CODE	0. DRIVERS	HEALTH INS CODE			
		1. 1977	07 11 64	03 11 75	FEGL CODE	1	1 YES	HEALTH INS CODE			
		2. 1977			FEGL CODE	1	1 YES	HEALTH INS CODE			
		3. 1977			FEGL CODE	1	1 YES	HEALTH INS CODE			
		4. 1977			FEGL CODE	1	1 YES	HEALTH INS CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE EAT		43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE		CODE		NON-EXECUTIVE CODE	NO. TAX EXEMPTIONS	FORM EXECUTED	CODE	INDIVIDUAL TAX EXEMPT	STATE CODE		
0. NO PREVIOUS SERVICE		1. NO		1. YES	1	1. YES	1	1. YES	1		
1. NO BREAK IN SERVICE		2. NO		2. NO	2	2. NO	2	2. NO	2		
2. BREAK IN SERVICE LESS THAN 3 YEARS		3. NO		3. NO	3	3. NO	3	3. NO	3		
3. BREAK IN SERVICE EQUALS OR GREATER THAN 3 YEARS		4. NO		4. NO	4	4. NO	4	4. NO	4		
SIGNATURE OR OTHER AUTHENTICATION											
 429.6Y WO											
FORM 11-62 1150		Our Previous Edition		28 APR 1964		SECRET		14-00000		(When Filled In)	
(When Filled In)											

SECRET

(When Filled In)

SIR: 28 APR 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)		3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
027-30		Kondo, B K Jr		RESIGNATION			04 25 64		REGULAR		
6. FUNDS		V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
		X	X	4132 2001 1000							
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DOP/SAS US FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION		JMWAVE									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		0731		D							
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0130.01		12 1		9180					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Employ Code	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. Hdqrs Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
45	10	NUMERIC	ALPHABETIC			NO DA YR	NO DO YR	NO OA YR			
05	27 10										
28. ETC EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO	34. SEX			
02 04 64		1. CSC 2. FICA 3. NONE	CODE	TYPE	NO DA YR						
35. RET. PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE			40. SOCIAL SECURITY NO				
0226 0. NONE 1. 3 PT 2. 10 PT	NO DA YR	NO DA YR	SAC RENT CODE PMT TEMP	CODE	0. WATER	HEALTH INS CODE					
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE	43. FEDERAL TAX DATA			44. STATE TAX DATA						
0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 mos 3. BREAK IN SERVICE (MORE THAN 3 mos)		FORM EXECUTED	NO TAX EXEMPTIONS	FORM EXECUTED	NO TAX EXEMPT	STATE CODE					
		1. YES		1. YES	2. NO						
SIGNATURE OR OTHER AUTHENTICATION											
429-64 6A											

5244 1150
11-62

Use Previous Edition

28 APR 64
286

SECRET

FEB 1964
FEDERAL TAX INSURANCE
BUREAU OF INS.
DEPARTMENT OF COMMERCE

(When Filled In)

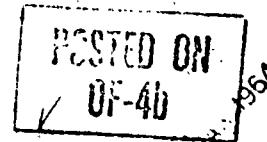
14-00000

525
01

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND OCT
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 3 JANUARY 1964.

NAME	SERIAL	ORGN FUNDS	GR-ST	OLD SALARY	NEW SALARY
[REDACTED]	027630	49 730	CF GS 12 1	\$ 9,475	\$ 9,980

Alvarez, L. H. Jr.



SECRET
(When Filled In)

20 DEC 63

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)							
027530		Hidalgo, R. A.							
3. NOTICE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
PROMOTION		12-02-63		REGULAR					
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
		CP TO V	IX	H132 2001 1000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DOR SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE C.I. SECTION		JMWAVE							
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS. OFFICER		0731		D					
14. CLASSIFICATION SCHEDULE (GS, LS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		12 1		9175			
18. REMARKS									
36 Dec 63									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION	20. Employee Code	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. Grade Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	
22	10	40730 SAS	922-10	?	05127119	12122163	12122163		
28. HIRE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE	33. SECURITY REQ. NO.	34. SEX			
NO DA 10		1 CSC 2 FICA 3 NONE	CODE	NO DA 10					
EOD DATA									
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO.				
CODE	NO DA 10	NO DA 10	CAN GEN CODE	CODE	O. DRIVER YES	HEALTH INS. CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE	1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 1 MONTH 4. BREAK IN SERVICE MORE THAN 1 MONTH	FORMER EXECUTED CODE 1. 100 2. 100	NO TAX EXEMPTIONS 1. YES 2. NO	FORMER EXECUTED 1. YES 2. NO	CODE	NO TAX EXEMPT 1. YES 2. NO	STATE CODE		
SIGNATURE OR OTHER AUTHENTICATION									
12/27/63/K									

SECRET
(When Filled In)

LLG: 25 APRIL 63

NOTIFICATION OF PERSONNEL ACTION																																																																																																												
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT																																																																																																				
123-16-30		H. J. Hargrove		EXCEPTED APPOINTMENT CAREER PROVISIONAL		1963-04-28		REGULAR																																																																																																				
6. FUNDS		V TO V	V TO C	7. COST CENTER NO. CHARGEABLE		8. CSC OR JINR & LEGAL AUTHORITY																																																																																																						
		CP 10 V	X	3132 2001 1000		50 USC 403 J																																																																																																						
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION																																																																																																						
DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-UWAVE CI SECTION						UWAVE																																																																																																						
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION																																																																																																				
OPS OFFICER						07324		O																																																																																																				
14. CLASSIFICATION SCHEDULE (GS, LS, GS, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE																																																																																																				
GS			0136.01			11 4		8840																																																																																																				
18. REMARKS																																																																																																												
<p style="text-align: center;">SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL</p> <table border="1"> <tr> <td>19. ACTION CODE</td> <td>20. EMPLOY CODE</td> <td>21. OFFICE CODING</td> <td>22. STATION CODE</td> <td>23. INTEGEE CODE</td> <td>24. HEIGHT CODE</td> <td>25. DATE OF BIRTH</td> <td>26. DATE OF GRADE</td> <td>27. DATE OF LEI</td> </tr> <tr> <td>13</td> <td>10</td> <td>61730</td> <td>SAS</td> <td>99999</td> <td>2</td> <td>05 27 19</td> <td>03 17 58</td> <td>09 16 62</td> </tr> <tr> <td colspan="2">28. NTE EXPIRES</td> <td>29. SPECIAL REFERENCE</td> <td>30. RETIREMENT DATA</td> <td>31. SEPARATION DATA CODE</td> <td>32. CORRECTION/CANCELLATION DATA</td> <td>33. SECURITY REG NO</td> <td>34. SEX</td> <td></td> </tr> <tr> <td colspan="2">MO DA YR</td> <td>LSC</td> <td>CODE</td> <td>TYPE</td> <td>MO DA YR</td> <td>27630</td> <td>M</td> <td>EOD DATA</td> </tr> <tr> <td colspan="2">35. VET. PREFERENCE</td> <td>36. SERV COMP DATE</td> <td>37. LONG. COMP DATE</td> <td>38. CAREER CATEGORY</td> <td>39. FEGL / HEALTH INSURANCE</td> <td colspan="3">40. SOCIAL SECURITY NO</td> </tr> <tr> <td colspan="2">CODE 0 - NONE 1 - SEP 2 - 10 PT</td> <td>MO DA YR</td> <td>MO DA YR</td> <td>CAN TEMP PROV TEMP</td> <td>CODE P 1 YES</td> <td>CODE 0 - WAIVER 1 - YES</td> <td colspan="3">HEALTH INS CO. E</td> </tr> <tr> <td colspan="4">41. PREVIOUS GOVERNMENT SERVICE DATA</td> <td>42. LEAVE CAT CODE</td> <td>43. FEDERAL TAX DATA</td> <td colspan="3">44. STATE TAX DATA</td> </tr> <tr> <td colspan="4"></td> <td>8</td> <td>FORM EXECUTED 1 - YES 2 - NO</td> <td>NO TAX EXEMPTIONS 0 0</td> <td>FORM EXECUTED 1 - YES 2 - NO</td> <td>NO TAX EXEMPT STATE CODE</td> </tr> <tr> <td colspan="12" style="text-align: center;">SIGNATURE OR OTHER AUTHENTICATION</td> </tr> <tr> <td colspan="12" style="text-align: right;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;">POSTED <i>15/04/63 JK</i></div> </td> </tr> </table>												19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HEIGHT CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	13	10	61730	SAS	99999	2	05 27 19	03 17 58	09 16 62	28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG NO	34. SEX		MO DA YR		LSC	CODE	TYPE	MO DA YR	27630	M	EOD DATA	35. VET. PREFERENCE		36. SERV COMP DATE	37. LONG. COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO			CODE 0 - NONE 1 - SEP 2 - 10 PT		MO DA YR	MO DA YR	CAN TEMP PROV TEMP	CODE P 1 YES	CODE 0 - WAIVER 1 - YES	HEALTH INS CO. E			41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA							8	FORM EXECUTED 1 - YES 2 - NO	NO TAX EXEMPTIONS 0 0	FORM EXECUTED 1 - YES 2 - NO	NO TAX EXEMPT STATE CODE	SIGNATURE OR OTHER AUTHENTICATION												<div style="border: 1px solid black; padding: 5px; display: inline-block;">POSTED <i>15/04/63 JK</i></div>											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HEIGHT CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI																																																																																																				
13	10	61730	SAS	99999	2	05 27 19	03 17 58	09 16 62																																																																																																				
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG NO	34. SEX																																																																																																					
MO DA YR		LSC	CODE	TYPE	MO DA YR	27630	M	EOD DATA																																																																																																				
35. VET. PREFERENCE		36. SERV COMP DATE	37. LONG. COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO																																																																																																						
CODE 0 - NONE 1 - SEP 2 - 10 PT		MO DA YR	MO DA YR	CAN TEMP PROV TEMP	CODE P 1 YES	CODE 0 - WAIVER 1 - YES	HEALTH INS CO. E																																																																																																					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA																																																																																																						
				8	FORM EXECUTED 1 - YES 2 - NO	NO TAX EXEMPTIONS 0 0	FORM EXECUTED 1 - YES 2 - NO	NO TAX EXEMPT STATE CODE																																																																																																				
SIGNATURE OR OTHER AUTHENTICATION																																																																																																												
<div style="border: 1px solid black; padding: 5px; display: inline-block;">POSTED <i>15/04/63 JK</i></div>																																																																																																												

FORM 1150
11-62Use Previous
Edition

SECRET 25 APR 1963

14-511
FEBRUARY 1964 EDITION
GSA GEN. REG. NO. 27
GSA GEN. REG. NO. 27

(When Filled In)

SECRET
(When Filled In)

RZR: 25 APR 63

OEF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST-FIRST MIDDLE)			
027630	HIDALCO D N JR			
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT	
RESIGNATION		CH 27 63	REGULAR	
6. FUNDS	V TO W	V TO CP	7. COST CENTER NO. CHARGEABLE	
	X		3232 1000 1000	
8. ORGANIZATIONAL DESIGNATIONS		9. LOCATION OF OFFICIAL STATION		
DDP/SPECIAL AFFAIRS STAFF FI/CI BRANCH		WASH., D.C.		
10. POSITION TITLE		11. POSITION NUMBER	12. SERVICE DESIGNATION	
OPS OFFICER		0592	D	
14. CLASSIFICATION SCHEDULE (SS, LS, WH)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS		0135.01	11-4	8940
18. REMARKS				

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING	22. STATUS CODE	23. INTEGEE CODE	24. ADAPT. CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
45	10	NUMERIC	ALPHABETIC			MO DA YR	MO DA YR	MO DA YR
28. HIRE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE	33. EOD DATA	34. SECURITY REQ NO	35. SEX
36. VET PREFERENCE		37. SERV. COMP. DATE	38. LONG COMP. DATE	39. CAREER CATEGORY	40. FEGL / HEALTH INSURANCE	41. SOCIAL SECURITY NO		
CODE		MO DA YR	MO DA YR	CAR. REV. CODE	CGCS	O. WAITER	HEALTH INS. CODE	
42. PREVIOUS GOVERNMENT SERVICE DATA		43. LEAVE CAT CODE	44. FEDERAL TAX DATA	45. STATE TAX DATA				
CODE		FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CGCS	TAX STATE CODE	EXEMP.
0 - NO PREVIOUS SERVICE 1 - 100 DAYS SERVICE 2 - OVER 100 DAYS BUT LESS THAN 3 YEARS 3 - OVER 3 YEARS		1 - YES 2 - NO			1 - YES 2 - NO			

SIGNATURE OR OTHER AUTHENTICATION

POSTED

10/1/321K

SECRET
(When Filled In)

ABM: 20 NOV 62

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

027630 HICALGO B N JR

3. NATURE OF PERSONNEL ACTION

REASSIGNMENT

4. FUNDS



X TO V

V TO C

C TO V

C TO C

5. ORGANIZATIONAL DESIGNATIONS

DDP TASK FORCE "W"
FI-C1 BRANCH

11. POSITION TITLE

OPS OFFICER

14. CLASSIFICATION SCHEDULE (ES, LB, etc.)

GS

15. OCCUPATIONAL SERIES

0136.01

6. EFFECTIVE DATE

11 20 62

7. CATEGORY OF EMPLOYMENT

REGULAR

8. COST CENTER NO. (CHARGEABLE)

3232 1000 1000 50 USC 403 J

9. CSC OR OTHER LEGAL AUTHORITY

10. LOCATION OF OFFICIAL STATION

WASH., D. C.

12. POSITION NUMBER

0682

13. CAREER SERVICE DESIGNATION

D

16. GRADE AND STEP

11 4

17. SALARY OR RATE

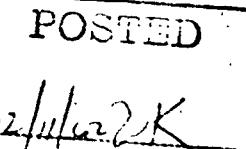
8840

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. RATING CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
37	10	61300	TFW	75013	1	05 27 19	MO DA YR	MO DA YR
28. HIRE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA			33. SECURITY REG NO	34. SEX
MO DA YR		1 CSC	CODE	TYPE	MO DA YR	EOD DATA	REG NO	
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LCRS COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO			
CODE	0 - NONE 1 - DPT 2 - TOT	MO DA YR	0 - WORK 1 - TEMP	CODE	0 - WORKER 1 - FEE	CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA					
CODE	CODE	EXEMPTION CODE	NO. TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX FEE PAY	STATE CODE	
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 yrs) 3 - BREAK IN SERVICE (MORE THAN 3 yrs)		1 - YES 2 - NO		1 - YES 2 - NO				

SIGNATURE OR OTHER AUTHENTICATION



FORM 4-62 7150

Use Previous Edition

SECRET

GSA
GENERAL SERVICES
ADMINISTRATION
BUREAU OF THE BUDGET

(4-611)

(When Filled In)

14-00000
IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.
EFFECTIVE 16 OCTOBER 1962

NAME	SERIAL ORDN	OLD FUND'S GRST SALARY	NEW FUND'S GRST SALARY
HIDALGO B N JR	027630	64075 V 11 4 \$ 8340	11 4 \$ 8840

235-1000

1 Serial No	2 Name	3 Cost Center Number	4 LWOP Hours							
027630	HIDALGO B N JR	64 075 V /								
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	MU	ISI	ADJ
RS 11 3	\$ 8,080	03/19/61		S 11 4	3	\$ 8,340	09/16/62			
8 Remarks and Authorizations										
<p>/ / NO EXCESS LWOP / / EXCESS LWOP</p> <p>/ / IN PAY STATUS AT END OF WAITING PERIOD</p> <p>/ / IN LWOP STATUS AT END OF WAITING PERIOD</p> <p>CLERKS INITIALS <i>JMC</i> AUDITED BY <i>[Signature]</i></p>										
PAY CHANGE NOTIFICATION										

SECRET

(When Filled In)

AES: 17 JAN 62

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER.		2. NAME (LAST-FIRST-MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027630		HIDALGO B N JR				01 17 62		REGULAR	
6. FUNDS		X V TO V	V TO CF	7. COST CENTER NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
		CF TO V	CF TO CF	2235 1000 1000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION							
DDP WH PLANS & OPERATIONS STAFF SECTION A		WASH., D.C.							
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
OPS OFFICER		0641		D					
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		11 3		8080			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. Employ. Code	21. OFFICE CODING		22. STATION CODE	23. INTECIRE CODE	24. Month	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
37	10	64075 WH		75013	1	05	27 19		
28. ETC EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG. NO.	34. SER	
NO DA 10		1 CAF 2 FICA 3 NONE		CODE	TYPE	NO CA 10	EOD DATA		
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. MIL. SERV CREDIT/LCD	39. FEDERAL HEALTH INSURANCE	40. SOCIAL SECURITY NO				
CODE	0 - NONE 1 - 10 PT 2 - 20 PT	NO 06 YR	NO 06 YR	0 - MAJOR 1 - YES	CODE	0 - MAJOR 1 - YES	CODE	0 - MAJOR 1 - YES	
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE	0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 12 MOS 3 - BREAK IN SERVICE 12 MOS	CODE	NO - BREAK 12 MOS	4 - TAX EXEMPTIONS	1 - YES 2 - NO	5 - TAX EXEMPTIONS	1 - YES 2 - NO	6 - TAX EXEMPTIONS	1 - YES 2 - NO
SIGNATURE OR OTHER AUTHENTICATION									
1/18/62 JM									

SECRET

(This Form is to be Filled In)

ARE: 18 AUG 1961

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027630		HIDALGO B N JR		MO DD YY	08 20 61	REGULAR	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS				6. COST CENTER NO CHARGEABLE 7. CSC OR OTHER LEGAL AUTHORITY			
8. FUNDS → <input checked="" type="checkbox"/> X		V TO V	V TO CP	2635 5000 8021		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DOP WH BRANCH 4 FI CI SECTION				10. LOCATION OF OFFICIAL STATION WASH., D. C.			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0681	13. CAPTION/ SERVICE DESIGNATION D		
14. CLASSIFICATION/EXTRAORDINARY PAY RATE GS		15. GRADE AND STEP 0136.01	16. SALARY OR PAY RATE 8060				
17. REMARKS							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION: 20. EMPLOYER: 21. OFFICE CODING CODE: 1 - LOC: 2 - SUBOFFICE: 3 - ALPHABETIC:		22. STATION CODE: 1 - LOC: 2 - SUBOFFICE: 3 - ALPHABETIC:		23. INTECREE CODE: 1 - LOC: 2 - SUBOFFICE: 3 - ALPHABETIC:		24. MONTH CODE: 1 - LOC: 2 - SUBOFFICE: 3 - ALPHABETIC:	
16 10 64450 WH		75013		1		25. DATE OF BIRTH MM DD YY	
26. DATE OF HIRED MM DD YY		27. DATE OF LEAVE MM DD YY		28. DATE OF LEAVE MM DD YY		29. DATE OF LEAVE MM DD YY	
30. DATE OF EXPIRES MM DD YY		31. SPECIAL REFERENCE CODE: 1 - PICA 2 - NONE		32. RETIREMENT DATA CODE: 1 - PICA 2 - NONE		33. CORRECTION/CANCELLATION DATA CODE: 1 - PICA 2 - NONE	
34. SECURITY NO MM DD YY		35. SECURITY NO MM DD YY		36. SECURITY NO MM DD YY		37. SECURITY NO MM DD YY	
38. VET PREFERENCE CODE: 1 - VETERAN 2 - DEPT 3 - DEF		39. SEPARATE COMP DATE MM DD YY		40. LONG COMP DATE MM DD YY		41. MIL. SERV. CREDITED CODE: 1 - YES 2 - NO	
42. MEDICAL DATA CODE: 1 - NO PREVIOUS SERVICE 2 - NO DEPEND IN SERVICE 3 - DEPEND IN SERVICE (LESS THAN 12 mos) 4 - DEPEND IN SERVICE (MORE THAN 12 mos)		43. FEDERAL TAX DATA CODE: 1 - YES 2 - NO		44. STATE TAX DATA CODE: 1 - YES 2 - NO		45. STATE TAX DATA CODE: 1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION <i>[Signature]</i>							

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours								
577890	HIDALCO R N JR	DDP/WH 3A UV									
5. OLD SALARY RATE		6. NEW SALARY RATE		7. TYPE ACTION							
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSD	ADZ	
25	11	2	7,820	09/20/59	11	3	\$ 8,030	03/19/61			
8. Remarks and Authentication											
<p>NO EXCESS LWOP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>IN LWOP STATUS AT END OF WAITING PERIOD</p> <p>EO EO EO EO EO EO 21K</p>											
PAY CHANGE NOTIFICATION											

Form 740 S60

Obsolete Previous Edition

SECRET

6-60

L-1

4-59

SECRET
(When filled in)

NOTIFICATION OF PERSONNEL ACTION

ADPR 09/21/69

1. NAME NUMBER 2. NAME/BASE (FDS-5000)

027630 MICALUGO R N JR

3. NATURE OF PERSONNEL ACTION

CONV. TO CAREER EMPLOYEE STATUS

4. FUNDS



X

Y 10 V

Z

Y 10 D

A

Y 10 V

B

Y 10 U

5. CLASSIFICATION DESIGNATION:

DDP/SAS

6. EFFECTIVE DATE

MM DD YY

03 17 61

7. CATEGORY OF EMPLOYMENT

8. COST CENTER NO CHARGEABLE

9. BY WHOM OR OTHER LEGAL AUTHORITY

4232 1990 1000

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

12. POSITION NUMBER

13. CAREER STATUS DESIGNATION

D

14. CLASSIFICATION NUMBER (S) (D-1)

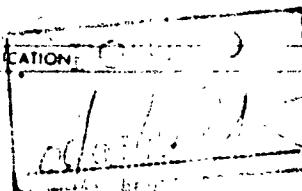
15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION



14-00000

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-368 AND DCI MEMO DATED
1 AUGUST 1966, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1966.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
O	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

7/57 EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960

NOTIFICATION OF PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Mar. Prod.	5. Son	6. CS-FOO
527630	HIDALGO B N JR	Mo. Da. Yr. 05 27 19	1960 R-100 S-1 M 1	Mo. Da. Yr. 03 17 58	Mo. Da. Yr. 03 17 58
7. CSC	8. CSC Permit	9. CSC Or Other Legal Authority	10. Appt. Allotm.	11. FEGLI	12. L-10
Mo. Da. Yr. 07 16 46	Yes. 1 Code 1	50 USCA 403 J	Mo. Da. Yr. No. 2	Mo. Da. Yr. 03 17 58	Yes. 1 Code 2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
DDS OTR OPERATIONS SCHOOL COVERT TRAINING	1172	WASH., D. C.	75013		
16. Dept. Field	17. Position Title	18. Personals No.	19. Serv. 20. Occup. Series		
Dept - 1 Code Unitd - 3 Frn - 3	INSTRUCTOR OPERS	1014	CS 1711.50		
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade 25. PSI Due	26. Appropriation Number	
112	\$ 7270	A	Mo. Da. Yr. 03 17 58	Mo. Da. Yr. 09 20 59	9 75013 30 018

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Expense	Code	30. Separation Date
REASSIGNMENT	57	09 21 60	REGULAR	Q1	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP WH BRANCH 4	1617	WASH., D.C.	75013		
33. Dept. Field	34. Position Title	35. Personals No.	36. Serv. 37. Occup. Series		
Dept - 1 Code Unitd - 3 Frn - 5	OPG OFFICER	0626	CS 0136.01		
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade 42. PSI Due	43. Appropriation Number	
112	\$ 7270	D	Mo. Da. Yr. 03 17 58	Mo. Da. Yr. 03 19 60	10125 1000 1000
44. Remarks	<p style="text-align: center;">1. C. E. S. 2. R. K.</p> <p style="text-align: center;">06-27-60 R/K</p>				

SECRET
WHEN FILLED IN

1. EMP. SERIAL NO.	2. NAME			3. ASSIGNED GRADE		4. FLDGS	5. ALLOCNT
527630	MIDALGO B H JK			DOS/TRNG 21		UV	
6. OLD SALARY RATE				7. NEW SALARY RATE			
GRADE	STEP	SALARY	LAST EFFECTIVE DATE	GRADE	STEP	SALARY	EFFECTIVE DATE
GS 11	1	\$ 7,034 U3	17 56	GS 11	2	\$ 7,270	09 20 59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER							
8. CHECK ONE <input checked="" type="checkbox"/> NO PAY STATUS DOP <input type="checkbox"/> EXCESS LWOP				9. NUMBER OF HOURS LWOP			
IF EXCESS LWOP CHECK FOLLOWING							
<input type="checkbox"/> IN PAY STATUS AT END OF PAYING PERIOD				<input type="checkbox"/> INITIALS OF CLERK			
<input type="checkbox"/> IN LWOP STATUS AT END OF PAYING PERIOD				10. INITIALS OF CLERK			
TO BE COMPLETED BY THE OFFICE OF PERSONNEL							
11. PROJECTED SALARY RATE AND EFFECTIVE DATE				12. REMARKS			
GRADE	STEP	SALARY	LAST	REMARKS			
				L 756			
13. AUTHENTICATION							
C PERIODIC STEP INCREASE - AUTHENTICATION FLX 9/2/59 JLC 10/1/59 V/V							

FEB 1959 5600

SECRET

PERSONNEL FOLDER

SECRET

JEC:12 JUNE 59

NOTIFICATION OF PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof	5. Soc. Sec. No.	6. CSC-ESF
527630	HIDALGO B N JR	Mo. 05 Da. 27 Yr. 19	No-0 Code 5 Pt-1 10 Pt-2	M 1 03 17 50	Mo. 16 Da. 17 Yr. 57
7. SCD	8. CSC Recd:	9. CSC Or. Other Legal Authority	10. Appn. Altitude	11. FEGLI	12. LCD
Mo. 07 Da. 16 Yr. 46	Yes - 1 Code No - 2	150 USCA 403(d)	Mo. 16 Da. 17 Yr. 57	Yes - 1 Code No - 2	Yes - 1 Code No - 2

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station	Station Code	
DDP WH BRANCH 121 CENTRAL AMERICA SECTION		4613	WASH., D.C.	75013	
16. Dept. Field	17. Position Title		18. Position No.	19. Serv. 20. Occup. Series	
Doce - 1 USAd - 3 For - 5	Code 2 AREA OPS OF		0486	GS 0136.01	
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Dpo	
11 1	\$ 7030	D	Mo. 03 Da. 17 Yr. 50	Mo. 09 Da. 20 Yr. 51	
				8 3500 20	
ACTION					
26. Nature Of Action	Code	27. Ent. Date	28. Type Of Employee	Code	29. Separation Date
REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS	05	Mo. 06 Da. 14 Yr. 50	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations		Code	32. Location Of Official Station	Station Code	
DDS OTR OPERATIONS SCHOOL COVERT TRAINING		1172	WASH., D.C.	75013	
33. Dept. Field	34. Position Title		35. Position No.	36. Serv. 37. Occup. Series	
Doce - 1 USAd - 3 For - 5	Code 3 INSTRUCTOR SPERS		1914	IS 1711.50	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Dpo	
11 1	\$ 7030	D	Mo. 03 Da. 17 Yr. 50	Mo. 07 Da. 15 Yr. 51	
				9 7500 20 018	
44. Remarks					

POSTED

Cp

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE

12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 452 AND DCI

DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR	127630	GS-11-1	\$ 4,700	\$ 7,030

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

VL 16 MAY 58

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof.	5. Sex	6. CS. EOD
127630	BALMES N. HIDALGO, JR.	Mo. Da. Yr.	None-U Code 5 Pt-1	Ma. Da. Yr.	
	HIDALGO B N JR	05 27 19	10 Pt-2 11	M 1	03 17 58
7. SCD	8. CSC Retire	9. CSC Or Other Legal Authority	10. Apart. Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr.	Yes - 1 Code	No - 2	Mo. Da. Yr.	Yes - 1 Code	No - 2
07 16 46	1 50 USCA 303.3		103 13 58	1 103 17 58	1 103 17 58

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
16. Dept. - Field	17. Position Title	18. Position No.	19. Serv. & 20. Occup. Series
Dept - 8 Code USMld - 4 Frgn - 6			
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade 25. PSI Due 26. Appropriation Number
	\$		Mo. Da. Yr. Mo. Da. Yr.

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
EXCEPTED APPOINTMENT CORRECTION*	12	CR 171 58	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
COP WH BRANCH 111 CENTRAL AMERICA SECTION	4613	WASH., D.C.	75013		
33. Dept. - Field	34. Position Title	35. Position No.	36. Serv. & 37. Occup. Series		
Dept - 8 Code USMld - 4 Frgn - 6	2 AREA OPS OF	0436	GS 0136.01		
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade 42. PSI Due 43. Appropriation Number		
11 1	\$ 6300	6	Mo. Da. Yr. Mo. Da. Yr.		
11 17 58 103 22 59					

44. Remarks

*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2, THE NAME, WHICH READS BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

LVL 17 MAR 58

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof	5. Sex	6. CS - EOD
127630	BALMES N. HIDALGO HIDALGO BALMES N	Mo. Da. Yr. 05 27 19	None-O Code 5 Pt-1 10 Pt-2 1	M 1	Mo. Da. Yr. 03 17 58
7. SCD	8. CSC Rec'd.	19. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr. 07 16 46	Yes - 1 No - 2	Code 1 50 USCA 403 J	Mo. Da. Yr. 03 13 55	Yes - 1 No - 2	Code 1 63 17 53 2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
Dept - 8 U.S. AIR FORCE Branch - 4 Frgn - 3					
16. Doct - Field	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series	
Code					
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
	\$		Mo. Da. Yr. 03 11 58	Mo. Da. Yr. 09 12 59	

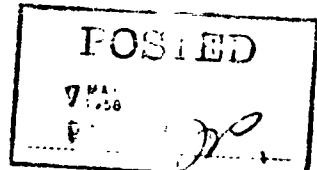
ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
EXCEPTED APPOINTMENT	13	Mo. Da. Yr. 03 11 58	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP WH BRANCH 111 CENTRAL AMERICA SECTION	4613	WASH., D.C.	75013		
33. Doct - Field	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series	
Dept - 8 U.S. AIR FORCE Branch - 4 Frgn - 6	AREA OPS OF	0486	US	0136.01	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11 1	\$ 6700	0	Mo. Da. Yr. 03 11 58	Mo. Da. Yr. 09 12 59	8 3500 20

44. Remarks



14-00000

FITNESS RPTS
1966 - 1969

SECRET

(This Form Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630	
SECTION A		GENERAL			
1. NAME (Last) (First) (Middle) HEDGES, PATRICK J., Jr.		2. DATE OF BIRTH 27 Aug 1919	3. SEX M	4. GRADE OP-12	5. SD D
6. OFFICIAL POSITION TITLE Ops Officer		7. OFF/DIV/BR OF ASSIGNMENT DDP/7/C	8. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)		10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):		SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 15 March - 31 October 1965		12. REPORTING PERIOD (From to)			
SECTION B PERFORMANCE EVALUATION					
<p>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.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Headquarter desk officer responsible for the support of Miami Station CI/CE activities and operations.					RATING LETTER P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and					RATING LETTER S
SPECIFIC DUTY NO. 3 Briefing representatives of foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.					RATING LETTER S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
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 hobbies, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S
4 JAN 1965					

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>Mr. Hidalgo is an able intelligence officer, devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible. He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
<p>1. BY EMPLOYEE I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</p> <p>DATE: 9 December 1965 SIGNATURE OF EMPLOYEE: <i>Susan L. Darling</i></p> <p>2. BY SUPERVISOR MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 8 months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</p> <p>DATE: 9 December 1965 OFFICIAL TITLE OF SUPERVISOR: C/WH/C/MO/FI-CI TYPED OR PRINTED NAME AND SIGNATURE: <i>Susan L. Darling</i></p> <p>3. BY REVIEWING OFFICIAL COMMENTS OF REVIEWING OFFICIAL</p> <p>I concur with the supervisor's assessment of Mr. Hidalgo with the exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE: 9 December 1965	OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/C/MO	TYPED OR PRINTED NAME AND SIGNATURE: Walter T. Cini / <i>Walter T. Cini</i>	

SECRET

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER
SECTION A					027630
GENERAL					
1. NAME HIDALGO, Balme N.	2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE 12	5. SD D	
6. OFFICIAL POSITION TITLE Ops Officer	7. OFF/DIV/BR OF ASSIGNMENT DDP/SAS	8. CURRENT STATION Washington			
9. CHECK (X) TYPE OF APPOINTMENT					10. CHECK (X) TYPE OF REPORT
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			XX ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To) 9 April 1964-15 March 1965		
SECTION B PERFORMANCE EVALUATION					
<p>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.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.					RATING LETTER S
SPECIFIC DUTY NO. 2 Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.					RATING LETTER P
SPECIFIC DUTY NO. 3 Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).					RATING LETTER S
SPECIFIC DUTY NO. 4 Served as case officer for a counterintelligence operation (the agent was located in New York City) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S
29 MAR 1965					

SECRET

SECTION C

NARRATIVE COMMENTS

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

Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B, (specific duties) he performed a wide variety of duties.

Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, memoranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.

Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

23 March 65

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

11 Months

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

DATE

23 March 1965

OFFICIAL TITLE OF SUPERVISOR

WH/SA/CI/COPS

TYPED OR PRINTED NAME AND SIGNATURE

Richard Tansing

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.

DATE

23 MAR 65

OFFICIAL TITLE OF REVIEWING OFFICIAL

C WH/SA CI (WH/C/SP)

TYPED OR PRINTED NAME AND SIGNATURE

Harold F. Swenson

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630													
SECTION A																	
GENERAL 1. NAME [REDACTED] (First) [REDACTED] (Middle) 2. DATE OF BIRTH 27 May 1919 3. SEX Male 4. GRADE GS-11 D 5. OFFICIAL POSITION TITLE OPS OFFICER 6. OFF/ DIV/ BR OF ASSIGNMENT DEP/S.A.S. 7. CURRENT STATION JMWAVE 8. CHECK (X) TYPE OF APPOINTMENT <table border="1"> <tr> <td>CAREER</td> <td>RESERVE</td> <td>TEMPORARY</td> </tr> <tr> <td colspan="3">CAREER-PROVISIONAL (See Instructions - Section C)</td> </tr> <tr> <td colspan="3">SPECIAL (Specify)</td> </tr> </table> 9. CHECK (X) TYPE OF REPORT <table border="1"> <tr> <td>INITIAL</td> <td>REASSIGNMENT SUPERVISOR</td> </tr> <tr> <td>ANNUAL</td> <td>REASSIGNMENT EMPLOYEE</td> </tr> </table> 10. SPECIAL (Specify): Promotion 11. DATE REPORT DUE IN O.P. 6 May 1963 to 5 September 1963					CAREER	RESERVE	TEMPORARY	CAREER-PROVISIONAL (See Instructions - Section C)			SPECIAL (Specify)			INITIAL	REASSIGNMENT SUPERVISOR	ANNUAL	REASSIGNMENT EMPLOYEE
CAREER	RESERVE	TEMPORARY															
CAREER-PROVISIONAL (See Instructions - Section C)																	
SPECIAL (Specify)																	
INITIAL	REASSIGNMENT SUPERVISOR																
ANNUAL	REASSIGNMENT EMPLOYEE																
SECTION B PERFORMANCE EVALUATION																	
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																	
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).																	
SPECIFIC DUTY NO. 1 To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.				RATING LETTER S													
SPECIFIC DUTY NO. 2 To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [REDACTED]				RATING LETTER S													
SPECIFIC DUTY NO. 3 To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESK debriefing program.				RATING LETTER P													
SPECIFIC DUTY NO. 4 To prepare and present to his immediate supervisor completed interrogation reports.				RATING LETTER P													
SPECIFIC DUTY NO. 5 [REDACTED]				RATING LETTER													
SPECIFIC DUTY NO. 6 [REDACTED]				RATING LETTER S													
OVERALL PERFORMANCE IN CURRENT POSITION																	
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.																	
27 SEP 1963																	

SECRET

(When Filled In)

SECTION C.**NARRATIVE COMMENTS**

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

Sep 26 2014
 The person being rated is a conscientious devoted [redacted] who has demonstrated an extraordinary ability to get along with his co-workers and other ODYOKO representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KUDESK effort of the Station.

The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KUJUMP interrogators [redacted] and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of effort.

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

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

DATE**SIGNATURE OF EMPLOYEE****2.****BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

4 months

At time preparation this report employee was on TDY Hqs and leave. Will be shown him upon return.

DATE**OFFICIAL TITLE OF SUPERVISOR****TYPED OR PRINTED NAME AND SIGNATURE**

4 September 1963

Chief, CI Branch, JMWAVE (signed in pseudo on Fld. Trans.)

/s/ Mail T. PICKWORTH

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

Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.

DATE**OFFICIAL TITLE OF REVIEWING OFFICIAL****TYPED OR PRINTED NAME AND SIGNATURE**

18 September 1963 Chief of Station, JMWAVE

/s/ Andrew K. REUTEMAN

(signed in pseudo on Fld. Trans.)

SECRET

SECRET

(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER 027630	
SECTION A			GENERAL	
1. NAME HIDALGO, BALMES		(Last) (First) (Middle)	2. DATE OF BIRTH 27 May 1919	3. SEX M
6. OFFICIAL POSITION TITLE Ops Officer		7. OFF/DIV/BR/OF ASSIGNMENT DIP WH P&O SEC A.		8. CURRENT STATION
9. CHECK (X) TYPE OF APPOINTMENT CAREER RESERVE TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			10. CHECK (X) TYPE OF REPORT INITIAL ANNUAL SPECIAL (Specify): 11. DATE REPORT DUE IN O.P. 30 October 1962	
			12. REPORTING PERIOD (From - to) 17 Jan 62 - 30 Sep 62	
SECTION B PERFORMANCE EVALUATION				
<p>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.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>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.</p>				
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 Responsible for initiation and development of WH Division durable assets program.				RATING LETTER P
SPECIFIC DUTY NO. 2 Collate and maintain files on espionage laws of LA countries.				RATING LETTER P
SPECIFIC DUTY NO. 3 Served as interpreter and translator for Division LA contacts.				RATING LETTER P
SPECIFIC DUTY NO. 4 Coordinated with Branch 1 of WHD on FI and CI matters.				RATING LETTER P
SPECIFIC DUTY NO. 5 Gives lectures as guest instructor to students attending School of International Communism.				RATING LETTER S
SPECIFIC DUTY NO. 6				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>				RATING LETTER P

SECRET**SECTION C NARRATIVE COMMENTS**

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

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

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

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

DATE 18 Sept 62	SIGNATURE OF EMPLOYEE <i>Alvaro L. Hidalgo</i>
--------------------	---

2. BY SUPERVISOR

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

DATE 18 September 1962	OFFICIAL TITLE OF SUPERVISOR C/WH/PO/A	TYPED OR PRINTED NAME AND SIGNATURE <i>Clark H. Simmons</i> CLARK H. SIMMONS
---------------------------	---	--

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE 13 September 1962	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/OPS	TYPED OR PRINTED NAME AND SIGNATURE <i>Vernon L. Gresham</i> VERNON L. GRESHAM
---------------------------	--	--

SECRET

S E C R E T
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE	Name (Last-First-Middle) Hidalgo, Barnes
--------------------------------------	---

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation).
2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). NA
3. Standard Form 56 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954).
4. Standard Form 2802 (Application for Refund of Retirement Deductions). Medical Disability
5. Form 2595 (Authorization for Disposition of Paychecks). NO CHANGE
6. Applicable to returnee (resignee from overseas assignment).
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.
 Appointment arranged with Office of Medical Services.
 Appointment for Office of Medical Services examination declined.
7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment.
8. Form 71 (Application for Leave).
9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty).
10. Instructions for returning to duty from Extended Leave or Active Military Service.

Signature of Employee <i>Hector T. Hidalgo</i>	Date Signed Feb 27, 1970
Address (Street, City, State, Zip Code) 403 SILVER ROCK RD Parkville MD 20851	Correspondence <input checked="" type="checkbox"/> Overt <input type="checkbox"/> Covert
IR 40 VARIATION HIGHGRO X6646	SECRET

SECRET

**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 any part.

2

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

NAME (last) HEDALOU JrBalme	(first) Nieves	(middle)	DATE OF BIRTH (month, day, year) May 27 1919	SOCIAL SECURITY NUMBER 123 05 9966
Employee Serial Number 27630			LOCATION (City, State, ZIP Code)	
EMPLOYING DEPARTMENT OR AGENCY				

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

 (A)

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

 (B)

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

 (C)

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

**SIGN AND DATE IF YOU MARKED BOX "A" OR "C".
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

13 February 1963

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
88-2039-PH-BG
13-102

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM NO. 170-2
JAN. 1964
(For use only until April 14, 1964)
170-101

STANDARD FORM 61
REVISED MARCH 1958
U. S. CIVIL SERVICE COMMISSION
F. P. M. CHAPTER 48

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, BALMES HIDALGO JR., do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

..... 17 Mar 58
(Date of entrance on duty)

James B. Hidalgo Jr.
(Signature of appointee)

Subscribed and sworn before me this 13 th day of March A. D. 1958,

at Washington, D.C.
(City)

D.C.
(State)

[SEAL]

Billing G. Burchell FEB 18 1958
(Signature of officer)
Appointment Clerk
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

14-30100-6

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1. PRESENT ADDRESS (Street and number, city and State)

70-4613 2nd Street NW - Washington, D. C.

2. (A) DATE OF BIRTH (B) PLACE OF BIRTH (city and State or city and foreign country)

27 May 1919 Philadelphia, Pennsylvania

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY (B) RELATIONSHIP (C) STREET AND NUMBER, CITY AND STATE (D) TELEPHONE NO.

Louise Hodalos wife 1115 E. 20th St., New York City 10003

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, OR IN CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? YES NO

If so, for each such relative fill in the data below. If additional space is necessary, complete under Item 12.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR. MARRIED (LAWFUL MARRIAGE)	SIN. SINGLE (LAWFUL MARRIAGE)
		1.			
		2.			
		3.			
		4.			
		5.			
		6.			
		7.			
		8.			

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

5. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?

If your answer is "Yes," give details in Item 12.

6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?

If your answer is "Yes," give details in Item 12.

7. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ALLOWANCE FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?

If your answer is "Yes," give details in Item 12.

8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE OR OTHER LAW ENFORCEMENT AUTHORITIES, FOR ANY VIOLATION OF ANY FEDERAL, STATE, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCE? DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINES OF \$100 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED.

If your answer is "Yes," give details in Item 12 for each case. (1) approximate date, (2) charge, (3) place, (4) action taken.

9. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BANNED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?

If your answer is "Yes," give dates of and reasons for each debarment in Item 12.

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply.)

ITEM NO.	ITEM NO.	ITEM NO.	ITEM NO.
.....
.....
.....
.....
.....
.....

EAS LEAVE FIELD CLEAR FOR FURTHER INFORMATION

INSTRUCTIONS TO APPOINTING OFFICER.—You must determine that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

SECRET
(Form Filled In)

LG

QUALIFICATIONS UPDATE

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

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

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

SECTION I		BIOGRAPHIC AND POSITION DATA				
EMP. SER. NO.	(NAME (Last-First-Middle))				DATE OF BIRTH	
027630	Hidalgo, Balmes N. Jr.				05/27/19	
SECTION II		EDUCATION				
LAST HIGH SCHOOL ATTENDED		ADDRESS (CITY STATE COUNTRY)			YEARS ATTENDED (From To)	
La Salle Academy		NYC NY			1938-1940	
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT	YEARS ATTENDED	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/GRD HRS. (Specify)
NY University		Comm Law INT-ESP	1943-45	NO		
UNIV of MD		Fire engineering	1968	No Credit Course		
Mont Jr College		Real Estate Procedures	1968	No Credit Course		

If a graduate degree has been noted above which required submission of a written thesis, indicate the title of the thesis and briefly describe its content.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS					
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
Suburban Hospital		Emergency Room procedures	EXAMINER	1968	3(?)
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE					
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
Non-Com leadership school			194?		?

SECTION III					MARITAL STATUS	
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled Marriage(s), SPECIFY.) MARRIED						
2. NAME OF SPOUSE (Last) HIDALGO		(First) Veronica	(Middle) Waylonis	(Widow)	Waylonis	
3. DATE OF BIRTH 23 May 14		4. PLACE OF BIRTH (City State Country) DuBois, Pa, USA				
5. OCCUPATION CIA		6. PRESENT EMPLOYER CIA				
7. CITIZENSHIP US		8. FORMER CITIZENSHIP (If Country) N/A			9. DATE U.S. CITIZENSHIP ACQUIRED Birth	
SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE						
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS		
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1945 NYC NY	US	Arlington, Va		
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1950 NYC NY	US	Alexandria Va		
14-513 (4) JUN 1968						

FORM 444a
2-68 ADD Mother 1892 SECRET SPAIN US ROCKVILLE MD

SECRET

SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF ENTRY	KNOWLEDGE ACQUIRED BY CHECK (X)	REASONS	STUDY
Havana, Cuba	Language, customs, people 1959-65			X	X	X
Rep. of Panama	" "	1952-58	Dec 20	X	X	X
El Salvador, Mexico	" "	various		X	X	X
Guatemala, Puerto Rico	" "	various		X	X	X
SECTION VI - TYPING AND STENOGRAPHIC SKILLS						
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK THE APPROPRIATE ITEM				
		<input type="checkbox"/> CHI	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOGRAPHY	<input type="checkbox"/> OTHER SPECIFIC	
SECTION VII - SPECIAL QUALIFICATIONS						
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED						
Extremely capable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.						
SECTION VIII - MILITARY SERVICE						
CURRENT DRAFT STATUS						
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION					
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO N/A					
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON					
N/A	N/A					
MILITARY RESERVE, NATIONAL GUARD STATUS						
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> AIR NATIONAL GUARD				
NONE						
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT OBLIGATION				
N/A	N/A	N/A				
4. CHECK CURRENT RESERVE CATEGORY						
<input type="checkbox"/> READY RESERVE	<input type="checkbox"/> STANDBY (ARMED)	<input type="checkbox"/> STANDBY (ACTIVE)	<input type="checkbox"/> RETIRED	<input checked="" type="checkbox"/> DISCHARGED		
5. MILITARY MOBILIZATION	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED					
N/A	N/A					
MILITARY SCHOOLS COMPLETED (Excluded Active, Reserve Duty, or as Civilian)						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		DATE COMPLETED		RESIDENT	
Non-Civ leadership school	same		????		AGENCY SPONSORED	
SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS						
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP		
American Red Cross	Silver Spring Md			FROM	TO	present
Rockville Fire Dept and OTHERS	(presently Rockville, Md)			1964		present
International Rescue & 1st Aid Assoc	worldwide			1958		present
Montgomery Board of Realtors (ASSOCIATE member)(Participation pending)				1956(7)		present
				1958		present
SECTION X - REFERENCES						
I am a bit hazy on the dates.						
DATE 19 Dec 68	SIGNATURE OF EMPLOYEE					
<i>Robert H. H.</i>						

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SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY CHECKS	WORK	STUDY	GONE ABSENT
Cuba	Area and people/Lan.	1919-1924	Family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Panama	Area and people/Lan	1952-58	Holiday	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dom Rep	Area and People/Lan	1965		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Salvador/Guatemala		1961-2-3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SECTION VI & Mex - TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK IN APPROPRIATE ITEM					
		<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:		

SECTION VII - SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON Hobbies, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED							
Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Coppeman duties. SOME Real Estate knowledge.							

SECTION VIII - MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?		2. NEW CLASSIFICATION See age					
<input type="checkbox"/> YES	<input type="checkbox"/> NO						
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			

MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
NONE		<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/>	<input type="checkbox"/> AIR NATIONAL GUARD		

1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT OBLIGATION
N/A	N/A	N/A

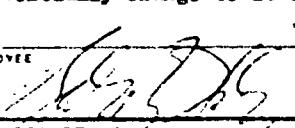
4. CHECK CURRENT RESERVE CATEGORY	READY RESERVE	STANDBY(MARINE)	STANDBY(GUARD)	RETIRED	<input checked="" type="checkbox"/> DISCHARGED

5. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
N/A	N/A

MILITARY SCHOOLS COMPLETED (Excluded Active, Reserve Duty, or Civilian)							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	REMARKS				
Non-Com leadership school	Infantry	1943	N/A				
			N/A SPONSORED				

SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP			
Rockville Fire Dept & others	Rockville Md & others			FROM	TO		
Red Cross as Emergency transport and				1958	present		
First-Aid Instructor as well as Md Corpseman				1964			
Associate member Mont Realtors				1968			
Int Assoc Rescuers & First Aid				1964			

SECTION X - REMARKS							
Re Section IV: Both daughters now married. Re Section III: This is second marriage. Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.							

DATE	SIGNATURE OF EMPLOYEE
25 Nov 68	

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(Form Filled In)

QUALIFICATIONS UPDATE

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

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 4441, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I

BIOGRAPHIC AND POSITION DATA

EMP. SER. NO.	NAME (Last-First-Middle)	DATE OF BIRTH
027630	Hidalgo, Balme N.	05/27/19

SECTION II

EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State Country)	YEARS ATTENDED (From-To)	GRADUATE
La Salle Academy	NYC NY	1938-40	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM - TO -	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)
	MAJOR	MINOR				
1. New York University	Comm Law Import-Export procedures		1943/45	NO		
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
University of Md. College of Engineering	Fire Service extension	Jan 66	Aug 66	8

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
Montgomery Junior College Rockville, Md Campus	Real Estate procedures	Oct 1968		1
Suburban Hospital Bethesda, Md	Emergency Medical Aid/ Maryland State Corpman	Jan-May 1968		5

SECTION III

MARITAL STATUS

1. PRESENT STATUS (Single, Married, Separated, Divorced, Annulled, Remarried) SPECIFY:	Married		
2. NAME OF SPOUSE (Last) HIDALGO (First) Veronica (Middle) (Maiden) (WAYLONES)			

3. DATE OF BIRTH May 29 1914	4. PLACE OF BIRTH (City, State Country) DuBois, Pa., USA			
--	--	--	--	--

5. OCCUPATION Admin Asst	6. PRESENT EMPLOYER C.I.A.			
------------------------------------	--------------------------------------	--	--	--

7. CITIZENSHIP US	8. FORMER CITIZENSHIP(S) COUNTRY(IES) N/A	9. DATE U.S. CITIZENSHIP ACQUIRED Birth		
-----------------------------	---	---	--	--

SECTION IV

DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Feb 23/50	US	Alexandria Va
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Jan 6/45	US	Arlington Va

ALSO FIRST AID INSTRUCTORS Course of one to four hours.

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When Filled In:

LLC

OFFICIAL USE ONLY until 12/31/68

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

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

SECTION 1		BIOGRAPHIC AND POSITION DATA		
1 EMP. SER. NO.	2 NAME (Last, First, Middle)	3 SEX	4 DATE OF BIRTH	5 SCHEDULE GRADE/STEP
027030	MICALGO B N JR	M	03/27/19	GS - 22-04
6 SD	7 POSITION TITLE	8 OFFICE OF ASSIGNMENT	9 LOCATION (Country/City)	
D	CPS OFFICER	W4	WASH., D.C.	
SECTION 2 AGENCY OVERSEAS SERVICE				
AREA	TYPE TOUR	FROM	TO	
PANAMA & WESTERN HEMISPHERE	PCS-VV	52/05/12	57/12/30	
WESTERN HEMISPHERE	TDY-CC	59/01/29	59/02/08	
WESTERN HEMISPHERE	TDY-CC	63/02/08	01/03/01	
WESTERN HEMISPHERE	TDY-CC	61/04/19	61/06/19	
EUROPEAN AREA	TDY-CC	63/12/01	63/12/18	
WESTERN HEMISPHERE	PCS-CC	60/04/31	60/05/01	
WESTERN HEMISPHERE	TDY-CC	63/04/01	64/04/01	
WESTERN HEMISPHERE	TDY-CC	65/12/11	66/12/11	
		THREE WEEKS		

OVERSEAS DATA

CODED 25 APR 1968

DATE: INITIALS: [initials]

SECTION 3		EDUCATION	
DEGREE	MAJOR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			
NONE	Two years - Commercial Latin IMPERIAL ENGLISH, Philadelphia	NYU	1943-45

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When filled in

SECTION II		EDUCATION (Cont'd)					
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED Loy Salle Academy	ADDRESS OF STATE COUNTY NYC NY			YEARS ATTENDED FROM TO 1938-40	GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO SEM / QTR MOS / SEMS	
	MAJOR	MINOR					
NYU - NYC NY	Commerce	LAW	Sept 43 to ? 45	No		777	
2							
3							
4							
3. IF A GRADUATE COURSE HAS BEEN NOTED ABOVE, INDICATE SUBJECT, DATE OF WRITTEN THESIS AND GIVE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT OAEW2E42 DUNN							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS		
1							
2							
3							
4							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS		
1							
2							
3							
4							
5							
AGENCY SPONSORED EDUCATION							
Specify which, if any, of the education shown in Section II was Agency sponsored							
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS		
1 Full Ops course			During 1958		9		
Management Course			1966 one week				
3							
4							
5							

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SECTION VII				MILITARY SERVICE			
CURRENT DRAFT STATUS							
1. ARE YOU REGISTERED FOR THE DRAFT		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	2. SELECTIVE SERVICE CLASSIFICATION		???	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS		N/A		4. IF DEFERRED, GIVE REASON		N/A	
MILITARY SERVICE RECORD (Active Duty Only)							
1. MILITARY ORGANIZATION (Area Army or Command)		2. BRANCH OF SERVICE		3. DATES OF SERVICE		extended active duty	
Army		Infantry		FROM Oct 1940 TO Sept 1943			
4. STATUS (Regular Reserve or National Guard)		5. RANK GRADE OR RATE OF SEPARATION, IF NOT ACTIVE		6. SERIAL SERVICE OR FILE NUMBER			
Federalized National Guard		Cpl.		20249766			
7. CHECK TYPE OF SEPARATION		<input checked="" type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR AGE		<input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input checked="" type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY		<input type="checkbox"/> UNDUE HARSHIPS <input type="checkbox"/> OTHER (Specify)	
8. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate the duties and the dates when best describe your work or function in the military service)							
Infantryman; Cryptographic section; driver.							
MILITARY RESERVE/NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG None		<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
		<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE	<input type="checkbox"/> AIR NATIONAL GUARD			
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY ACTIVE <input type="checkbox"/> STANDBY INACTIVE <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED							
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (Indicate the duties and the dates when best describe your work or function in the military service)							
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT IDENTIFY THE UNIT AND ITS ADDRESS							
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)							
NAME AND ADDRESS OF SCHOOL		SCHOOL OR SPECIALIZATION		DATE COMPLETED			
1.						RESIDENT	
2.						CORRESPONDENCE	
3.						AGENCY SPONSORED	
4.						RESIDENT	
5.						CORRESPONDENCE	
						AGENCY SPONSORED	
						RESIDENT	
						CORRESPONDENCE	
						AGENCY SPONSORED	

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(When filled in)

SECTION IV				GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL			
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK (X)			
				RES- DENCE	TRAV- EL	SPEC-	WORK ASSOC- IATION
Cuba	Language-Area knowledge	1919-1924	—	X			
Panama	" " "	1952-58		X			X
Puerto Rico	" " "	various			X		X
Guatemala	" " "	various			X		X
El Salvador	" " "	various			X		X
Mexico	" " "	various			X		X
Dom Rep	" Limited area knowledge	1965					X
Germany	" " "	1963					X
Scotland	" " "	1963					X

SECTION V				TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM					
40		<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIES		
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (COMPUTER, TELETYPE, TELETYPE CARD PUNCH, ETC.)							
Various							

SECTION VI				SPECIAL QUALIFICATIONS			
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED INDICATE YOUR PROFICIENCY IN EACH							
First Aid Instructor. Very active currently.							
Fire Fighting and safety practices. University of Maryland. Active currently.							
Sky Diving - 10 jumps during 1962. Done once.							
2. FACULTORY BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4. SPECIFICALLY LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (radio, tv, speed reading & recording, OFFSET PRESS, TURRET LATHE, ETC) AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES							
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
4. IF YOU HAVE ANSWERED 'YES' TO ITEM 3 ABOVE INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license number if known)							
First Aid Instructor - National Red Cross - 1963							
5. FIRST LICENSE/CERTIFICATE (Year of issue) 1963							
6. LATEST LICENSE/CERTIFICATE (Year of issue)							
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. DO NOT SUBMIT COPIES UNLESS REQUESTED. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Fiction or scientific articles, general interest, scholarly works, short stories, etc.)							
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED							
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE							

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(When filled in)

SECTION IX		MARITAL STATUS		
1 PRESENT STATUS (Do you Marry, Widowed, Separated, Divorced, Single, Remarried, SPECIFY?)		MARRIED		
2 NAME OF SPOUSE HIDALGO		Veronica		WATLONES
3 DATE OF BIRTH May 23 1914		4 PLACE OF BIRTH (City, State, Country) DuBois, Pa., USA.		
5 OCCUPATION Administrative Asst		6 PRESENT EMPLOYER CIA		
7 CITIZENSHIP US		8 FORMER CITIZENSHIP (COUNTRY/IES) None		9 DATE U.S. CITIZENSHIP ACQUIRED N/A
SECTION X DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
Frances R. Hidalgo	daughter	Feb 23 1950 NYC NY	US	Alexandria, Va
Balmes N. Hidalgo Sr.	father	Dec 15 1890 Puerto Rico	US	NYC NY
Rosa Hidalgo	mother	Jan 12 1892 Spain	US	NYC NY
SECTION XI PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS				
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, County)			DATE OF MEMBERSHIP
			FROM	TO
American Red Cross Civil Defense team	Montgomery Ctry, Md.			1964 present
Franconia Volunteer Fire Department	Franconia, Va			1958 1963
Rockville Volunteer Fire Department	Rockville, Md.			1964 present
International Rescue and First Aid Association				1967 present
DATE 9 Feb 1968	SIGNATURE OF EMPLOYEE <i>Veronica Hidalgo</i>			

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1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					2. LONG.											
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH												
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (26-33)												
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)												
AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE	NOT AWARDABLE											
SKILL						A	M											
14. I CERTIFY THIS EMPLOYEE FOR AWARD						15. TYPE OF AWARD												
SIGNATURE			DATE			<table border="1"> <tr><td>A-M</td><td>E-I-H</td><td>C</td><td>R-W-S</td><td>D-V</td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </table>			A-M	E-I-H	C	R-W-S	D-V					
A-M	E-I-H	C	R-W-S	D-V														
16. AMOUNT OF AWARD \$						17. I CERTIFY THAT FUNDS ARE AVAILABLE OBLIGATION REF. NO. SIGNATURE												
18. FEDERAL TAX DEDUCTION \$						20. CHARGE ALLOTMENT NO. DATE												
19. STATE/DC TAX DEDUCTION \$						22. EMPLOYEE PAYROLL NO.												
21. NET AMOUNT OF AWARD \$						24. ALLOTMENT OF ASSIGNMENT												
23. FORWARD CHECK TO						25. CHECK NO. DATE												

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(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					2. LONG.											
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH												
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (26-33)												
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)												
AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE	NOT AWARDABLE											
SKILL						A	M											
14. I CERTIFY THIS EMPLOYEE FOR AWARD						15. TYPE OF AWARD												
SIGNATURE			DATE			<table border="1"> <tr><td>A-M</td><td>E-I-H</td><td>C</td><td>R-W-S</td><td>D-V</td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </table>			A-M	E-I-H	C	R-W-S	D-V					
A-M	E-I-H	C	R-W-S	D-V														
16. AMOUNT OF AWARD \$						17. I CERTIFY THAT FUNDS ARE AVAILABLE OBLIGATION REF. NO. SIGNATURE												
18. FEDERAL TAX DEDUCTION \$						20. CHARGE ALLOTMENT NO. DATE												
19. STATE/DC TAX DEDUCTION \$						22. EMPLOYEE PAYROLL NO.												
21. NET AMOUNT OF AWARD \$						24. ALLOTMENT OF ASSIGNMENT												
23. FORWARD CHECK TO						25. CHECK NO. DATE												

FORM 4-58 1273 USE PREVIOUS EDITIONS

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(When Filled In)

11-61 127 630	LANGUAGE DATA RECORD		
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-241) Hidalgo, Balmes Nieves JR	2. DATE OF BIRTH (E25-301) May 27 1912		
3. LANGUAGE (431-331) Spanish 720	4. TODAY'S DATE (134-331) May 9 1958	5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (NEWSPAPERS, REFERENCE MATERIALS, ETC.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.			
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.			
5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
1. <input checked="" type="checkbox"/> MY PRONUNCIATION IS NATIVE.			
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.			
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

CONTINUATION OF PART II-LANGUAGE ELEMENTS

SECTION D. Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E. Understanding (14)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 23-115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
9 May 1958	<i>Halmay, H. H. [Signature]</i>
(46)	C
(47)	A

SECRET

(When Filled In)

(1-6)	LANGUAGE DATA RECORD		
127630			
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-24)	2. DATE OF BIRTH (25-30)		
Hidalgo, Balme Nieves JR	MONTH	DAY	YEAR
May	27	1919	
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-39)	5.	
Portuguese 630	May 9 1958	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
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3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE; USING THE DICTIONARY FREQUENTLY.			
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3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

CONTINUATION OF PART III-LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
9-May-1958	<i>Salam, b' Yabiray,</i>
1461	1473

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SECURITY APPROVAL

DATE : 17 April 1964

YOUR
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

SUBJECT : HIDALGO, Balmes Nieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

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

A personal interview is not necessary.

Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

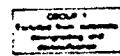
4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:

W. A. Osborne

W. A. Osborne

Chief, Personnel Security Division



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(When Filled In)

STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : #65077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : [REDACTED] Heddyce R. Jr.

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Operations Officer under Project JMWAVE.

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.

W. A. Osborne

W. A. Osborne

CHIEF, PERSONNEL SECURITY SECTION, OS

JMA

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 10 March 1958

**YOUR
REFERENCE:**

CASE NO. : 65077

TO : Director of Personnel
FROM : Director of Security
SUBJECT : HIDALGO, Balmes Nieves

1. This is to inform you of security approval of the subject person as follows:

- Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.
- Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

- A personal interview in the Office of Security must be arranged.
- A personal interview is not necessary.
- This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

W. M. Knott
W. M. Knott
Chief, Personnel Security Division

~~SECRET~~

BIOGRAPHIC INFORMATION

Name: Balmeo N. HIDALGO, Jr.
Grade: GS-11
Service Designation: CI

Date and Place of Birth: 27 May 1919
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1943-46 New York University - No degree (2 yrs)
Nov 46-Dec 49 FBI, Eastern part of United States -
Undercover Agent

Languages: Spanish - Fluent
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard
(Federalized Oct 40) U.S. Army

CIA Experience: 18 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/RH/
HYPOTHESIS, Panama City, Panama
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/RH,
HYPOTHESIS, Panama City, Panama

CIA Training: Covert training

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(Not Padded)

<p>INSTRUCTIONS: COMPLETION IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLEGED IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCY 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.</p>					
NAME OF EMPLOYEE		(Last)	(First)	(Middle)	
		HIDALGO JR			
		BALMES			
		NIEVES			
1. RESIDENCE DATA					
PLACE OF RESIDENCE WHEN APPOINTED		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)			
D.C.					
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE					
D.C.					
2. MARITAL STATUS					
<p>CHECK (EX-ONE): <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED</p>					
<p>If MARRIED, INDICATE PLACE OF MARRIAGE BIG LEBONI MISS. USA DATE OF MARRIAGE 9 APR 1943</p>					
<p>If DIVORCED, PLACE OF DIVORCE DECREE</p>					
<p>If WIDOWED, INDICATE PLACE SPOUSE DIED</p>					
<p>If PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)</p>					
3. MEMBERS OF FAMILY					
NAME OF SPOUSE		ADDRESS (No., Street, City, Zone, State)			TELEPHONE NUMBER
Louise HIDALGO					
NAME OF CHILDREN		ADDRESS			SEX F AGE 13
Luz Maria					F 8
Frances Rebecca					
NAME OF FATHER (Or male guardian)		ADDRESS			TELEPHONE NUMBER
PALMES N HIDALGO					
NAME OF MOTHER (Or female guardian)		ADDRESS			TELEPHONE NUMBER
Rose HIDALGO					
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES?					
<p>WIFE</p>					
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY					
NAME (Mr., Mrs., Miss) (Last-First-Middle)					RELATIONSHIP
HIDALGO, Louise					Wife
HOME ADDRESS (No., Street, City, Zone, State)					HOME TELEPHONE NUMBER
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE					BUSINESS TELEPHONE & EXTENSION
IS THE INDIVIDUAL NAMED ABOVE KNITTING OF YOUR AGENCY AFFILIATION?					
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>					
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF?					
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>					
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE?					
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>					
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 7 ON THE REVERSE SIDE OF THIS FORM.					
5. VOLUNTARY ENTRIES					
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS					
GREENWICH SAVINGS BANK					
CONTINUED ON REVERSE SIDE					
CURRENT RESIDENCE AND DEPENDENCY REPORT					

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FBI - San Francisco

5. (CONTINUED)

IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?

*John G. Phillips*HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. IF "YES", WHERE IS DOCUMENT LOCATED?HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

Do NOT notify other persons in item 3 of
EMERGENCY, UNLESS wife is NOT AVAILABLE.

SIGNED AT	DATE	SIGNATURE
<i>John G. Phillips</i>		

CONFIDENTIAL

STANDARD FORM 144
JANUARY 1952
U. S. CIVIL SERVICE COMMISSION
(FPM CHAPTERS LI AND R3)

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

IMPORTANT: The information on this form will be used in determining creditable service for leave purposes and retention credits for reduction in force. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I.—EMPLOYEE'S STATEMENT												PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE		
1. NAME (Last, first, middle initial)						2. DATE OF BIRTH						9. RETENTION GROUP		
HIDALGO JR., BALMEES NERVIES						27 MNY 1919						<input type="checkbox"/> YES <input type="checkbox"/> NO		
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service).												10. CSC STATUS (For permanent employees only)		
NAME AND LOCATION OF AGENCY		FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN			11. SERVICE			
		YEAR	MONTH	DAY	YEAR	MONTH	DAY				YEAR	MONTH	DAY	
US ARMY DEPT OF Defense QUARTERMASTER CORP		51	1	12	Recent to						7	2	6	
4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."												12. TOTAL SERVICE		
BRANCH		FROM—			TO—			DISCHARGE (Hon. or dishon.)			13. NONCREDITABLE SERVICE (Leave purposes only)			
		YEAR	MONTH	DAY	YEAR	MONTH	DAY				YEAR	MONTH	DAY	
U.S. ARMY INS		1935	MAR	27	43	SEP	21	HONORABLE			4	5	25	
5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "YES," list following information.)												14. NONCREDITABLE SERVICE (RIF purposes only)		
TYPE IF KNOWN (LWOP, Furl, Susp, AWOL, Mer Mar)		FROM—			TO—			TOTAL			15. REEMPLOYMENT RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
		YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS	YEAR	MONTH	DAY	
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)												16. RETENTION RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO		
7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNMARRIED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												17. EXPIRATION DATE OF RETENTION RIGHTS		
8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.														
_____ (DATE)						_____ (SIGNATURE)								
Subscribed and sworn to before me on this 13th day of Mar 1958 at Washington, D.C.												(MONTH) (CITY) (STATE)		
S E A L												_____ Betty A. Bussard		
NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.												(OVER)		

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

YEARS	MONTHS	DAYS

58	3	17
11	8	1
46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 14)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (RIF purposes)

SERVICE COMPUTATION DATE (RIF purposes)

YEARS	MONTHS	DAYS

REMARKS:

14-00000

PERSONAL HISTORY STATEMENT

INSTRUCTIONS: Fill in the following form with your personal history information. Use the space provided to answer each question. If you do not know the answer to a question, leave it blank. Do not write in the margins or on the back of the form.

DO NOT SIGN THIS FORM. It is a violation of law to sign this form if you have not read and understood the instructions.

PERSONAL BACKGROUND

NAME: [REDACTED]
ADDRESS: [REDACTED]
CITY: [REDACTED]
STATE: [REDACTED]
ZIP CODE: [REDACTED]

EDUCATION

SCHOOL ATTENDED: [REDACTED]
GRADE: [REDACTED]
YEAR: [REDACTED]

EMPLOYMENT

EMPLOYER: [REDACTED]
POSITION: [REDACTED]
HOURS: [REDACTED]
SALARIES: [REDACTED]

RELIGION

RELIGION: [REDACTED]
CHURCH: [REDACTED]

HOBBIES

HOBBIESTS: [REDACTED]

INTERESTS

INTERESTS: [REDACTED]

PERSONAL INFORMATION

NAME: [REDACTED]
ADDRESS: [REDACTED]
CITY: [REDACTED]
STATE: [REDACTED]
ZIP CODE: [REDACTED]

EDUCATION

SCHOOL ATTENDED: [REDACTED]
GRADE: [REDACTED]
YEAR: [REDACTED]

EMPLOYMENT

EMPLOYER: [REDACTED]
POSITION: [REDACTED]
HOURS: [REDACTED]
SALARIES: [REDACTED]

RELIGION

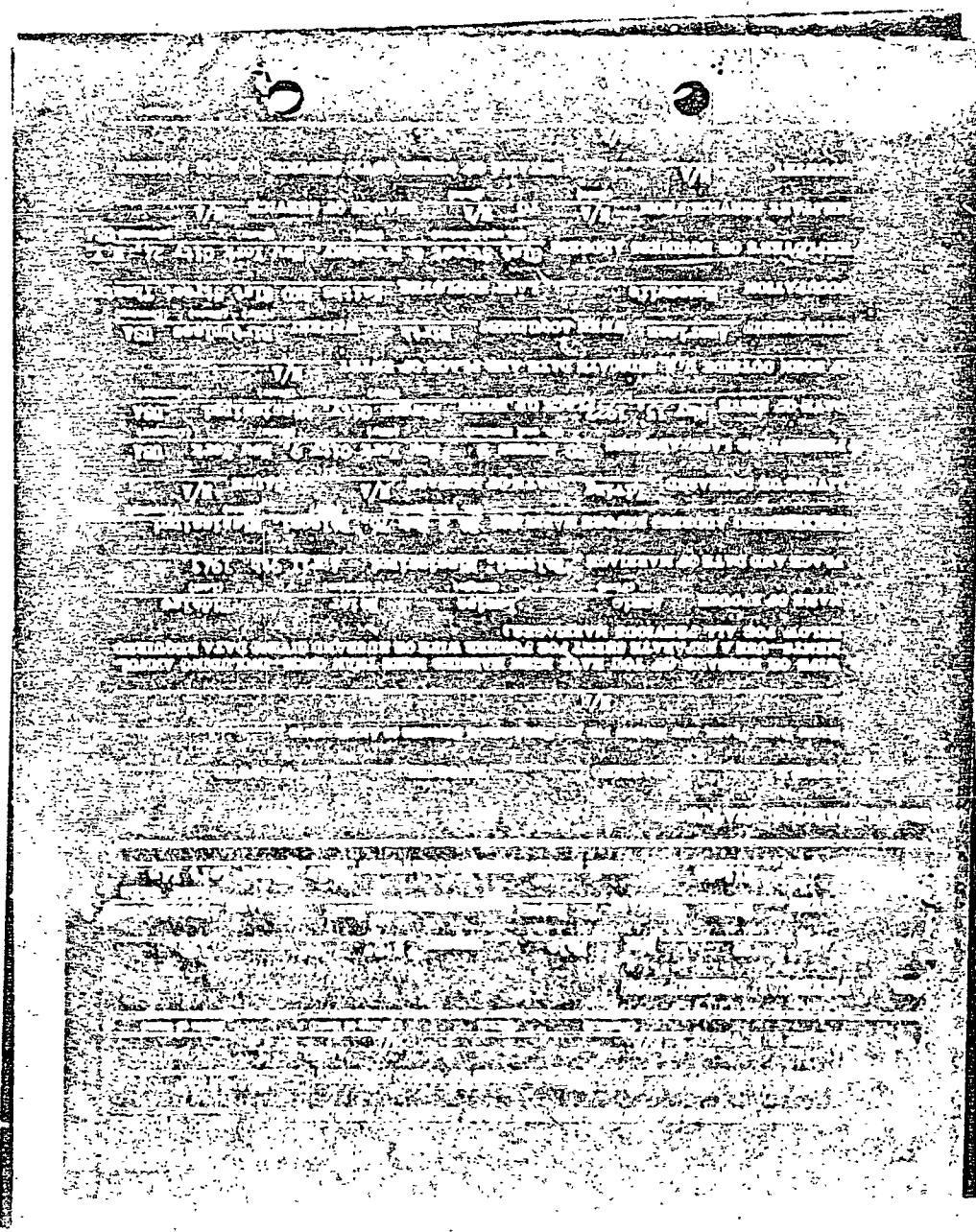
RELIGION: [REDACTED]
CHURCH: [REDACTED]

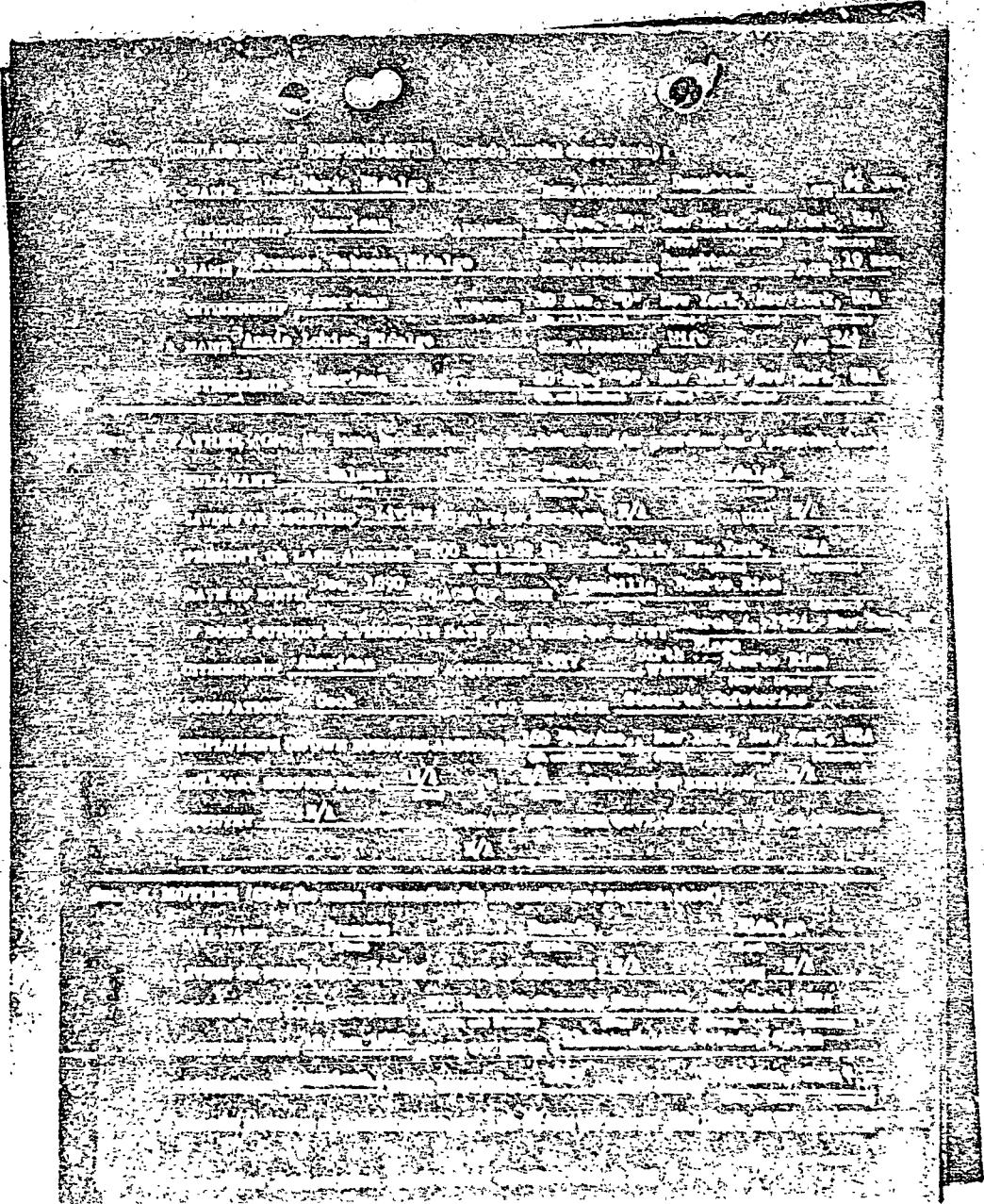
HOBBIES

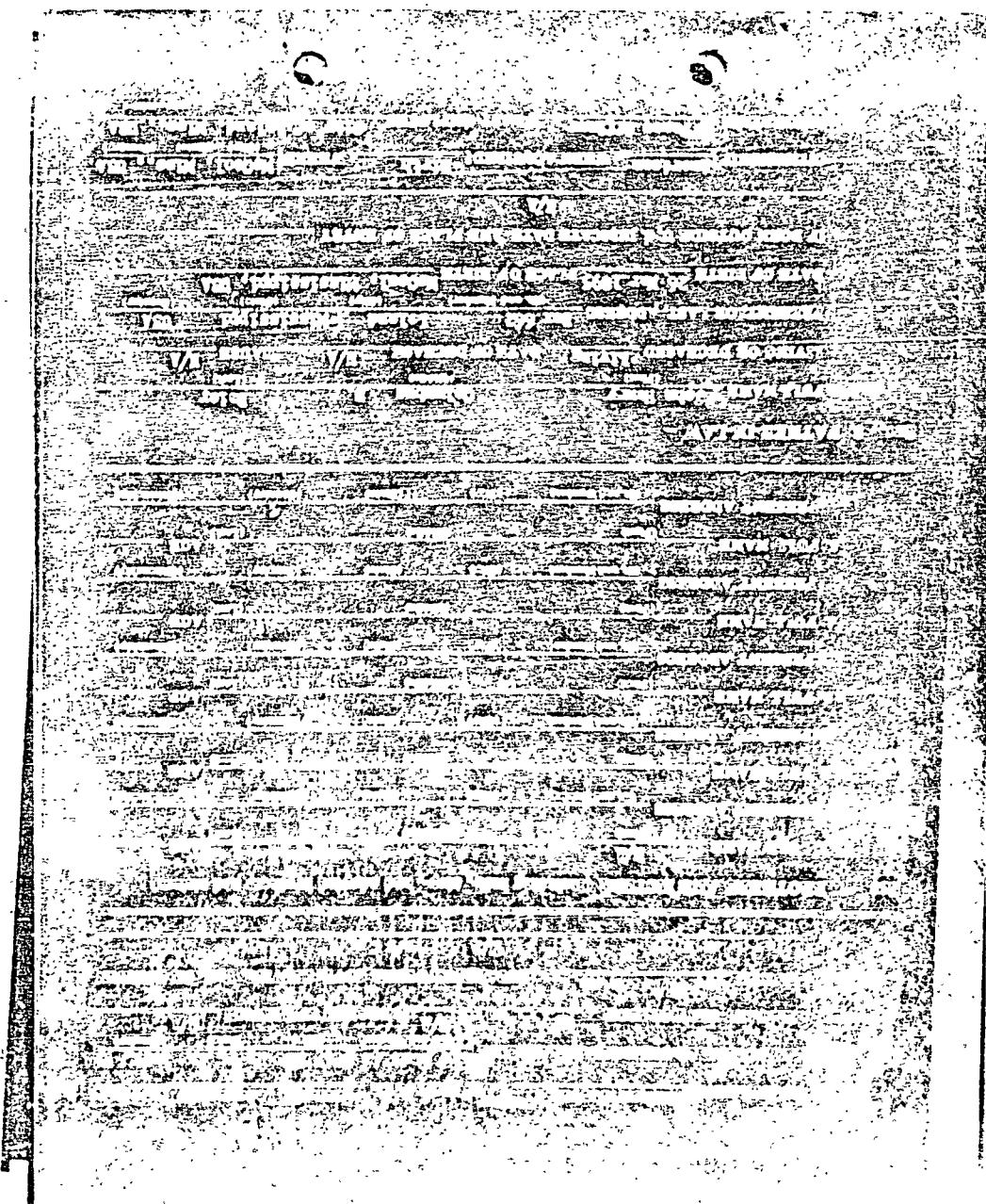
HOBBIESTS: [REDACTED]

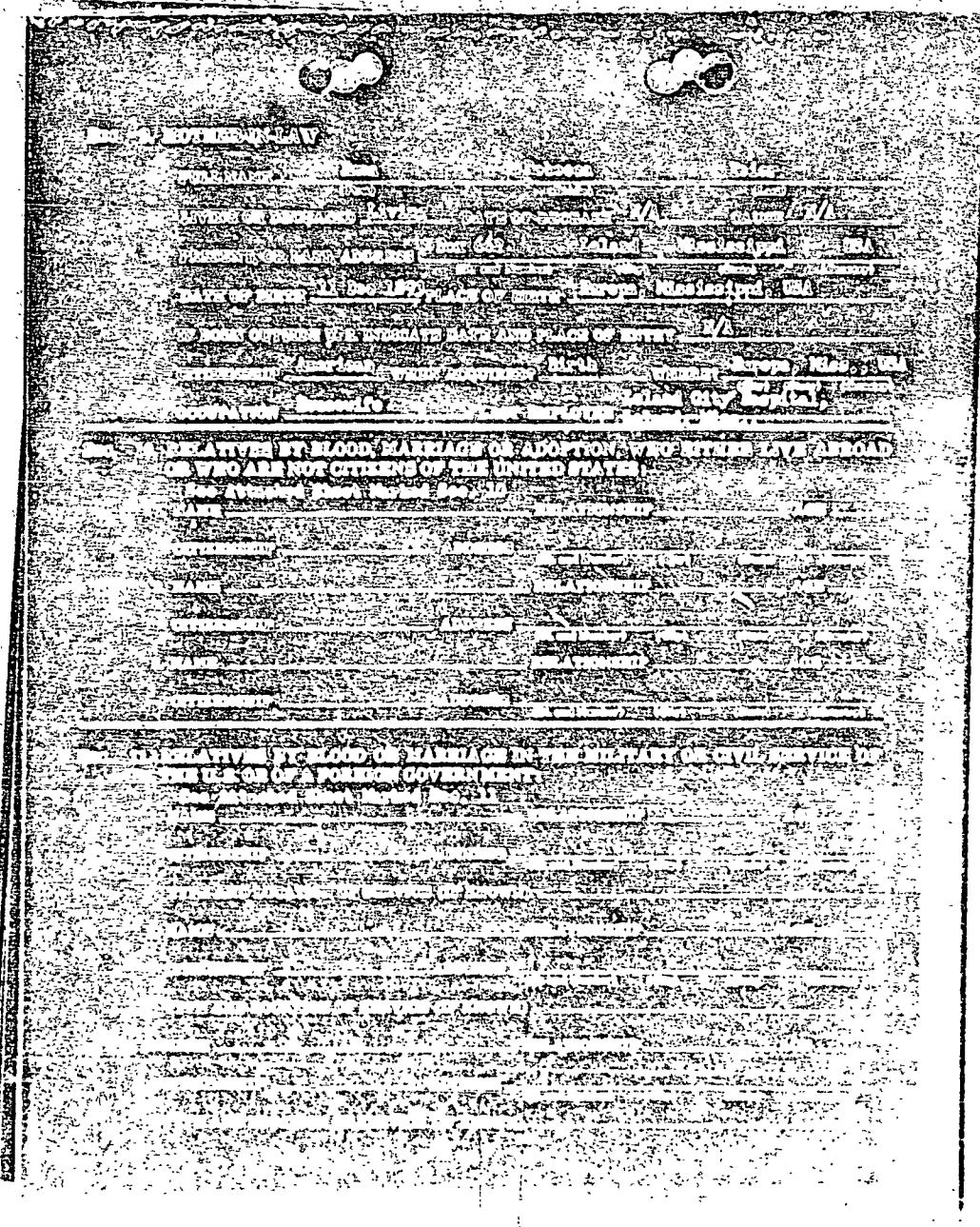
INTERESTS

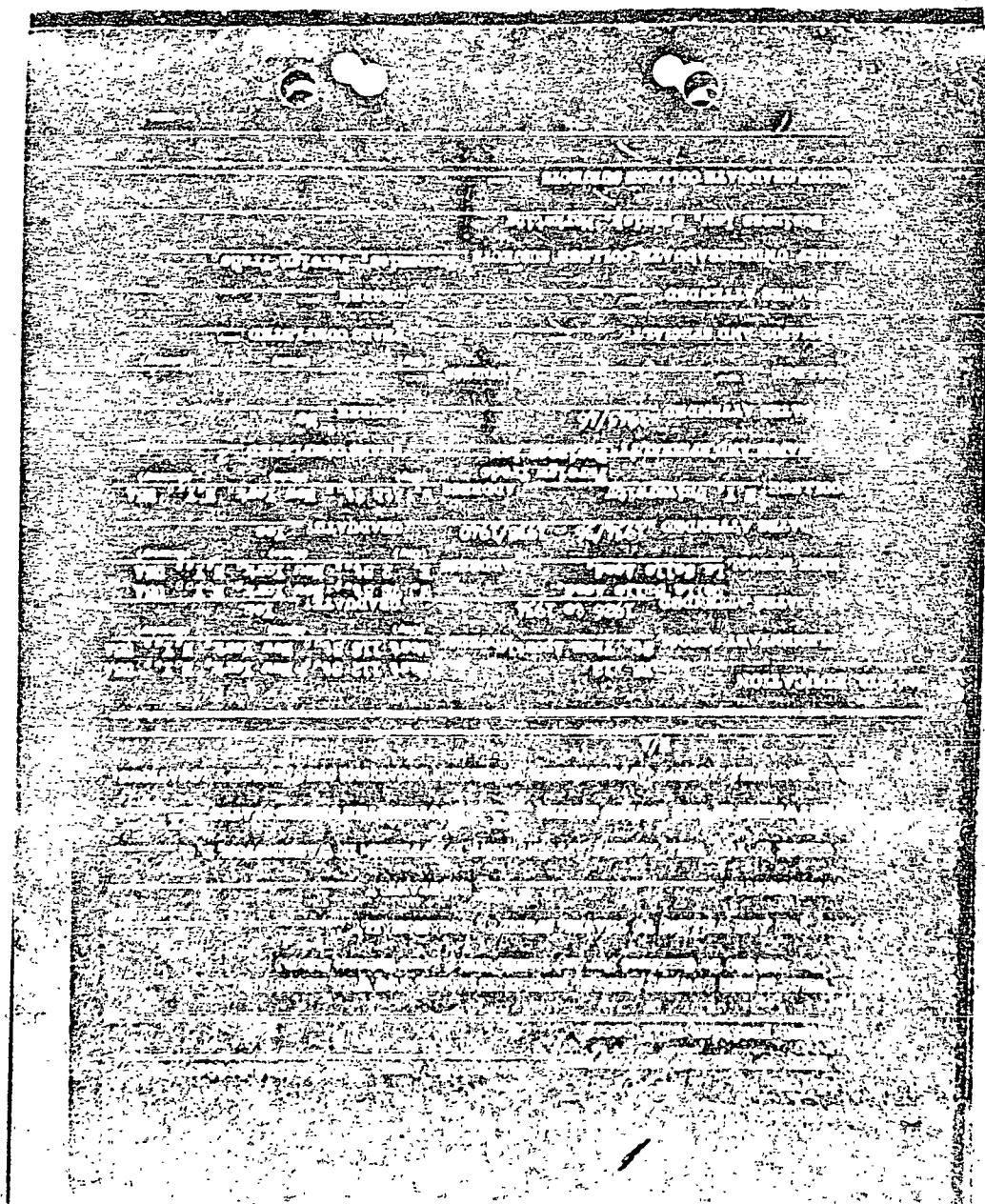
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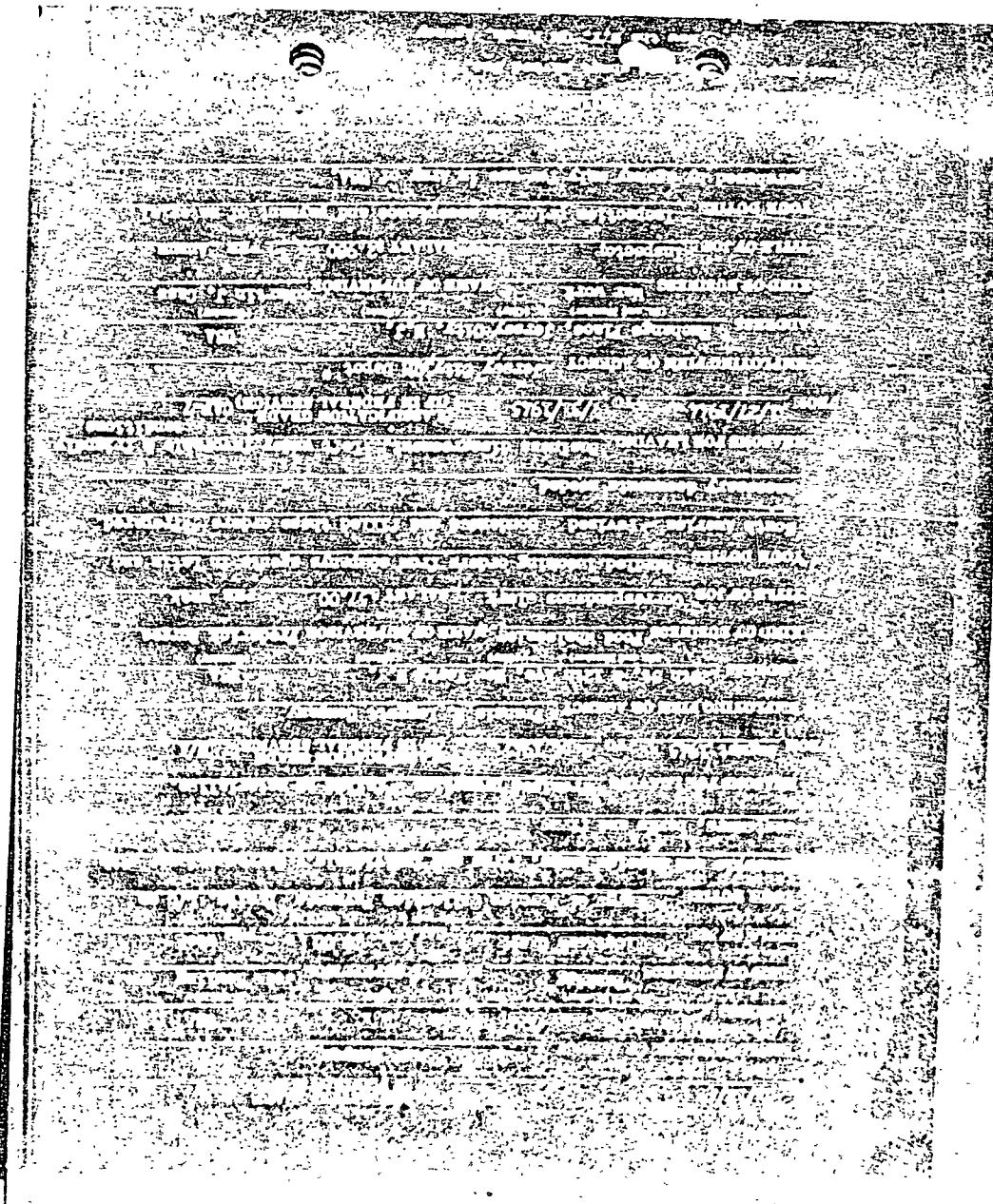


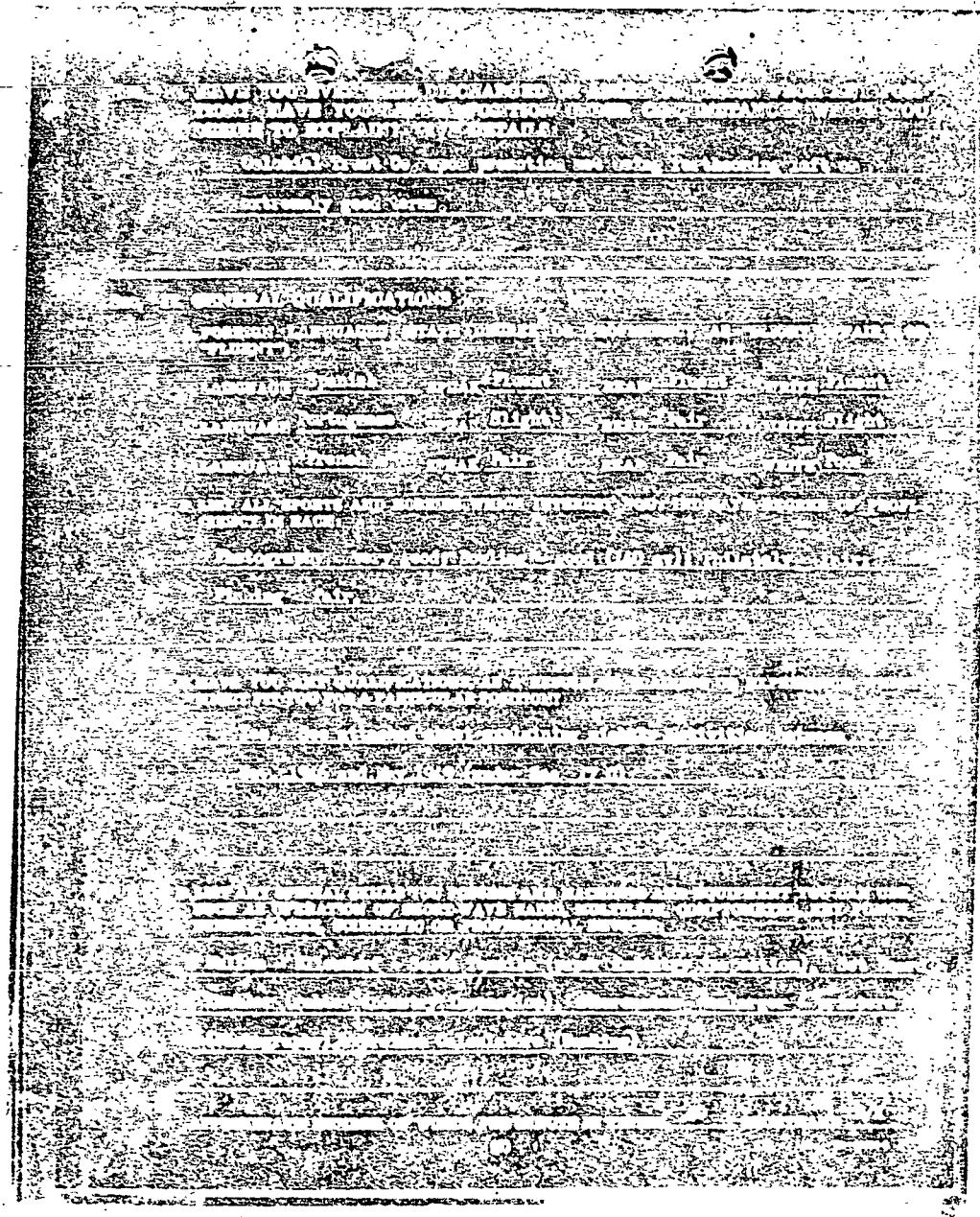


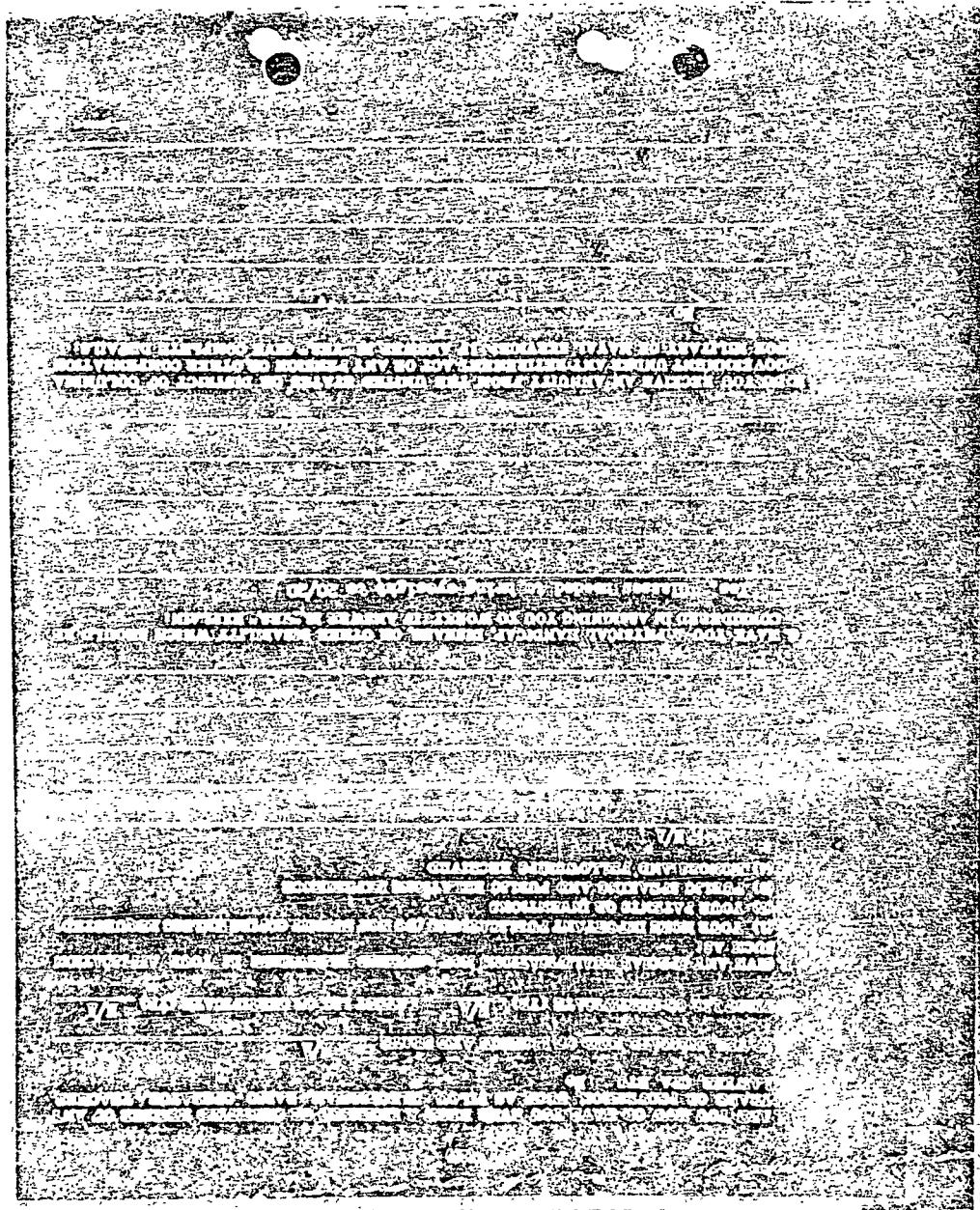


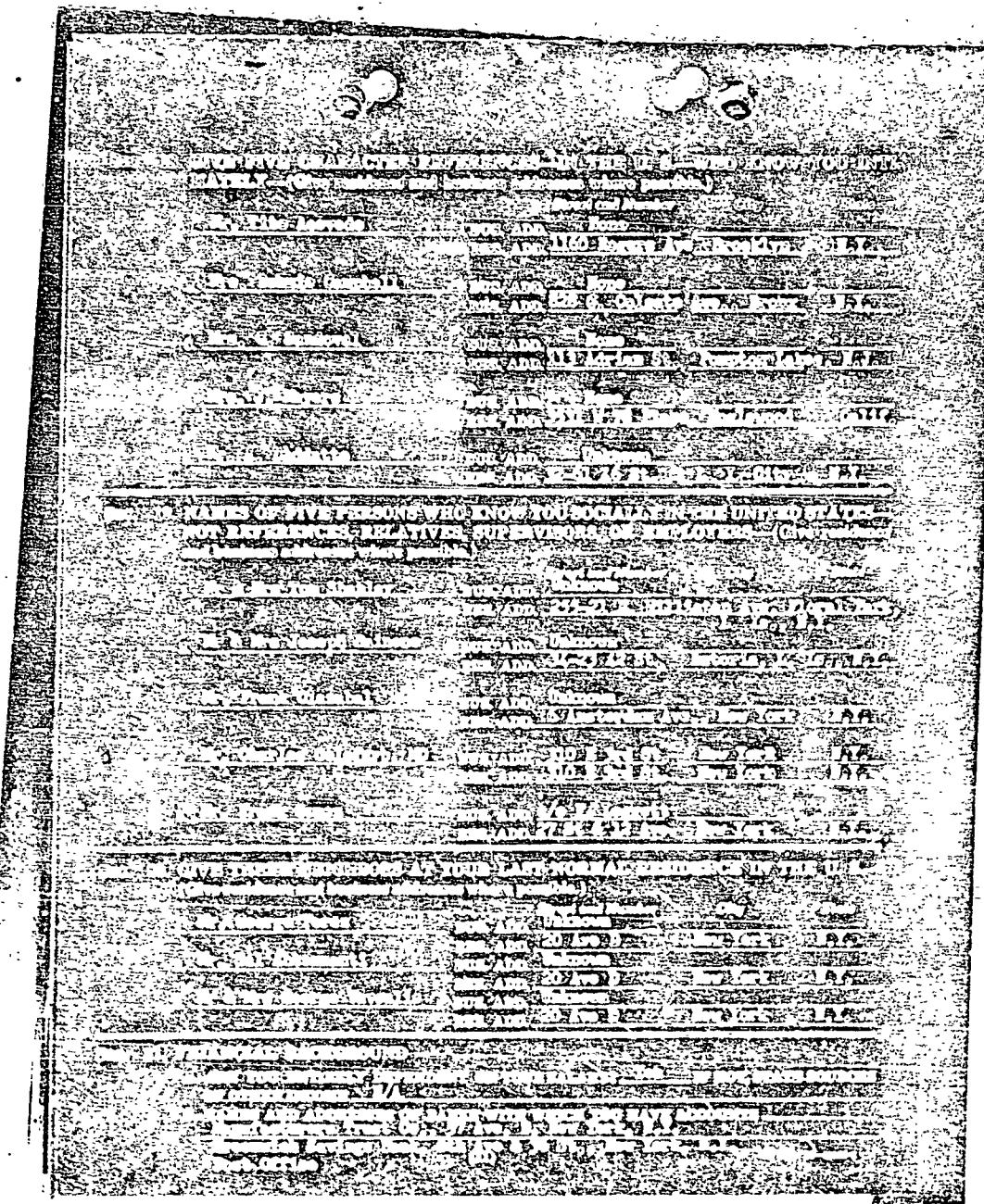
STATEMENT OF EMPLOYMENT HISTORY

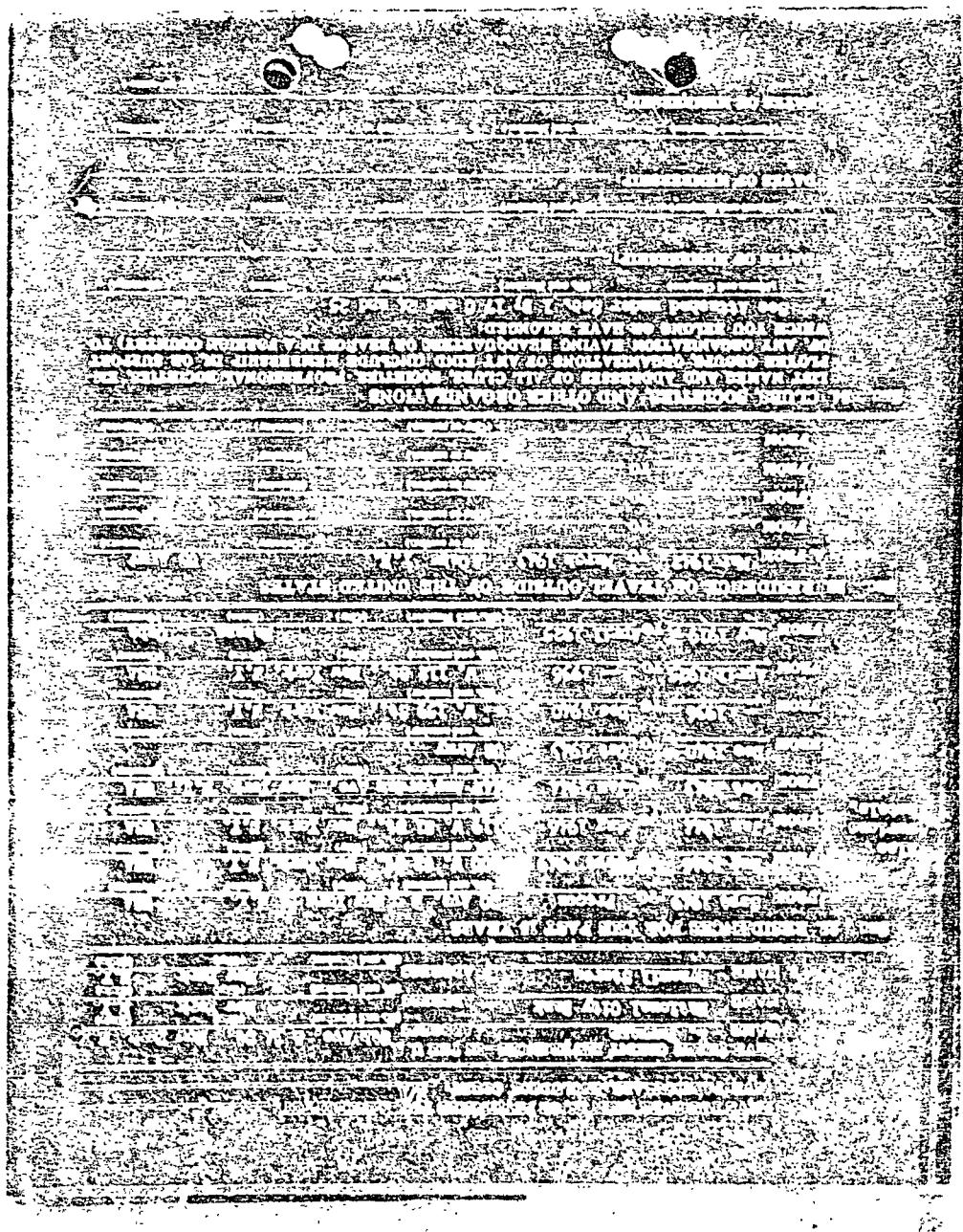
CHRONOLOGICAL LISTING OF EMPLOYMENT. FOR PART-TIME MAKE A SEPARATE ACCOUNT
FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS
OF UNEMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING
PERIOD OF UNEMPLOYMENT. USE LAST POSITION HELD AS A
SAMPLE.

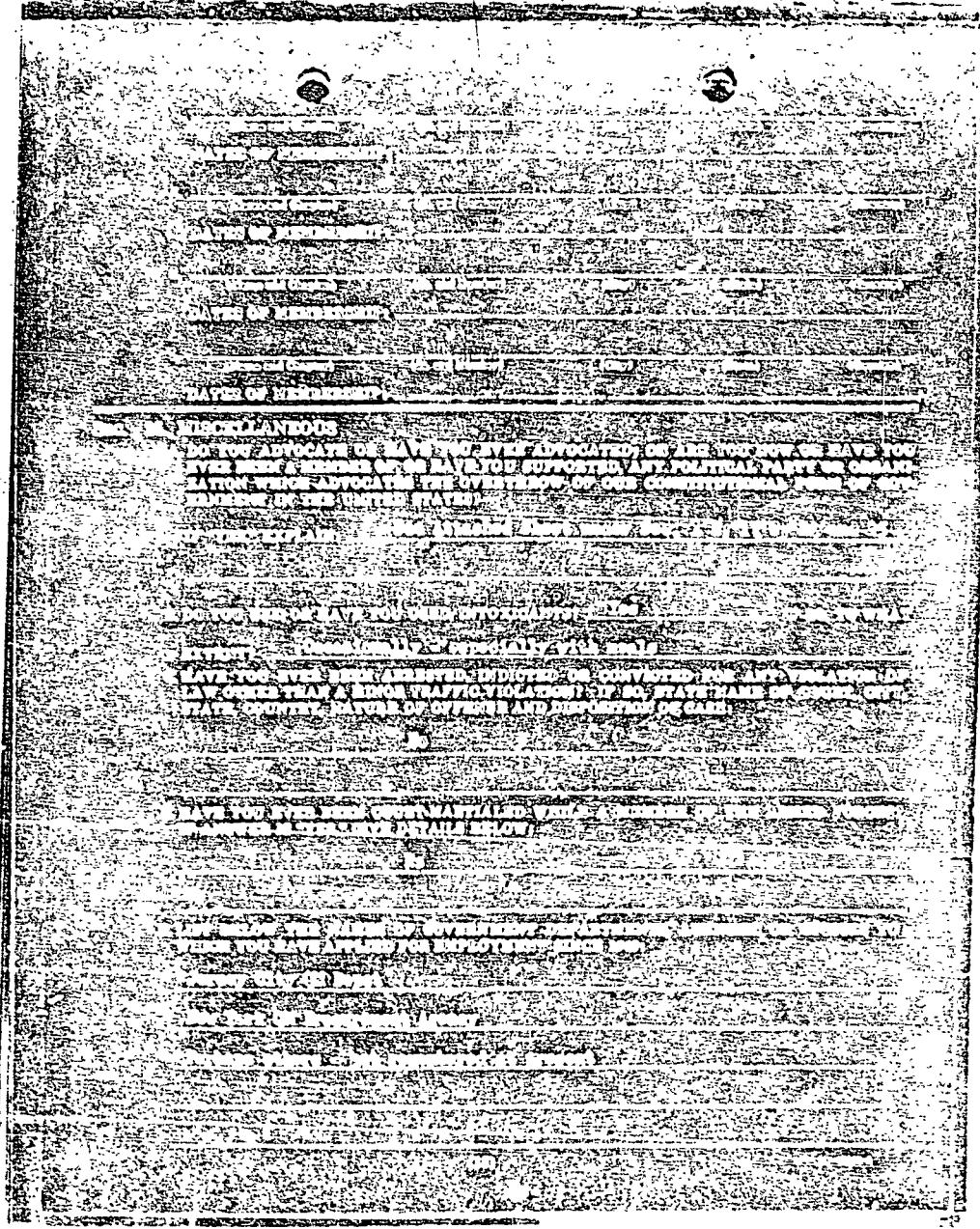


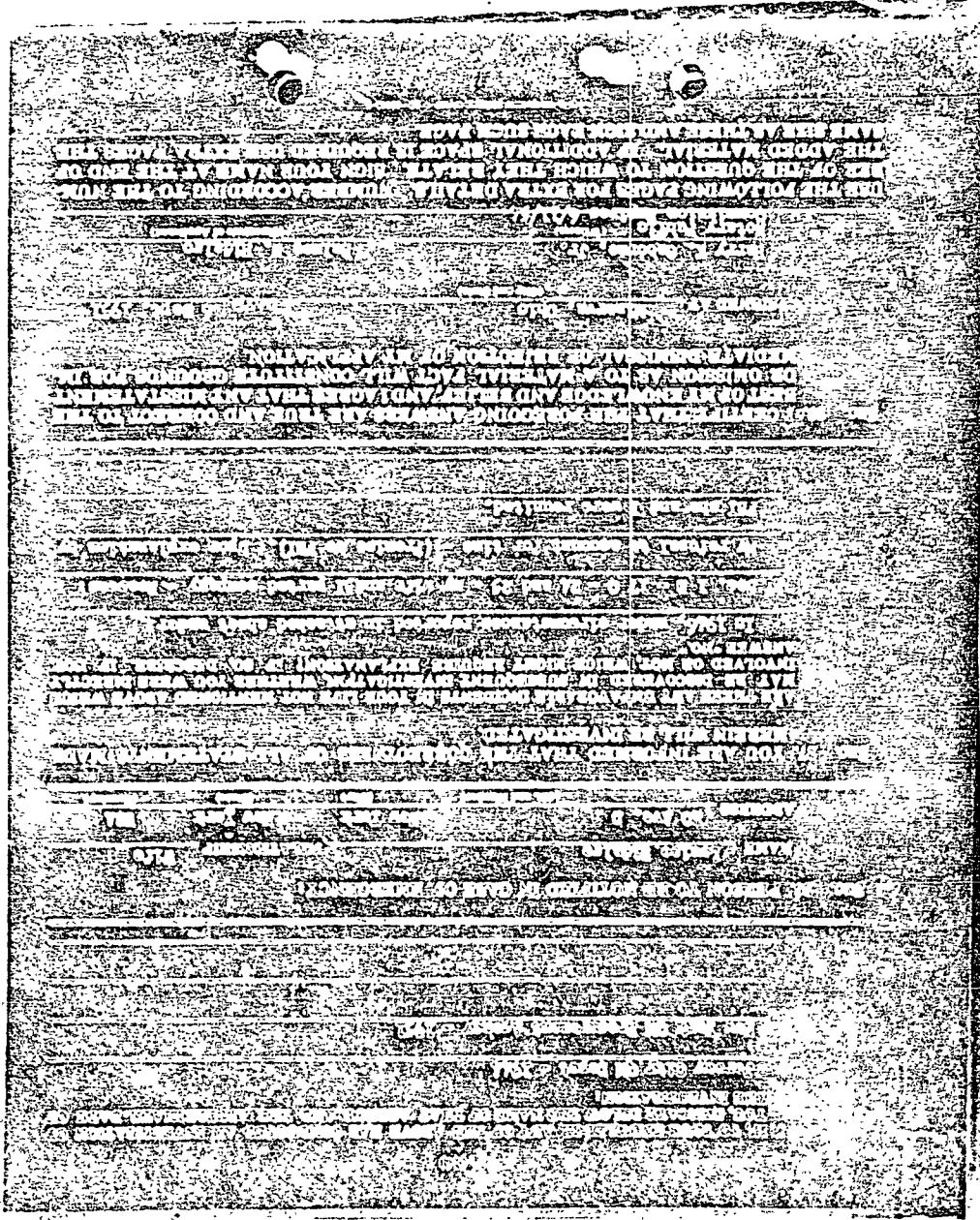


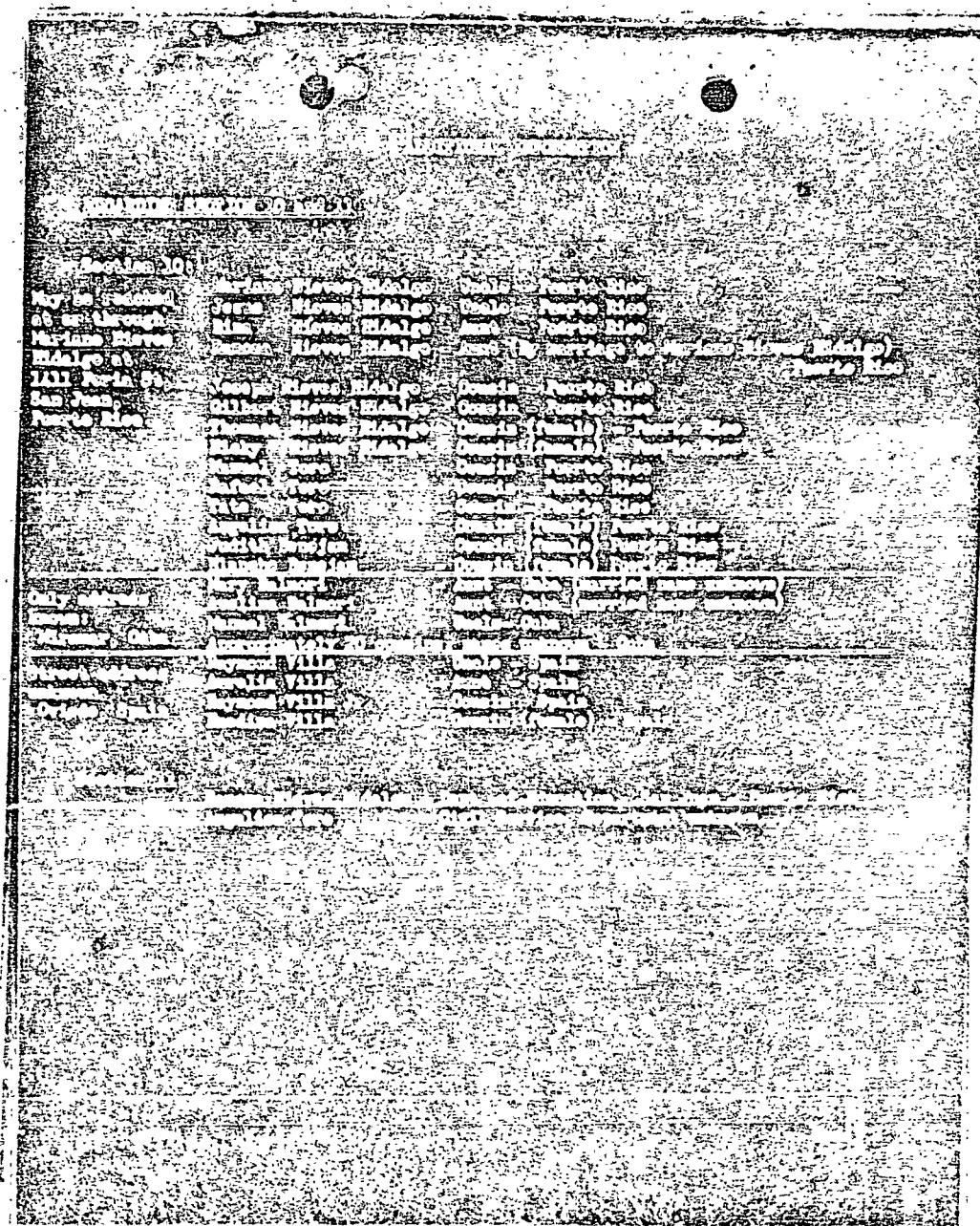




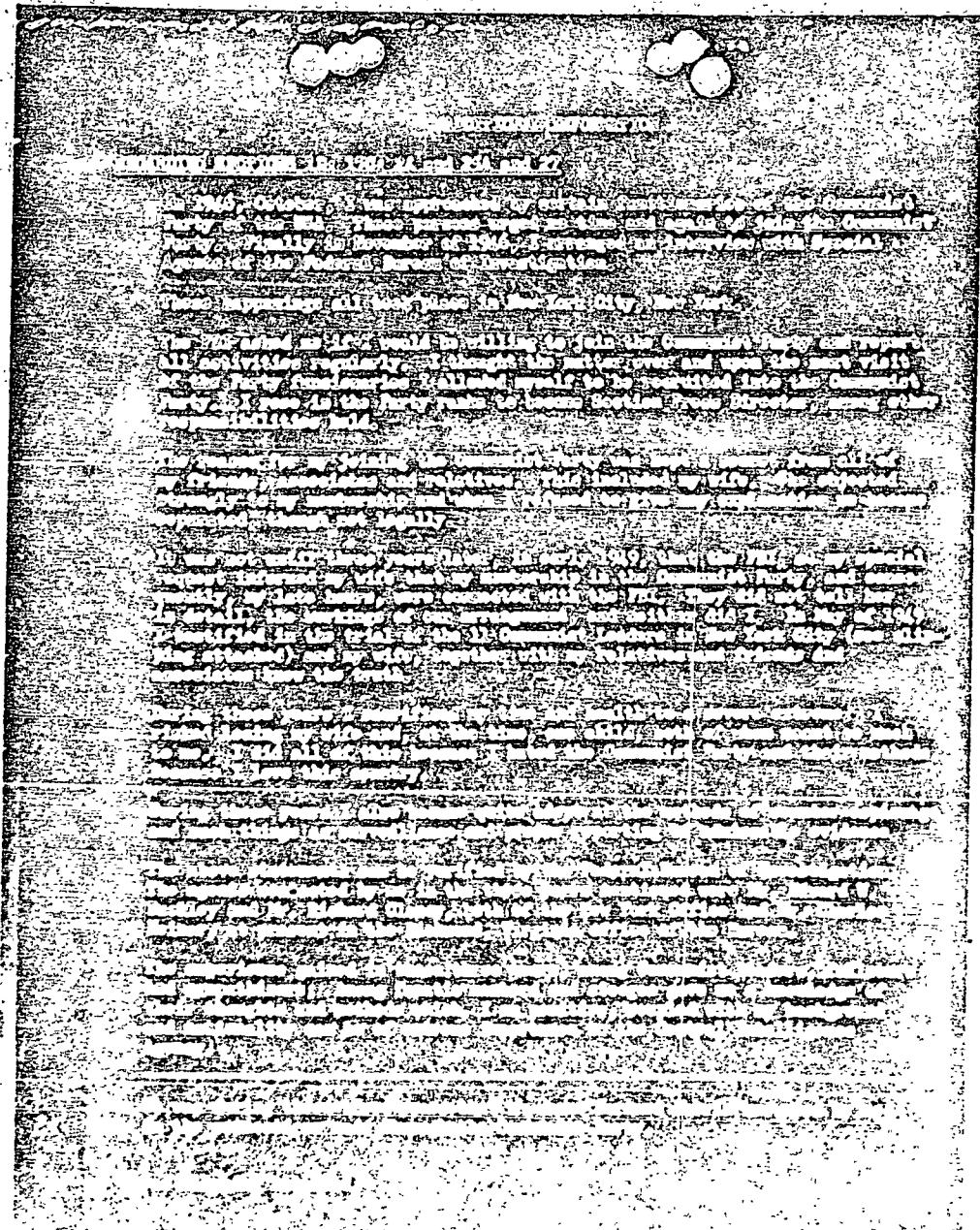








W. E. B. DuBois, Negro Nationality Party, New York, N.Y., to the
Secretary of State, Washington, D.C., March 1917. In reply to a question from the Secretary of State concerning the
position of the Negro Nationality Party, DuBois states that all Negroes have
been free from the time of the American Revolution. All Negroes, he says, are of the
same race, and the Negro Nationality Party is not a racial party.



PERSONAL HISTORY STATEMENT

- Instructions:**
1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.
 2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?

(Yes or No)

SEC. 1. PERSONAL BACKGROUND

Telephone:	NA
Office	NA
Ext.	NA
Home	NA

A. FULL NAME Mr. **XXX** Surname **Balmes** Middle **Nieves** Last **Fidalgo, Jr.**

PRESENT ADDRESS House number **60**, 9th St., East, Panama, Republic of Panama
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS **NA** (St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bain" WHAT OTHER NAMES HAVE YOU USED? See remarks

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? See remarks

HOW LONG? See remarks IF A LEGAL CHANGE, GIVE PARTICULARS

No. (Where) (By what authority)

C. DATE OF BIRTH **27 May 1919** PLACE OF BIRTH **Havana, Cuba**
(City) (State) (Country)

D. PRESENT CITIZENSHIP **U. S.** BY BIRTH? **NA** BY MARRIAGE? **NA**
(Country)

BY NATURALIZATION CERTIFICATE NO. **NA** ISSUED **NA** BY **NA**
(Date) (Court)

AT **See remarks** (City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? **NA** No
(Yes or No) (Country)

HELD BETWEEN WHAT DATES? **NA** TO **NA** ANY OTHER NATIONALITY? **NA**
(Country)

GIVE PARTICULARS **NA**

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? **NA** GIVE PARTICULARS:

NA

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924PORT OF ENTRY: NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.LAST U. S. VISA None (Number) _____ (Type) _____ (Place of Issue) _____ (Date of Issue) _____

SEC. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9¹/2" WEIGHT 145
 EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin
 BUILD slight OTHER DISTINGUISHING FEATURES Mole, Upper left lip

SEC. 3. MARITAL STATUS

A. SINGLE MARRIED DIVORCED WIDOWED

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie Louise Beier Hidalgo
(First) (Middle) (Middle) (Last)PLACE AND DATE OF MARRIAGE Belzoni, Mississippi - 9 April 1943HIS(HER) ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Belzoni, Mississippi, USA
(St. and Number) (City) (State) (Country)LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NAPRESENT, OR LAST, ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA
(City) (State) (Country)IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NACITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)OCCUPATION File Clerk LAST EMPLOYER ClassifiedEMPLOYER'S OR BUSINESS ADDRESS Classified
(St. and Number) (City) (State) (Country)MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
(Date) (Date)COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGNNA

10-42354-1

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1. NAME Ius Maria Hidalgo **RELATIONSHIP** Daughter **AGE** 12
CITIZENSHIP U. S. **ADDRESS** Same as applicant
 (St. and Number) (City) (State) (Country)

2. NAME Frances Rebecca Hidalgo **RELATIONSHIP** Daughter **AGE** 7
CITIZENSHIP U. S. **ADDRESS** Same as applicant
 (St. and Number) (City) (State) (Country)

3. NAME **RELATIONSHIP** **AGE**
CITIZENSHIP **ADDRESS** **(St. and Number)** **(City)** **(State)** **(Country)**

(also dependent)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME Bulnes **LAST NAME** Hidalgo
 (First) (Middle) (Last)

LIVING OR DECEASED Living **DATE OF DECEASE** NA **CAUSE** NA

PRESENT OR LAST ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH December 1890 **PLACE OF BIRTH** Aguadilla, Puerto Rico
 (City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 1923 (March) NYC, NY

CITIZENSHIP U. S. **WHEN ACQUIRED?** Birth **WHERE?** Puerto Rico
 (City) (State) (Country)

OCCUPATION Retired **LAST EMPLOYER** Do not remember

EMPLOYER'S OR OWN BUSINESS ADDRESS None
 (St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA **TO** NA **BRANCH OF SERVICE** NA
 (Date) (Date)

COUNTRY NA **DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN**
 NA

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME Frances **LAST NAME** Hidalgo
 (First) (Middle) (Last)

LIVING OR DECEASED Living **DATE OF DECEASE** NA **CAUSE** NA

PRESENT OR LAST ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 12 Jan. 1892 **PLACE OF BIRTH** Oviedo, Spain
 Marriage

CITIZENSHIP U. S. **WHEN ACQUIRED?** 1917 **WHERE?** Havana, Cuba
 (City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY March 1924, NYC, NY, USA

(4)

OCCUPATION Retired LAST EMPLOYER Leonid De Loscinski
EMPLOYER'S OR OWN BUSINESS ADDRESS 48 St. NYC, NY
(St. and Number) (City) (State) (Country)
MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME
(First) (Middle) (Last) AGE
PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)
2. FULL NAME
(First) (Middle) (Last) AGE
PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)
3. FULL NAME
(First) (Middle) (Last) AGE
PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)
4. FULL NAME
(First) (Middle) (Last) AGE
PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)
5. FULL NAME
(First) (Middle) (Last) AGE
PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME Henry Bo Peter
(First) (Middle) (Last)
LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA
(St. and Number) (City) (State) (Country)
DATE OF BIRTH 1895 PLACE OF BIRTH USA
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)
OCCUPATION Laborer LAST EMPLOYER Unknown

SEC. 9. MOTHER-IN-LAW

FULL NAME Ella Rebecca Beier
 (First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 1893 PLACE OF BIRTH USA

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

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.
 (City) (State) (Country)

OCCUPATION Housewife LAST EMPLOYER NA

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

See remarks

1. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
2. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
3. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	

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

NONE	1. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		
	2. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		
	3. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		

(6)

SEC. 12. POSITION DATA**A. KIND OF POSITION APPLIED FOR** See covering dispatch reference**B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT?** \$5390.00 P/A
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)**C. IF YOU ARE WILLING TO TRAVEL, SPECIFY:** OCCASIONALLY Yes
FREQUENTLY CONSTANTLY **D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C.**
ANYWHERE IN THE UNITED STATES OUTSIDE THE UNITED STATES **E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:****SEC. 13. EDUCATION**

ELEMENTARY SCHOOL	St. Thomas Apostle	ADDRESS	NYC	NY	USA
		(City)		(State)	(Country)

DATES ATTENDED 1926-1934 GRADUATE? Yes

HIGH SCHOOL	La Salle Academy	ADDRESS	2nd St. and 2nd Avenue	NYC	NY USA
		(City)		(State)	(Country)

DATES ATTENDED 1936-1940 GRADUATE? Yes

COLLEGE	NY University	ADDRESS	Washington Square	NYC	NY USA
	Foreign Trade and	(City)		(State)	(Country)

MAJOR AND SPECIALTY Business Law YEARS COMPLETED School

DATES ATTENDED 1944-1945 DEGREE No

COLLEGE		ADDRESS			
		(City)		(State)	(Country)

MAJOR AND SPECIALTY YEARS COMPLETED

DATES ATTENDED DEGREE

CHIEF UNDERGRADUATE COLLEGE SUBJECTS

CHIEF GRADUATE COLLEGE SUBJECTS

SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

U. S. Army Cpl. 1940-1943
 (Country) (Service) (Rank) (Dates of Service)

Camp Hale, Colorado 202 1976A honorable
 (Last Station) (Serial Number) (Type of Discharge)

REMARKS: None

Do not remember
 SELECTIVE SERVICE BOARD NUMBER ADDRESS

IF DEFERRED GIVE REASON NA

INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS NA

SEC. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM Feb. 1952 TO Present CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-11

EMPLOYING FIRM OR AGENCY See covering dispatch reference

ADDRESS See covering dispatch reference
 (St. and Number) (City) (State) (Country)

KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR See covering dispatch

TITLE OF JOB See covering dispatch SALARY \$ 6390.00 PER annum

YOUR DUTIES See covering dispatch reference

REASONS FOR LEAVING

FROM January 1951 TO February 1952 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-7

EMPLOYING FIRM OR AGENCY NY Q Procurement Agency

ADDRESS 111 East 16th Street NYC, NY, USA
 (St. and Number) (City) (State) (Country)

KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR Do not remember

TITLE OF JOB Inspector SALARY \$ 3225.00 PER annum

YOUR DUTIES Inspecting material being purchased by U. S. Govt. specifically
 the U. S. Army

REASONS FOR LEAVING To obtain present position

(7)

10-248-1

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY American Trust Company

ADDRESS Wall Street, New York City, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Left for higher paying work

FROM January 1948 TO May 1950 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Colonial Trust Company

ADDRESS 6th Avenue and 45th Street, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Promised promotion failed to materialize

FROM August 1945 TO September 1947 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.

ADDRESS 28th Street and 12th Avenue, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Wholesale NAME OF SUPERVISOR Do not remember
Grocery house

TITLE OF JOB Correspondence clerk SALARY \$57.00 PER week

YOUR DUTIES Export correspondence clerical duties

REASONS FOR LEAVING Disatisfied with type of work

10-2225-1

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

No _____

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish SPEAK Fluent READ Fluent WRITE Fluent

LANGUAGE Portuguese SPEAK Slight READ Fair WRITE Slight

LANGUAGE SPEAK READ WRITE

B. LIST ALL SPORTS AND Hobbies WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

Judo - Have attained "yellow belt" rank

Photography - Very good degree of proficiency

Bowling - Fair degree of proficiency

Philately - Fair degree of proficiency

Fishing (no comment)

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Yes, See covering dispatch reference.....

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.....

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING ... 30 ... SHORTHAND ... 0 ...

(10)

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

IF YES, INDICATE KIND OF LICENSE AND STATE No.....

FIRST LIC. OR CERTIFICATE (YR) LATEST LIC. OR CERTIFICATE (YR)

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION
(SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE
CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.....

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA
GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION
FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

No

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

		Street and Number	City	State
1.	Edward Lee Anderson	BUS. ADD. See Dispatch reference. RES. ADD.		
2.	Willard Galbraith	BUS. ADD. # # # RES. ADD.		
3.	Homer Neal	BUS. ADD. # # # RES. ADD.		
4.	Andres Rivera	BUS. ADD. # # # RES. ADD.		
5.	Joseph Sancho	BUS. ADD. # # # RES. ADD.		

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

See remarks		Street and Number	City	State
	1.	BUS. ADD. RES. ADD.		
	2.	BUS. ADD. RES. ADD.		
	3.	BUS. ADD. RES. ADD.		
	4.	BUS. ADD. RES. ADD.		
	5.	BUS. ADD. RES. ADD.		

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

See remarks		Street and Number	City	State
	1.	BUS. ADD. RES. ADD.		
	2.	BUS. ADD. RES. ADD.		
	3.	BUS. ADD. RES. ADD.		

SEC. 21. FINANCIAL BACKGROUND

A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? Yes... IF NOT, STATE SOURCES OF OTHER INCOME

B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS Greenwich Savings Bank, 36th St., and Broadway and 6th Avenue, NYC, NY.

(12)

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? No
 GIVE PARTICULARS, INCLUDING COURT: _____

D. GIVE THREE CREDIT REFERENCES—IN THE U. S.

1. NAME	None	ADDRESS (St. and Number)	(City)	(State)
2. NAME		ADDRESS (St. and Number)	(City)	(State)
3. NAME		ADDRESS (St. and Number)	(City)	(State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS

FROM April 1952 to Present	Panama Republic of Panama (St. and number)	(City)	(State)	(Country)
FROM 1949 to 1952	20 Ave. D., NYC, NY, USA (St. and number)	(City)	(State)	(Country)
FROM 1944 to 1948	200 West 82nd St., NYC, NY, USA (St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)
FROM TO	(St. and number)	(City)	(State)	(Country)

SEC. 23. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM 1919 to 1924	Havana, Cuba (City or section)	Country of birth (Country)	(Purpose)
FROM 1942 to 1943	Pacific area (City or section)	US Army (Country)	(Purpose)
FROM 1952 to Present	Republic of Panama (City or section)	Work (Country)	(Purpose)
FROM TO	(City or section)	(Country)	(Purpose)
FROM TO	(City or section)	(Country)	(Purpose)

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. None
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: _____

2. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: _____

3. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: _____

4. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

5. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

6. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

7. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

SEC. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES," EXPLAIN: _____ NO (See remarks) _____

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? Yes _____ IF SO, TO WHAT

EXTENT? _____ Poor with scales _____

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense _____

Present Organization _____

(14)

IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Federal Bureau of Investigation - 1946

This Organization - 1951

SEC. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Annie Louise Ridgely RELATIONSHIP wife

ADDRESS Same as applicant (Number) (City) (State) (Country)

SEC. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

No

SEC. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Ft. Meade, Maryland (City and State) DATE 19 July 1951

John J. Tidwell (Witness)

Bethany L. Tidwell (Signature of Applicant)

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

14-00000

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

14-00000

RECORD OF
PREVIOUS GOVERNMENT
SERVICE RETURNED TO
FEDERAL RECORDS CENTER IN
ST. LOUIS, MO.

DATE July 1971