

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 103820							
SECTION A GENERAL											
1. NAME (Last) (First) (Middle) MOORE, J. Walton		2. DATE OF BIRTH 10/5/19		3. SEX Male	4. GRADE GS-14						
5. SERVICE DESIGNATION OC		6. OFFICIAL POSITION TITLE Intelligence Officer (Contract)		7. OFF/DIV/BR. OF ASSIGNMENT OO/CD/Houston							
8. CAREER STAFF STATUS			9. TYPE OF REPORT								
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE								
10. DATE REPORT DUE IN O.P. 31 May 60		11. REPORTING PERIOD To SPECIAL (Specify) Mar 59 - Mar 60									
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 Supervising & managing a Resident Agency.		RATING NO. 6	SPECIFIC DUTY NO. 4 Cultivation of contact to develop trust and confidence in both the Agency and the C/S himself		RATING NO. 6						
SPECIFIC DUTY NO. 2 Exploitation of source's complete intelligence potential by debriefing thoroughly.		RATING NO. 6	SPECIFIC DUTY NO. 5 Keeps informed on foreign situations & intelligence requirements in order to better orient and exploit sources.		RATING NO. 6						
SPECIFIC DUTY NO. 3 Writing reports clearly and concisely without coloring.		RATING NO. 7	SPECIFIC DUTY NO. 6 Searches for and develops new sources.		RATING NO. 7						
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. <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> 5 </div>						
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 APPL- CABLE	NOT OB- SERVED	RATING				
							1	2	3	4	5
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 "F" ON REVERSE SIDE

SECRET

(When Filled In)

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.		
<p>This employee's many years experience in varied intelligence activities has made him an outstanding officer in almost all phases of intelligence work. He continues to do an outstanding job as Resident Agent of the Dallas Office. The results of his job bears out the high performance ratings contained in this report.</p>		
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 11 Apr 60	SIGNATURE OF EMPLOYEE J. Walton Moore	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 9 years	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION - - -	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 30 DAYS OTHER (Specify):	REPORT MADE WITHIN LAST 90 DAYS	
DATE 11 Apr 60	OFFICIAL TITLE OF SUPERVISOR Chief, Houston Office	TYPED OR PRINTED NAME AND SIGNATURE Ernest A. Sicche
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE 28 April 1960	OFFICIAL TITLE OF REVIEWING OFFICIAL Acting Chief, CD/CO	TYPED OR PRINTED NAME AND SIGNATURE George C. Forrest

SECRET

S-40-0-1-1-1

TRAINING REPORT

CO/C INTELLIGENCE CONTROL NO. 13

SECTION I: IDENTIFYING INFORMATION			
NAME OF COURSE		NO. OF STUDENTS	
MOORE, James Walton		15	
DATE		OFFICE	
5 October 1919		Dallas Resident Agency	
DATE		OFFICE	
6 Dec 1949		Dallas Resident Agency	
DATE		OFFICE	
6 Dec 1949		Dallas Resident Agency	

Contact Specialist

SECTION II: COURSE OBJECTIVES AND CONTENTS

The purpose of the course is to review division policies, techniques and procedures, with special emphasis on current priority intelligence and information needs, and to provide an opportunity for field collectors to discuss collection problems with CO/C Headquarters personnel and commander.

SECTION III: EXPECTED OUTCOMES/RESULTS OF THE COURSE

The course is designed for experienced CO/C personnel. The first part of the course reviews techniques of collection and the preparation and processing of reports and other collected material. Students are then assigned to seminar groups for discussion of collection problems pertinent to their field of interest. The second part of the course CO/C Branch Chiefs discuss current and future principal activities and review general collection procedures. A survey of the current world situation in selected areas is presented.

SECTION IV: EVALUATION OF COURSE PERFORMANCE

The course was well received and was considered the entire course.

James T. Lewis
Chief, Intelligence Production
Facility, IS

S-40-0-1-1-1

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 103320							
SECTION A GENERAL											
1. NAME (Last) MOORE, J. (First) (Middle) Walton		2. DATE OF BIRTH 10/5/19		3. SEX M	4. GRADE GS-14						
5. SERVICE DESIGNATION OC		6. OFFICIAL POSITION TITLE Intelligence Officer (Contact)		7. OFF/DIV/BR OF ASSIGNMENT OO/CD/Houston							
8. CAREER STAFF STATUS			9. TYPE OF REPORT								
<input type="checkbox"/> NOT ELIGIBLE <input checked="" type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE								
10. DATE REPORT DUE IN O.P. 31 May 1959		11. REPORTING PERIOD From Dec 57-Mar 59		To 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 Supervising and managing a Resident Agency.		RATING NO. 6	SPECIFIC DUTY NO. 4 Cultivation of contact to develop trust and confidence in both the Agency and the C/S himself.		RATING NO. 6						
SPECIFIC DUTY NO. 2 Exploitation of source's complete intelligence potential by debriefing thoroughly.		RATING NO. 6	SPECIFIC DUTY NO. 3 Keeps informed on foreign situations & intelligence requirements in order to better orient and exploit sources.		RATING NO. 6						
SPECIFIC DUTY NO. 3 Writing reports clearly and concisely without coloring.		RATING NO. 7	SPECIFIC DUTY NO. 5 Searches for and develops new sources		RATING NO. 7						
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. 6						
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 APPL- CABLE	NOT OB- SERVED	RATING				
							1	2	3	4	5
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

(When Filled In)

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.

This employee's many years experience in varied intelligence activities has made him an outstanding officer in almost all phases of intelligence work. He is extremely well qualified for his present activity as Resident Agent of Dallas Resident Agency. His performance has demonstrated his outstanding ability.

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 3 April 1959 SIGNATURE OF EMPLOYEE J. Walton Moore *J. Walton Moore*

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 8 years IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION - - -

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 2 April 1959 OFFICIAL TITLE OF SUPERVISOR Chief, Houston Office TYPED OR PRINTED NAME AND SIGNATURE Ernest A. Ristine *Ernest A. Ristine*

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 13 April 1959 OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, CD/00 TYPED OR PRINTED NAME AND SIGNATURE E. M. Ashcraft *E. M. Ashcraft*

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
MOORE, James H.	5 Oct 1919	M	OC
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT	6. OFFICIAL POSITION TITLE		
OO/Contact/Houston Office	IO (Contact)		
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-14	6 December 1957	12/6/56 - 12/5/57	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT-EMPLOYEE	

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT ☒ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:

A. CHECK (X) APPROPRIATE STATEMENTS.

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE 12 Dec. 1957 C. OR POSITION AND SIGNATURE OF SUPERVISOR Ernest A. RISCHE D. SUPERVISOR'S OFFICIAL TITLE Chief, Houston Office

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY gm DATE

1-14-58

CONTINUED OR ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 30 Dec 57 B. TYPE OR PRINTED NAME AND SIGNATURE OF REVIEWING E. M. ASHCRAFT C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, Contact Division

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

6 INSERT RATING NUMBER	1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
	2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5 - A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS.

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
OFFICE OF PERSONNEL																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty on a scale of ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise may be rated as a specific duty (do not rate as supervisors those who supervise a secretary).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES																									
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
DESCRIPTIVE RATING NUMBER	1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS																									
	2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY																									
	3 - PERFORMS THIS DUTY ACCEPTABLY																										
	4 - PERFORMS THIS DUTY IN A COMPETENT MANNER																										
	5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB																										
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Supervising and managing a Resident Agency.	6	Cultivation of contact to develop trust and confidence in both the Agency and the C/S himself.	6																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
Exploitation of sources' complete intelligence potential by debriefing thoroughly.	6	Keeps informed on foreign situations & intelligence requirements in order to better orient and exploit sources.	6																								
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Writing reports clearly and concisely without coloring.	7	Searches for and develops new sources.	6																								
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>An exceptional employee who has demonstrated his ability to perform all duties of a Resident Agent in an outstanding and exceptional manner. His many years of varied experiences in intelligence work has made him a well-rounded officer, extremely well qualified for his present work.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p>DIRECTIONS: Take into account here everything you know about the individual... productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
6	RATING NUMBER																										
IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY.																											

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the (H) no later than 30 days after the due date indicated in item 8 of Section "F" below.

SECTION E:

GENERAL

1. NAME (Last) (First) (Middle) MOORE, James Walton	2. DATE OF BIRTH 5 October 1919	3. SEX M	4. SERVICE DESIGNATION OC
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT Operations/Contact/Houston Office		6. OFFICIAL POSITION TITLE IO (Contact)	
7. GRADE GS-14	8. DATE REPORT DUE IN OF 6 December 1957	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 12/6/56 - 12/5/57	
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE	SPECIAL (Specify)

SECTION F:

CERTIFICATION

1. FOR THE RATER I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE 12 Dec. 1957	B. TYPE OR PRINTED SIGNATURE OF SUPERVISOR <i>Ernest A. Rische</i>	C. SUPERVISOR'S OFFICIAL TITLE Chief, Houston Office
2. FOR THE REVIEWING OFFICIAL I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE 30 Dec 57	B. TYPE OR PRINTED NAME AND SIGNATURE OF REVIEWING <i>W. Ashcraft</i>	C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION G:

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

<div style="border: 1px solid black; padding: 5px; display: inline-block;">6</div> RATING NUMBER	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	
	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor)
	3	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	3	A GROUP, WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		Other (Specify)

SECRET

Potential

(4)

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF OFFICE ^{ALL} EMPLOYEES HAS BEEN UNDER YOUR SUPERVISION Ninety-five.					
4. COMMENTS CONCERNING POTENTIAL <div style="text-align: center;">JAN 14 12 57 PM '58</div> A fine employee, capable of assuming greater responsibilities than at present assigned. <div style="text-align: center;">MAIL ROOM.</div>					
SECTION II.			FUTURE PLANS		
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL OO/C Resident Agent courses.					
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS 					
SECTION I. DESCRIPTION OF INDIVIDUAL					
DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.					
X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE					
CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
5	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	5	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
5	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	5	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	5	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	5	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
5	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
5	8. HAS MEMORY FOR FACTS	5	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
5	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOCABLE TIME LIMITS	5	30. DOES NOT REQUIRE STANDING AND CONTINUOUS SUPERVISION

SECRET

S-E-C-R-E-T

TRAINING REPORT
OO/C REFRESHER COURSE NO. 9

SECTION I: IDENTIFYING INFORMATION

NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
Moose, James W.	M	9-18 September 1957	14
DATE OF BIRTH	EOD DATE	GRADE OR RANK	OFFICE
5 October 1919	December 1949	GS-14	Houston
PRESENT POSITION			

Resident Agent

SECTION II: OBJECTIVES OF THE COURSE

The objectives of the course are to review Division policies, techniques and procedures, with special emphasis on current priority intelligence and support requirements, and to provide an opportunity for field collectors to discuss collection problems with OO/C Headquarters personnel and consumer analysts.

SECTION III: SPECIFIC CHARACTERISTICS OF THE COURSE

The course is designed for experienced OO/C personnel. The first part of the course reviews techniques of collection and the preparation and processing of reports and other collected material. Students are then assigned to seminar groups for consideration of collection problems pertinent to their field of specialization. In the second part of the course OO/C Branch Chiefs discuss the needs of the Division's principal consumers and review general collection requirements. A survey of the current world situation in selected areas is also included.

SECTION IV: CERTIFICATION OF COURSE COMPLETION

The above named person has attended the entire course.

FOR THE DIRECTOR OF TRAINING:

Burney B. Bennett
Course Supervisor

S-E-C-R-E-T

SECRET
(When Filled In)

11-61		LANGUAGE DATA RECORD			
103820					
PART I-GENERAL					
1. NAME (Last-First-Middle) (17-24)			2. DATE OF BIRTH (25-30)		
MOORE, James Walton			MONTH October	DAY 5	YEAR 1919
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)		5.	
Mandarin Chinese. 199		MONTH April	DAY 23	YEAR 1957	<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. 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.
<input checked="" type="radio"/> 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 JOES 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.
<input checked="" type="radio"/> 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.
<input checked="" type="radio"/> 4.	NONE OF THE ABOVE STATEMENTS APPLY.
PART IV-CERTIFICATION	
<p>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.</p>	
DATE SIGNED 23 April 1957	SIGNATURE J. Walton Moore
(46)	(47)

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in regulation 20.370. It is recommended that you read the entire form before completing any portion. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section A below.

SECTION A.

GENERAL

1. NAME (Last) MOORE, (First) James (Middle) Walton	2. DATE OF BIRTH 5 October 1919	3. SEX M	4. SERVICE DESIGNATION OC
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT Operations/Contact/Houston Office		6. OFFICIAL POSITION TITLE IO (Contact)	
7. GRADE GS-13	8. DATE REPORT DUE IN OP 6 December 1956	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 12/6/55 - 12/5/56	
10. TYPE OF REPORT (Check one)		SPECIAL (Specify)	
<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT-SUPERVISOR <input type="checkbox"/> REASSIGNMENT-EMPLOYEE			

SECTION B.

CERTIFICATION

1. FOR THE RATER: THIS REPORT <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.	
2. CHECK (X) APPROPRIATE STATEMENTS.	
<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "E" in CI OR D, A WARNING LETTER HAS BEEN SENT TO HIM & COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	
3. THIS DATE 4 January 1957	4. SIGNATURE OF SUPERVISOR Ernest A. Rische Chief, Houston Office
5. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.	

BY <i>gpc</i> DATE 1-15-57
Posted Pos. Cont. <i>1</i>
Reviewed by POC <i>727-23</i>
<input type="checkbox"/> CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

6. THIS DATE 10 Jan 57	7. TYPE OF OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL E. M. ASHCRAFT	8. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, Contact Division
-------------------------------	--	--

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

6 INSERT RATING NUMBER	1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
	2. BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
	4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

Performance

(4)

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS																									
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES																									
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN																									
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES																									
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS																									
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK																									
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING																									
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA																									
<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p> <p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>																											
DESCRIPTIVE RATING NUMBER																											
SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Exploitation of sources' complete intelligence potential by debriefing thoroughly.	6	Cultivation of contact to develop trust and confidence in both the Agency and the C/S himself.	6																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
Writing reports clearly and concisely without coloring.	6	Keeps informed on foreign situations & intelligence requirements in order to better orient and exploit sources.	6																								
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Supervising and managing a Resident Agency.	6	Searches for and develops new sources.	6																								
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>An exceptionally competent individual with many years experience in varied intelligence jobs, all of which make him more qualified for his present work.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>																											
6																											
RATING NUMBER																											
IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:																											

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the (X) no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
MOORE, James Walton		5 October 1919	M	OC
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE		
Operations/Contact/Houston Office		IO (Contact)		
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)		
GS-13	6 December 1956	12/6/55 - 12/5/56		
10. TYPE OF REPORT (Check one)		SPECIAL (Specify)		
<input checked="" type="checkbox"/> INITIAL				
<input type="checkbox"/> ANNUAL				
<input type="checkbox"/> REASSIGNMENT-SUPERVISOR				
<input type="checkbox"/> REASSIGNMENT-EMPLOYEE				

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED		
A. THIS DATE	B. TYPE OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE
4 January 1957	<i>Ernest A. Rische</i>	Chief, Houston Office
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
A. THIS DATE	B. TYPE OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
10 Jan 57	<i>E. M. Ashcraft</i>	Chief, Contact Division

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES	
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.	
6 RATING NUMBER	1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
	7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? ☒ Yes ☐ No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION	
	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION	
	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION	
	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION	
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) where contact with immediate subordinates is frequent (First line supervisor)
	3	A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)
	3	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	3	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX
		Other (Specify)

SECRET

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION					
Eighty-three.					
4. COMMENTS CONCERNING POTENTIAL					
<p style="text-align: right;">JAN 15 12 23 PM '57</p> <p>A fine employee, capable of assuming greater responsibilities than at present assigned.</p> <p style="text-align: right;">MAIL ROOM</p>					
SECTION II. FUTURE PLANS					
1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL					
OO/C Refresher courses.					
2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS					
SECTION I. DESCRIPTION OF INDIVIDUAL					
<p>DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.</p> <p>1 - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL</p> <p>2 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE</p> <p>3 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE</p> <p>4 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE</p> <p>5 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE</p> <p>6 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE</p>					
CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
5	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
5	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	5	23. IS FRODOFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	5	24. WORKS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	5	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS DEPARTMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPERVISOR	5	26. IS SECRETLY JEALOUS
5	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS VERNACULAR
5	8. HAS MIND FOR FACTS	5	18. IS CALIBRANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
5	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOTTABLE TIME LIMITS	5	30. DOES NOT BELIEVE STRONG AND CONTINUOUS SUPERVISOR

SECRET

SECRET
(When Filled In)

FITNESS REPORT

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

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

INSTRUCTIONS

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

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

A J R due 12/6/56

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

SECTION I (To be filled in by Administrative Officer)

1. NAME (Last)	(First)	(Middle)	2. DATE OF BIRTH	3. SEX	4. CAREER DESIGNATION
MOORE,	James	Walton	5 Oct 1919	M	OC
5. DATE OF ENTRANCE ON DUTY	6. OFFICE ASSIGNED TO	7. DIVISION	8. BRANCH		
6 December 1949	Operations	Contact	Houston Office		
9. NATURE OF ASSIGNMENT	10. IF FIELD, SPECIFY STATION:		11. GRADE		
<input type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/> FIELD	Dallas, Texas		GS-13		
12. DATE THAT THIS REPORT IS DUE	13. PERIOD COVERED BY THIS REPORT (Inclusive dates)				
6 December 1955	12/6/54 - 12/5/55				

SECTION II (To be filled in by Supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Resident Agent - C/S, Dallas, Texas 013221	1 May 1954

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

He has the complete responsibility for the operation of the Dallas Resident Agency under the supervision of the Chief, Houston Field Office.

His primary mission is the collection of foreign positive information from domestic sources.

In addition to the above, he handles support activities for other divisions of the Agency and performs certain liaison functions between other Government offices.

He is responsible for the supervision of a Resident Office and a Secretary.

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report ☒ has ☐ has not been shown to the individual rated.

THIS DATE	NAME AND SIGNATURE OF RATER (Employee's immediate supervisor)
5 December 1955	<i>Ernest A. Rische</i> ERNEST A. RISCHÉ
I HAVE REVIEWED THIS REPORT (Comments, if any, are collected by attached memorandum)	
THIS DATE	NAME AND SIGNATURE OF REVIEWING OFFICIAL (Official next higher in line of authority)
8 December 1955	<i>E. N. Asecraft</i> E. N. ASECRRAFT

SECRET

SECRET
(When Filled In)

SECTION IV

This section is provided as an aid in describing an individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to the assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks: this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS	NOT OBSERVED	CATEGORIES				
		DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.			X			
B. PRACTICAL.					X	
1. A GOOD REPORTER OF EVENTS.						X
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.					X	
3. CAUTIOUS IN ACTION.						X
4. HAS INITIATIVE.						X
5. UNEMOTIONAL.						X
6. ANALYTIC IN HIS THINKING.					X	
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.					X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.					X	
9. HAS SENSE OF HUMOR.					X	
10. KNOWS WHEN TO SEEK ASSISTANCE.					X	
11. CALM.						X
12. CAN GET ALONG WITH PEOPLE.					X	
13. MEMORY FOR FACTS.						X
14. GETS THINGS DONE.						X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.					X	
16. CAN COPE WITH EMERGENCIES.					X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.						X
18. HAS STAMINA. CAN KEEP GOING A LONG TIME.					X	
19. HAS WIDE RANGE OF INFORMATION.					X	
20. SHOWS ORIGINALITY.					X	
21. ACCEPTS RESPONSIBILITIES.						X
22. ADMITS HIS ERRORS.					X	
23. RESPONDS WELL TO SUPERVISION.						X
24. EVEN DISPOSITION.						X
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.						X

SECRET

SECTION V

His outstanding strength is steadiness.

He has no real outstanding weakness.

SECRET
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS:

OFFICE OF PERSONNEL

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ YES. IF YES, WHY?

Dec 19 3 35 PM '55

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Periodic re-orientation in Headquarters, Washington.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

His athletic ability (Dallas Athletic Club) is an asset in carrying out his duties.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the agency.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY... IRRATED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY... THINKS IN TERMS OF A CAREER IN THE AGENCY.
- ☒ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE AGENCY.
- ☐ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities than presently indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☒ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON, WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.
- ☐ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☒ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- ☐ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET

SECRET
(When Filled In)

FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It seeks to provide:
1. The agency selection board with information of value when considering the application of an individual for membership in the career service; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

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

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs, and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisor to ensure the report is accurate and complete. Primary responsibility rests with the current supervisor. If you have discharged your supervisory responsibility out the period this individual has been under your supervision, you have discharged your supervisory responsibility by frequent discussions of his work, so that in a general way he knows where he stands.

A SD-30

FR date 12/5/53

Posted Post. Comm.

Reviewed by R.C.

ERL 12-14

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

SECTION I (To be filled in by Administrative Officer)

1. NAME (Last) MOORE, (First) James (Middle) W.		2. DATE OF BIRTH 5 Oct 1919	3. SEX M	4. CAREER DESIGNATION OO
5. DATE OF ENTRANCE ON DUTY 6 December 1949	6. OFFICE ASSIGNED TO Operations	7. DIVISION Contact	8. BRANCH Houston Office	
9. NATURE OF ASSIGNMENT <input type="checkbox"/> DEPARTMENTAL <input checked="" type="checkbox"/> FIELD		10. IF FIELD, SPECIFY STATION: Dallas, Texas		11. GRADE GS-13 / 32
12. DATE THAT THIS REPORT IS DUE 5 December 1954		13. PERIOD COVERED BY THIS REPORT (Inclusive dates) 12/5/53 - 12/4/54		

SECTION II (To be filled in by Supervisor)

1. CURRENT POSITION Resident Agent - Dallas	2. DATE ASSUMED RESPONSIBILITY FOR POSITION 3 May 1954
3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS (List in order of frequency):	

Moore has complete charge of the Dallas Resident Agency, under the supervision of the Chief, Houston Field Office. His most important job is the collection of foreign positive information of value to the intelligence community. As a Resident Agent, however, he has the additional responsibility of supervision of an office and a secretary.

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report ☐ has ☒ ~~NOT~~ been shown to the individual rated.

THIS DATE 1 December 1954	SIGNATURE OF RATER (Employee's immediate supervisor) <i>Robert E. Roche</i>
I HAVE REVIEWED THIS REPORT (Comments, if any, are reflected by attached memorandum)	
THIS DATE December 1954	SIGNATURE OF REVIEWING OFFICIAL (Official next higher in line of authority) <i>W. Schraft</i>

SECRET
(When Filled In)

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS		CATEGORIES					
		NOT OR SERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES			X			
B. PRACTICAL.						X	
1. A GOOD REPORTER OF EVENTS.						X	
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.						X	
3. CAUTIOUS IN ACTION.							X
4. HAS INITIATIVE.							X
5. UNEMOTIONAL.							X
6. ANALYTIC IN HIS THINKING.						X	
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.						X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.						X	
9. HAS SENSE OF HUMOR.						X	
10. KNOWS WHEN TO SEEK ASSISTANCE.						X	
11. CALM.							X
12. CAN GET ALONG WITH PEOPLE.						X	
13. MEMORY FOR FACTS.							X
14. GETS THINGS DONE.							X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.						X	
16. CAN COPE WITH EMERGENCIES.						X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.							X
18. HAS STAMINA: CAN KEEP GOING A LONG TIME.							X
19. HAS WIDE RANGE OF INFORMATION.						X	
20. SHOWS ORIGINALITY.					X		
21. ACCEPTS RESPONSIBILITIES.							X
22. ADMITS HIS ERRORS.						X	
23. RESPONDS WELL TO SUPERVISION.							X
24. EVEN DISPOSITION.							X
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.							X

SECRET

SECTION V

His outstanding strength is steadiness.

D. WHAT ARE HIS OUTSTANDING DEBTS/ESSE

He has no real outstanding weakness. He is somewhat shy which is as much an asset at times as it is a weakness.

SECRET

(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS: NO.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY?

DEC 13 5 16 PM '94

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Periodic re-orientation in Headquarters, Washington.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report, but which have a bearing on effective utilization of this person):

His athletic ability (Dallas Athletic Club) is an asset in carrying out his duties.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A,B,C,D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☐ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the agency.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY... IRRKED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY... THINKS IN TERMS OF A CAREER IN THE AGENCY.
- ☐ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE AGENCY.
- ☐ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

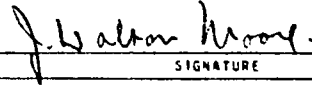
- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☐ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☒ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.
- ☐ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☒ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- ☐ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT					
<i>Items 1 through 6 will be completed by Administrative or Personnel Officer</i>					
1. NAME (Last)	(First)	Middle	2. GRADE	3. POSITION TITLE	
MOORE	James	W.	GS-13	Intelligence Officer	
4. OFFICE	5. STAFF OR DIVISION		6. BRANCH	<input type="checkbox"/> DEPT'L.	7. IF FIELD, SPECIFY STATION
OO	Contact		Houston	<input checked="" type="checkbox"/> FIELD	Houston
9. PERIOD COVERED BY REPORT From To			8. TYPE OF REPORT		
6 Dec 52 5 Dec 53			<input type="checkbox"/> Initial <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		
<i>Items 7 through 10 will be completed by the person evaluated</i>					
7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.					
1. Contact of officials of US business concerns, scientific, educational, and religious organizations to establish sources for and to obtain information of intelligence significance. 2. Handling of general work in Houston, with emphasis on shipping, contacting of missionaries, particularly from the Far East, and exploiting the University University . 3. In addition full coverage of our work in Ft. Worth, Waco, Abilene & part coverage of Dallas, necessitating approximately two field trips a month. 4. On instructions of the Chief of the Houston Office, handle certain special and sensitive operational projects originated by other branches of the Agency. 5. Have, on occasion, answered teletypes to Washington, signed correspondence & similar matters handled by the Chief or his Assistant when they are not in the office.					
8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.					
Name of Course		Location		Length of Course	Date Completed
CIA Indoctrination Course		Washington, D.C.		9-13 Feb 53	13 Feb 53
9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?					
Collection of foreign intelligence from domestic sources.					
IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).					
10.					
5 January 1954					
DATE			SIGNATURE		
<i>Items 11 through 14 will be completed by Supervisor</i>					
11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE IN THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.					
This officer has continued to exercise exception judgment & tact in capably carrying out his primary mission as a C/S. His past experience in many fields of intelligence activity has given him a background of valuable assets. This experience, coupled with his resourcefulness and energetic exploitation of his contacts, has resulted in high quality and valuable reporting.					

SECRET
SECURITY INFORMATION

<p align="right">PERSONNEL</p> <p>12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING? This officer has continued to exercise sincere, dependable judgment, which has manifested in an intelligent approach to the solution of tasks in connection with the performance of his duties.</p>	
<p>13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT? Although improvement has been noted, he should continue to concentrate on overcoming a slight shyness in his manner.</p>	
<p>14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE. I believe this person is capable of handling greater responsibility.</p>	
<p>15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)</p> <p align="center">No</p>	
<p>16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?</p> <p align="center">None</p>	
<p>17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE. Not applicable.</p>	
<p>18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.</p>	
<p>12 January 1954</p> <p align="center">DATE</p>	<p align="right"><i>Robert C. Roche</i></p> <p align="center">SIGNATURE OF SUPERVISOR</p>
<p>19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in item 20.)</p> <p>20 January 1954</p> <p align="center">DATE</p>	<p align="right"><i>J. B. P.</i></p> <p align="center">SIGNATURE OF REVIEWING OFFICIAL</p>
<p>20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)</p>	

SECRET

SECRET
SECURITY INFORMATION

PERSONNEL EVALUATION REPORT

Items 1 through 6 will be completed by Administrative or Personnel Officer

1. NAME (Last) MOORE, James W.	(First)	(Middle)	2. GRADE GS-13	3. POSITION TITLE Intelligence Officer
4. OFFICE Operations	STAFF OR DIVISION Contact	BRANCH Houston Office	DEPT'L. <input type="checkbox"/> FIELD	IF FIELD, SPECIFY STATION Houston, Texas
5. PERIOD COVERED BY REPORT From 11/6/51 To 11/5/52		6. TYPE OF REPORT <input type="checkbox"/> Initial <input type="checkbox"/> Annual <input type="checkbox"/> Special <input type="checkbox"/> Reassignment <input type="checkbox"/> Reassignment of Supervisor		

Items 7 through 10 will be completed by the person evaluated

7. LIST YOUR MAJOR DUTIES IN APPROXIMATE ORDER OF IMPORTANCE, WITH A BRIEF DESCRIPTION OF EACH. OMIT MINOR DUTIES.
1. I contact high-ranking officials of American business concerns, scientific, educational and religious organizations to establish sources of intelligence information.
 2. I handle general work in Houston, with emphasis on shipping, contacting missionaries, the University of Houston and import-export traders. In addition I am assigned full coverage of our work in Ft. Worth, Waco, Abilene and part coverage of Dallas which necessitates approximately two field trips a month.
 3. Upon instructions of the Chief of the Houston office, handle certain special and sensitive operational projects originated by other branches of the Agency.
 4. During occasions when the Chief and certain other Contact Specialists are out of the office, have answered teletypes to Washington and handled similar matters that would be handled by the Chief if he were in the office.

8. LIST COURSES OF INSTRUCTION COMPLETED DURING REPORT PERIOD.

Name of Course	Location	Length of Course	Date Completed
NONE			

9. IN WHAT TYPE OF WORK ARE YOU PRIMARILY INTERESTED?

Collection of foreign intelligence from domestic sources.

IF DIFFERENT FROM YOUR PRESENT JOB, EXPLAIN YOUR QUALIFICATIONS (APTITUDE, KNOWLEDGE, SKILLS).

10.

31 December 1952

DATE

J. Walton Moore

SIGNATURE

Items 11 through 18 will be completed by Supervisor

11. BRIEFLY DESCRIBE THIS PERSON'S PERFORMANCE ON THE MAJOR DUTIES LISTED UNDER ITEM 7 ABOVE.

This officer is extremely capable and competent in carrying out his primary mission of establishing and exploiting sources of foreign positive intelligence information. He is resourceful and exercises exceptional judgment and tact in relations with contacts. He is cooperative and dependable and has the necessary ability to accurately report collected information. He creates an excellent impression with top company officials which creates a high regard not only for the Houston Field Office but the agency as a whole. He has the ability to obtain results and has demonstrated stability under pressure on occasions requiring great tact and sound judgment. This officer's past experience with the FBI, Naval Intelligence, GSG, and CSE has been an invaluable asset to the Agency. His past experience has materially assisted all Houston C.I.'s.

SECRET
SECURITY INFORMATION

<p>12. IN WHAT RESPECT IS THIS PERSON'S PERFORMANCE ON PRESENT JOB MOST NOTICEABLY GOOD OR OUTSTANDING?</p> <p>His dependability, sincerity and his intelligent approach to the solution of tasks in connection with the performance of his duties.</p>
<p>13. ON WHAT ASPECT OF PERFORMANCE SHOULD THIS PERSON CONCENTRATE EFFORT FOR SELF IMPROVEMENT?</p> <p>He should concentrate on appearing more forceful to overcome an apparent shyness in his manner.</p>
<p>14. COMMENT ON THIS PERSON'S ABILITY TO HANDLE GREATER RESPONSIBILITIES NOW OR IN THE FUTURE.</p> <p>I believe this person is capable of handling greater responsibilities now. In this office all C/S' have approximately the same degree of responsibility because of the very nature of the work and area involved.</p>
<p>15. ARE THERE OTHER DUTIES WHICH BETTER SUIT THIS PERSON'S QUALIFICATIONS? (Recommend appropriate reassignment, if possible.)</p> <p>No.</p>
<p>16. WHAT TRAINING OR ROTATION DO YOU RECOMMEND FOR THIS PERSON?</p> <p>The CIA Orientation Course. (He is scheduled to attend one soon.)</p>
<p>17. IF PERFORMANCE DURING REPORT PERIOD HAS BEEN UNSATISFACTORY, THERE IS ATTACHED COPY OF MEMORANDUM NOTIFYING THIS PERSON OF UNSATISFACTORY PERFORMANCE.</p> <p style="text-align: center;">Not applicable.</p>
<p>18. THIS PERSONNEL EVALUATION REPORT HAS BEEN DISCUSSED WITH THE PERSON EVALUATED. ADDITIONAL COMMENTS INCLUDING COMMENT ON ITEMS 7, 8 AND 9, ARE SHOWN BELOW UNDER ITEM 20.</p> <p style="text-align: right;"><i>None</i></p>
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><u>15 January 53</u></p> <p style="text-align: center;">DATE</p> </div> <div style="width: 45%;"> <p><u><i>Robert A. Rasche</i></u></p> <p style="text-align: center;">SIGNATURE OF SUPERVISOR</p> </div> </div>
<p>19. I HAVE REVIEWED THE ABOVE REPORT. (Comments, if any, are shown in Item 20.)</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><u>27 Jan 53</u></p> <p style="text-align: center;">DATE</p> </div> <div style="width: 45%;"> <p><u><i>Wildcraft</i></u></p> <p style="text-align: center;">SIGNATURE OF REVIEWING OFFICIAL</p> </div> </div>
<p>20. COMMENTS: (If necessary, may be continued on reverse side of cover sheet.)</p>

SECRET

Standard Form No. 51
August 1946
U. S. CIVIL SERVICE COMMISSION

Form approved
Budget Bureau No. 50-5012.2

REPORT OF EFFICIENCY RATING

ADMINISTRATIVE-UNOFFICIAL ()
OFFICIAL:
REGULAR (X) SPECIAL ()
PROBATIONAL ()

As of 6/6/50 based on performance during period from 12/6/49 to 6/6/50

J. Dalton Moore Intelligence Officer GS-130-12
(Name of employee) (Title of position, service, and grade)

OO, Contact
(Organization—Indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 5523A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position. a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning <input type="checkbox"/> All others <input type="checkbox"/>
<input checked="" type="checkbox"/> if adequate		
<input type="checkbox"/> if weak		
<input type="checkbox"/> if outstanding		

- ☐ (1) Maintenance of equipment, tools, instruments.
☐ (2) Mechanical skill.
☐ (3) Skill in the application of techniques and procedures.
☐ (4) Presentability of work (appropriateness of arrangement and appearance of work).
☒ (5) Attention to broad phases of assignments.
☒ (6) Attention to pertinent detail.
☐ (7) Accuracy of operations.
☐ (8) Accuracy of final results.
☒ (9) Accuracy of judgments or decisions.
☒ (10) Effectiveness in presenting ideas or facts.
☐ (11) Industry.
☐ (12) Rate of progress on or completion of assignments.
☐ (13) Amount of acceptable work produced. (Is mark based on production records? (Yes or no))
☒ (14) Ability to organize his work.
☒ (15) Effectiveness in meeting and dealing with others.
☒ (16) Cooperativeness.
☒ (17) Initiative.
☐ (18) Resourcefulness.
☒ (19) Dependability.
☐ (20) Physical fitness for the work.

- ☐ (21) Effectiveness in planning broad programs.
☐ (22) Effectiveness in adapting the work program to broader or related programs.
☐ (23) Effectiveness in devising procedures.
☐ (24) Effectiveness in laying out work and establishing standards of performance for subordinates.
☐ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.
☐ (26) Effectiveness in instructing, training, and developing subordinates in the work.
☐ (27) Effectiveness in promoting high working morale.
☐ (28) Effectiveness in determining space, personnel, and equipment needs.
☐ (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.
☐ (30) Ability to make decisions.
☐ (31) Effectiveness in delegating clearly defined authority to act.

STATE ANY OTHER ELEMENTS CONSIDERED

- ☐ (A) _____
☐ (B) _____
☐ (C) _____

STANDARD Deviations must be explained on reverse side of this form		Adjective Rating
Plus marks on all underlined elements, and check marks or better on all other elements rated.	Excellent	Rating official: <u>EXCELLENT</u>
Check marks or better on all elements rated, and plus marks on at least half of the underlined elements.	Very Good	Reviewing official: <u>Excellent</u>
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance.	Good	
Check marks or better on a majority of underlined elements, and all weak performance not overcompensated by outstanding performance.	Fair	
Minus marks on at least half of the underlined elements.	Unsatisfactory	

Rated by Ernest A. Beebe (signature of rating official) 6/12/50 (Date)

Reviewed by John J. [unclear] (signature of reviewing official) 11 Aug 1950 (Date)

Rating approved by efficiency rating committee [unclear] (Date) Report to employee [unclear]

1988 1007000-1000 00 000000 01000

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY IMP-321. TYPEWRITER WILL BE USED IF POSSIBLE.

Walter Moore.
SIGNATURE OF EMPLOYEE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

DO YOU CONCUR IN EMPLOYEES DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11

HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF SO, TO WHAT GRADE AND FOR WHAT POSITION?

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

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

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

110 ADDITIONAL SPACE IS DESIRED ATACH (AYOA SHEET)

14 October 1949

THE SIGNING OFFICER IS CHIEF OF STATION AREA NO.

Subject: [REDACTED] Date: [REDACTED]

S-S-T S-S-T

TRAINING REPORT

CO/C REFRESHER COURSE NO. 2

SECTION I: IDENTIFYING INFORMATION			
NAME	SEA	DATES OF COURSE	NO. OF STUDENTS
Moore, James Walton	M	6 June-17 June 1955	22
DATE OF BIRTH	AGE	GRADE OR RANK	OFFICE
5 October 1919	June 1946	OS-13	CO/C
PRESENT POSITION			

Contact Specialist in Houston Field Office

SECTION II: OBJECTIVES OF THE COURSE

The objectives of the course are to review changes in organization, policy, and procedures in the intelligence community with special emphasis on those areas of the intelligence community which the Contact Division serves.

SECTION III: SUBJECTIVE CHARACTERISTICS OF THE COURSE

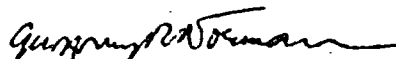
The course is designed for experienced OSI personnel. The first part of the course reviews the organization for national security, with emphasis on the intelligence community. The second part of the course includes a survey of the current world situation. Lectures are supplemented by discussion periods and tours. The students have opportunities to discuss general collection requirements and OSI services with representatives of producing offices.

SECTION IV: PARTICIPATION BY COURSE PARTICIPANTS

James Walton Moore

has attended the entire course.

RECOMMENDATION OF TRAINING


Geoffrey R. NormanHead, Training
Contact Division

CONFIDENTIAL

CLASSIFICATION

OFF

RECOMMENDATION FOR HONOR OR MERIT AWARD

(Submit in triplicate - use HR 30-37)

SECTION A

1. EMPLOYEE NO. 003820		2. NAME OF PERSON RECOMMENDED (Last, First, Middle) Moore, James Walton		3. POSITION-TITLE Field Office Chief	
4. GRADE GS-15	5. SO DYD	6. OFFICE OF ASSIGNMENT Dallas Field Office	7. RECOMMENDED AWARD Career Intelligence Medal		
8. INCLUSIVE DATES FOR WHICH RECOMMENDED 1940 - 1977			9. IF RETIRING, DATE OF RETIREMENT December 1977		10. POSTHUMOUS YES <input type="checkbox"/> X <input checked="" type="checkbox"/> NO <input type="checkbox"/>
11. HOME ADDRESS 5145 Rexton Lane Dallas, Texas 75080				12. HOME PHONE 214-368-4199	

SECTION B

LIST ANY PERSONNEL GIVEN AN AWARD OR RECOMMENDED FOR AWARD WHO ASSISTED IN THE ACT OR PARTICIPATED IN THE PERFORMANCE.

13. FULL NAME	14. TYPE OF AWARD

SECTION C

ATTACH NARRATIVE DESCRIPTION OF PERFORMANCE OR SERVICE WARRANTING AWARD, ANY SUPPORTING DOCUMENTS AND A PROPOSED, UNCLASSIFIED CITATION.

1. Attached narrative description of performance.
2. Attached proposed citation.

SECTION D

15. TITLE AND SIGNATURE OF EMPLOYEE MAKING RECOMMENDATION JACKSON R. HORTON Chief, Domestic Collection Division		DATE 24 August 1977
16. HEAD OF <u>D</u> CAREER SERVICE (Career service of nominee)	TITLE AND SIGNATURE See Item 18.	DATE
17. DEPUTY DIRECTOR OF CAREER SERVICE	TITLE AND SIGNATURE See Item 18.	DATE
18. DEPUTY DIRECTOR OF OPERATING COMPONENT	TITLE AND SIGNATURE /s/ Robert D. Brown, Jr. Deputy Director for Operations	DATE 11 OCT 1977

FORM 600 OBSOLETE PREVIOUS EDITIONS

CONFIDENTIAL

E-2, IMPROVED BY: 010650

(4)

CONFIDENTIAL

Section C

Mr. James Walton Moore is hereby nominated for a Career Intelligence Medal in recognition of his substantial contributions to the missions of the Federal Bureau of Investigation, the Office of Strategic Services, the Strategic Services Unit and the Central Intelligence Agency for more than 37 years.

J. Walton (Jim) Moore spent most of his boyhood (1920-27, 1930-36) in Shantung Province, China with his missionary parents. Following graduation from Hardin-Simmons University in 1940, Jim joined the FBI and served as a Special Agent in both Chicago and San Francisco. During the latter assignment he reported on pro-Communist elements in Chinatown and directed a US Government panel to interview aliens and US citizens returning home to ensure that enemy agents were not slipping into the US as refugees or foreign businessmen.

Jim joined OSS in November 1944 and was commissioned as an Ensign, USNR. His first assignment was in Kunming where he recruited and trained Chinese agents to infiltrate Japanese lines. While in Kunming he took parachute training and on August 17, 1945 jumped into the Japanese internment camp at Weihsein. Following evacuation of refugees he became Chief of Mission in Tsingtao. Returning to the US in December 1946, he was reassigned as Vice Consul and Chief of Station in Dairen. Soviet intransigence prevented his reaching Dairen so he remained in Tsingtao for an additional year until transferred as Chief of Station in Calcutta, arriving there in April, 1948.

Jim returned to the United States in October 1949 and joined the Contact Division, Office of Operations, CIA. CD/OO policy favored continuity and Jim was no exception. From 1949 to 1954 he served in the Houston Field Office and from 1954-1977 as the Resident Officer in Dallas. The Contact Division evolved into the Domestic Contact Service and a reallocation of resources raised the Dallas Resident Office to Field Office status. Jim was the obvious choice for the job. After nine months training and preparation in Washington (where he performed admirably) he was assigned as Chief of the new office with responsibility also for Resident Offices in Tulsa, Houston, New Orleans and, eventually, Austin.

E2 IMPDET CL BY 010650

CONFIDENTIAL

CONFIDENTIAL

Section C (continued)

Jim's work in Dallas has been consistently excellent. Under his leadership the Dallas complex has provided timely foreign intelligence in response to worldwide priorities and requirements. As an example, in April 1975 the Acting Director, Strategic Research commended Jim for "outstanding performance" for urgent special efforts to obtain information which resulted in a reduction of over 500,000 in the Intelligence Community's estimate of the total number of Soviet military personnel.

Similarly, the Dallas Office has provided excellent support to the Clandestine Service. In November, 1976 the Chief, FR Division commended Jim and his staff for "outstanding support" from October 1975-October 1976 in efforts which were "indispensable" to the establishment of FR assets in Texas, Oklahoma and Louisiana and in identifying and assessing prospective targets for recruitment.

There are very few persons of potential consequence to the Intelligence Community in Texas who Jim Moore does not know and little that he cannot accomplish there on behalf of Community and Agency requesters.

The assassination of President Kennedy in Dallas in November 1963, the subsequent allegations against CIA and Jim Moore's long association with Agency interests and programs in Texas have made him a repeated target for media attention and scurrilous innuendo. Although under various forms of severe external pressure as a result, Jim Moore never lost his calm, cool demeanor and has been absolutely dependable in adversity.

An experienced professional, a true gentleman, a delightful person, and an example to be emulated, Jim Moore has been a real credit to the intelligence profession. As he approaches retirement, he richly deserves recognition in the form of the Career Intelligence Medal.

CONFIDENTIAL

REPORT OF HONOR AND MERIT AWARDS BOARD						DATE 18 October 1977	
The Honor and Merit Awards Board having considered a recommendation that:							
SERIAL OR ID NO. 003820	NAME (Last-First-Middle) MOORE, James Walton			BIRTH YEAR 1919	SEX M	TYPE EMPLOYEE Staff	
OFFICE OF ASSIGNMENT DDO/BCD				SO D	SCHEDULE GS	GRADE 15	STATION
BE AWARDED Career Intelligence Medal						DD/A FRIESTY 77-5800	
<input type="checkbox"/> FOR HEROIC ACTION ON							
<input checked="" type="checkbox"/> FOR MERITORIOUS SERVICE OR ACHIEVEMENT DURING THE PERIOD 1940 - 1977							
<input checked="" type="checkbox"/> RECOMMENDS APPROVAL				<input type="checkbox"/> DOES NOT RECOMMEND APPROVAL			
<input type="checkbox"/> RECOMMENDS AWARD OF							
UNCLASSIFIED CITATION <p>Mr. James Walton Moore is hereby awarded the Career Intelligence Medal in recognition of his exceptional achievement with the Central Intelligence Agency for more than 30 years. A charter member of the Agency, Mr. Moore held a series of increasingly responsible positions in which he consistently used his many talents in advancing foreign intelligence objectives. His strong leadership, professionalism and dedication to duty not only enabled his office to provide timely and effective support to worldwide priorities and requirements but also earned for him the admiration and respect of all with whom he worked. Mr. Moore's overall career contributions to the mission of the Agency were substantial and reflect credit on him and the Federal service.</p>							
REMARKS (Recommendation approved by C/CMS/DDO on 11 October 1977.)							
APPROVED Acting Deputy Director of Central Intelligence 1977 DATE				SIGNATURE TYPED NAME OF CHAIRMAN, HONOR AND MERIT AWARDS BOARD Acting B. DeFelice SIGNATURE William O. Brunkhorst TYPED NAME OF RECORDER William O. Brunkhorst			

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)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER		
MOORE,	James	Walton	October 5, 1919	450	26	2532
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)			
Central Intelligence Agency			Dallas, Texas 75221			

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)

James Walton Moore

DATE

February 19, 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

RECEIVED
FEB 20 1968
OFFICE OF PERSONNEL

See Table of Effective Dates on back of Original

ORIGINAL COPY—Return in Official Personnel Folder

STANDARD FORM No. 175-2
JANUARY 1964
(For use only until April 14, 1968)
175-101

CONFIDENTIAL

10 April 1975

MEMORANDUM FOR: Chief, Domestic Collection Division,
DDO

SUBJECT : Appreciation for Outstanding DCD
Performance

1. I want to express the appreciation of the Office of Strategic Research for the special effort recently made for us by J. Walton Moore of your Dallas field office. Mr. Moore responded quickly to our urgent request to obtain information on Soviet military medical services from DS-2172 and provided it to us on very short notice.

2. Let me give you some background. The subject of Soviet medical personnel emerged as an important issue in a recent community-wide effort to reassess total Soviet military manpower. The community reassessment was stimulated by DIA reporting of several months ago that existing estimates of total Soviet military manpower were low by almost one million men. If correct, the DIA appraisal had potentially serious implications for the ongoing MBFR negotiations as well as a host of intelligence judgments about the dimensions of the Soviet military threat.

3. During the ensuing interagency review of the individual estimates contributed by various agencies in the Washington area, we came to the conclusion that the number of Soviet medical manpower estimated by an Army intelligence group was much too high. A rapid search of headquarters' files turned up barely enough intelligence to prepare an estimate of a portion of the medical services, but no direct evidence on total medical manpower. At this point it became clear to us that an improved estimate might be made with information from DS-2172. As we had to present our case to the manpower study Steering Group early in the week of March 24, speed in contacting the Soviet source was essential.

CONFIDENTIAL

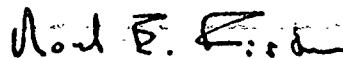
2

27972

CONFIDENTIAL

4. The data submitted by the Dallas field office as a result of a specially arranged debriefing provided us with the basis for a much improved estimate of Soviet military medical staffing. Furthermore, Mr. Moore's questions elicited some new information of value to future work. Most important, the results of DCD's efforts contributed significantly to convincing the working group that the original Army estimate was far too high. Eventually the estimate we submitted based upon the information supplied by DS-2172 was accepted by the manpower Steering Group and resulted in a reduction of over 500,000 men in the intelligence community's estimate of the total number of Soviet military personnel.

5. The efforts of your people struck a mighty blow for good intelligence. Many thanks.



NOEL E. FIRTH
Acting Director
Strategic Research

SECRET
(When Filled In)

CAREER PREFERENCE OUTLINE			
<p>This Outline, when completed, is a documented description of the individual's career interests and proposed career activities together with the comments of his supervisor and his Career Service. The original will be filed in the employee's Official Personnel Folder and will serve as a guide for future personnel actions affecting him. Implementation of career preferences must depend upon the needs of the Organization.</p> <p align="center">- CONSULT ATTACHED INSTRUCTION SHEET PRIOR TO COMPLETING THIS OUTLINE -</p>			
SECTION A. GENERAL			
1. NAME OF EMPLOYEE (Last-First-Middle)	2. DATE OF BIRTH	3. SERVICE DESIGNATION	4. GRADE
MOORE, James W.	5 Oct 1919	OC	GS-14
5. ORGANIZATIONAL TITLE	6. POSITION TITLE	7. OCCUPATIONAL CODE	8. OFFICE OF ASSIGNMENT
Resident Agent, Dallas	IO (Contact)	GS-0132.21	OO/Contact/Houston
SECTION B. CAREER INTERESTS			
9. GENERAL TYPE OF ACTIVITY			
Collection of foreign intelligence from domestic sources. Support activity.			
10. SPECIFIC TYPE OF ACTIVITY (Including assignments)			
A. IMMEDIATE (Within next 1 to 2 years)			
Usual duties of a Resident Agent in Contact Division.			
B. LONG-RANGE (Within next 3 to 5 years)			
SECTION C. TRAINING			
11. ORGANIZATIONAL, EXTERNAL, AND ON-THE-JOB TRAINING			
A. IMMEDIATE (Within next 1 to 2 years)			
Believe regular inservice training now received sufficient for present duties.			
B. LONG-RANGE (Within next 3 to 5 years)			
12. ADDITIONAL COMMENTS			
Believe my capabilities are being well utilized and am very happy in present post.			
1. I RECOGNIZE THAT THE IMPLEMENTATION OF MY CAREER PREFERENCES MUST DEPEND UPON THE NEEDS OF THE ORGANIZATION. I UNDERSTAND THAT MY PERFORMANCE, CAPABILITIES AND INTERESTS WILL BE GIVEN DUE CONSIDERATION.		13. DATE COMPLETED	14. SIGNATURE OF EMPLOYEE
		16 Dec 57	J. Walton Moore.

SECRET

(When Filled In)

SECTION D.		COMMENTS BY SUPERVISOR	
15. RELATIVE TO CAREER INTERESTS OF EMPLOYEE.			
No comment.			
16. RELATIVE TO TRAINING FOR EMPLOYEE			
I agree that employee is probably in a position in which his capabilities are exploited to the fullest.			
17. TYPED OR PRINTED NAME OF SUPERVISOR		18. SIGNATURE	
Ernest A. Rische		<i>Ernest A. Rische</i>	
19. TITLE		20. DATE	
Chief, Houston Field Office		19 December 1957	
SECTION E.		FOR USE OF CAREER SERVICE	
21. COMMENTS			
The CD/CSE concurs in this outline.			
22. TYPED OR PRINTED NAME		23. SIGNATURE	
24. TITLE		25. DATE	
LEAVE BLANK			

SECRET

14-00000

RECORD OF OVERSEAS SERVICE (FORM 145)

NAME OF EMPLOYEE: MICHAEL J. WALTON

EMPLOYEE SERIAL NO.: 03F20

COMPLETED BY EMPLOYEE: ☒ YES ☐ NO

TELEPHONE EXT.: 2271

SECRET (WHEN FILLED IN)

DO NOT FOLD, STAPLE, SPINDLE, OR MUTILATE

INSTRUCTIONS	DO NOT WRITE IN COLUMN	WHERE SERVICE WAS PERFORMED	PCB-1 TOY-2 ENTER NO.	DATE		SERVICE AS CIVILIAN-1 MILITARY-2 ENTER NO.	RESPONSIBLE U.S. GOVT. DEPT. OR AGENCY	DO NOT WRITE IN COLUMN		
				FROM MO. YR.	TO MO. YR.					
<p>THIS FORM MUST BE RETURNED WHETHER YOU HAVE HAD OVERSEAS SERVICE OR NOT.</p> <p>PLEASE READ CAREFULLY INSTRUCTIONS ON ACCOMPANYING CARD; THEN FILL OUT THIS FORM AS ACCURATELY AS POSSIBLE.</p>										
	145	China	1	01	45	11	45	2	Navy-OCS	100
	145	China	1	01	47	01	48	1	CIA-State	100
	330	India	1	01	48	08	48	1	CIA-State	100

IF ADDITIONAL SPACE IS NEEDED, CHECK HERE ☐ AND ASK YOUR ADMINISTRATIVE OFFICER FOR SUPPLEMENTAL CARDS

SECRET

24 November 1956

To: Chief, SFB. FPD
Subject: Mr. J. Walton Moore, Agent, Contact Office, Dallas, Texas

I should like to call attention to the outstanding cooperation given our activities in Dallas by J. Walton Moore, resident representative in Dallas, Texas.

Mr. Moore has not only extended the normal hospitality of his offices, but has gone out of his way to nominate and talk with exceptional people who come to his attention as potential employees for the Agency. Mr. Moore has contacted me from time to time with names and comments on individuals, and in every way attempted to serve as an active personnel scout in his area. I feel his efforts and time consumed in interviewing people have gone a good deal beyond the normal expectations of our agency, and that this attitude best represents the unified type of teamwork which our organization subscribes to in this work.

While my experiences with the resident offices in my area have been uniformly a pleasant experience, it is a matter of real satisfaction to find a man who is thinking in terms of the Agency as a whole and not of one sharply defined activity. I believe the spirit that Mr. Moore shows should be brought to the attention of his superiors as a prime example of teamwork in the field. It is not only a personal satisfaction to do business with Mr. Moore, but it greatly contributes to the morale of our efforts by knowing that other offices are as concerned as we are in producing results.

Sincerely,

J. Byron Crossman
J. Byron Crossman



SECRET

CENTRAL INTELLIGENCE AGENCY

WASHINGTON 25, D. C.

OFFICE OF THE DIRECTOR

9 DEC 1955

MEMORANDUM FOR: J. Walton Moore

SUBJECT: Notification of Membership in the Career Staff

1. On behalf of the Director of Central Intelligence, it gives me pleasure to inform you that your application for membership in the Career Staff has been accepted by the CIA Selection Board. The effective date of your membership is 1 July 1954.

2. Please indicate that you have received this notification by signing in the space provided below and return it to the Head of your Career Service. He will forward it to the Executive Director of the CIA Selection Board.

3. Because your membership in the Career Staff is classified information, it is necessary that this notification be conveyed to you in this manner. The application for membership which you signed has been endorsed on behalf of the Director of Central Intelligence by the Executive Director of the CIA Selection Board and placed in your permanent Official Personnel Folder.

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE

Harrison G. Reynolds
Chairman, CIA Selection Board

Noted:

Date: 26 March 56.

Career Service Staff
Office of Personnel

15 MAY 1956

SECRET

SECRET
Security Information

Name: Last, First Middle

TO: All C. I. A. Personnel
FROM: Personnel Director
SUBJECT: PERSONNEL QUALIFICATION QUESTIONNAIRE

CODED
FOR
QUALIFICATIONS
DATE 22 OCT 52

1. The Agency is currently revising the system for machine coding employee qualifications, thereby permitting more complete and accurate data on all personnel. The new system will aid in implementing Agency policies on promotion from within by facilitating the selection of personnel with desired education and experience for vacancies which may occur. It is also expected that the new system will provide readily accessible statistics for planning and management purposes.

2. The attached questionnaire is designed to cover adequately those factors in which the Agency is interested. Although the information is, in a large measure, already reflected in previous forms submitted by you, it is felt that your time within the organization may enable you to emphasize those qualifications pertinent to its needs. The questionnaire also serves to bring your education and qualifications record up to date.

3. Your cooperation is requested in completing the questionnaire as thoroughly and accurately as possible and returning it to your Administrative Officer within the time allotted.

George E. Meloon
George E. Meloon
Personnel Director

SECRET
Security Information

SECRET
Security Information

PERSONNEL QUALIFICATION QUESTIONNAIRE

1. Serial No. (no entry) 3820	2. NAME: (last) (first) (middle) Moore J. Walton	3. Office Operations
4. Date of Birth Oct. 5, 1919	5. Sex: <input type="checkbox"/> male (1) <input type="checkbox"/> female (2)	Martial Status Nr. Dependents
6. CIA Entry Date: Fall of 1946	7. Citizenship: <input checked="" type="checkbox"/> U.S. <input type="checkbox"/> Other	
8. Acquired By: (1) Birth (2) Marriage (3) Naturalization (4) Other (specify) Year U.S. citizenship acquired, if not by birth		

SEC. I. EDUCATION

1. Extent: (circle one)

- | | | |
|--|---|-------------------|
| 1. Less than high school | 4. Two years college, or less | 8. Masters degree |
| 2. High school graduate | 5. Over two years, no degree | 9. Doctors degree |
| 3. Trade, Business or Commercial school graduate | <input checked="" type="checkbox"/> Bachelor degree | |
| | <input checked="" type="checkbox"/> Post-graduate study (minimum 8 sem. hrs.) | |

2. College or University Study:

Name and location of College or University	Major	Minor	Dates att'd		Yrs Compl		Degree Recd		Sem Hrs
			From	To	Day	Night	Title	Date	
Hardin-Simmons Univ. Abilene, Texas	Pol. Science	Ed.	Sept 1936	Feb 1938	1		BA	Feb 1940	120
George Washington Univ Law School, Wash. D.C.	Law		Sept 1940	Dec 1941		1			20

3. Trade, Commercial, and Specialized Training:

School	Attendance Dates			Study or Specialization
	From	To	Tot.mo's	
None				

4. Military or Intelligence Training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, command & staff, etc.)

School	Attendance Dates			Study or Specialization
	From	To	Tot.mo's	
None				

SECRET

Security Information

SECRET
Security Information

SEC. II. WORK EXPERIENCE

1. **CIA Experience:** State the specific nature of duties performed with CIA and CIG, starting with your present position. Take position titles from your official personnel papers, if you have personal copies. Please do not request your Official Personnel Folder. Include geographic area and subject matter dealt with, if applicable. Position Title is your classification title such as Geographer, Intelligence Officer, etc. Duty Title indicates your organization position such as - Section Chief, Branch Chief, Administrative Assistant, etc., and is to be filled in only if different to the Position Title. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.

From <u>1958</u> To <u>Present</u> Tot. mos. <u>33</u>	Description of Duties: Under general direction of the Chief, Houston Office, am responsible for contacting high-ranking officials of American business concerns, scientific, educational and religious organizations for the purpose of obtaining sources for obtaining valuable intelligence information.
Grade <u>GS-11</u> Salary <u>\$4300</u>	
Office <u>Operations</u>	
Position	
Title: <u>Intelligence Officer</u>	
Duty	
Title:	Duty Station, if overseas:
From <u>1954</u> To <u>1957</u> Tot. mos. <u>40</u>	Description of Duties: In charge of CSC operations at Calcutta, India. Duties consisted of gathering intelligence and submitting reports to various intelligence and the collection of Soviet officials and the Communist Party. Regular duties consisted of writing political reports.
Grade <u>GS-11</u> Salary <u>\$3600</u>	
Office <u>CSC</u>	
Position	
Title: <u>Intelligence Officer</u>	
Duty	
Title: <u>Vice-Consul</u>	Duty Station, if overseas: <u>Calcutta, India.</u>
From <u>1952</u> To <u>1954</u> Tot. mos. <u>22</u>	Description of Duties: Ascertaining foreign news collection of Communist Party in India, Soviet citizens, and other intelligence and political matters.
Grade <u>GS-11</u> Salary <u>\$3100</u>	
Office <u>CSC</u>	
Position	
Title: <u>Intelligence Officer</u>	
Duty	
Title: <u>Vice-Consul</u>	Duty Station, if overseas:
From <u>1950</u> To <u>1952</u> Tot. mos. <u>24</u>	Description of Duties: Supervised activities of Indian collection of three intelligence officers. I acted as a cover officer, paid for the code clerks and the Chinese interpreters. I acted as a liaison officer, intelligence under direct supervision of the Chief of Mission.
Grade <u>GS-11</u> Salary <u>\$3100</u>	
Office <u>CSC</u>	
Position	
Title: <u>Intelligence Officer</u>	
Duty	
Title: <u>Chief of Mission</u>	Duty Station, if overseas: <u>Calcutta, India.</u>

SECRET
Security Information

SEC. II. WORK EXPERIENCE (CONT'D.)

2. Other than CIA: (Describe work experience for the last 15 years in sufficient detail to permit specific coding of your qualifications. Include military work experience. List last position first.)

[illegible]

SECRET
Security Information

SEC. II. WORK EXPERIENCE (CONT'D)

3. **Special Work Experience:** Check any of the following organizations by which you may have been employed.

- | | | | |
|----|------------------------------|----|------------------------------|
| 01 | U.S. Secret Service | 24 | Air Force A-2 |
| 02 | Civil Police | 25 | Foreign Economic Admin. |
| 03 | Military Police | 26 | Counter Intelligence Corps |
| 04 | U.S. Border Patrol | 27 | Immigration & Naturalization |
| 05 | U.S. Narcotics Squad | 28 | Strategic Services Unit |
| 06 | FBI | 29 | Foreign Service, State Dept. |
| 07 | Criminal Investigation Div. | 30 | Central Intelligence Group |
| 21 | Office of Naval Intelligence | 31 | Armed Forces Security Agency |
| 22 | Office of War Information | 32 | Coordinator of Information |
| 23 | Army G-2 | 33 | Office of Facts & Figures |
| 20 | Office of Strategic Services | 34 | Board of Economic Warfare |
| | | 35 | Federal Communications Comm. |

SEC. II. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE		COMPETENCE	HOW ACQUIRED
		Equivalent to Native Fluency *	
		Fluent but obviously Foreign *	
		Adequate for Research **	
		Adequate for Travel	
		Limited Knowledge	
		Native of Country	
		Prolonged Residence	
		Contact (Parents, etc.)	
		Academic Study (Inc. CIA training)	

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein

****Specialized Language Competence:** Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality.

SECRET

Security Information

SEC. II. WORK EXPERIENCE (CONT'D.)

2. Other than CIA: (Describe work experience for the last 15 years in sufficient detail to permit specific coding of your qualifications. Include military work experience. List last position first.)

From <u>1961</u> To <u>1962</u> Tot. mo's <u>12</u>	Exact Title of your position <u>Special Agent in Charge</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Number and Class of Employees Supervised: <u>None</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Employer <u>Department of Defense</u>	<u>Responsible for the supervision of the</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
From <u>1962</u> To <u>1963</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1963</u> To <u>1964</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1964</u> To <u>1965</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1965</u> To <u>1966</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1966</u> To <u>1967</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1967</u> To <u>1968</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1968</u> To <u>1969</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>
From <u>1969</u> To <u>1970</u> Tot. mo's <u>12</u>	Duty Station if overseas: <u>Washington, D.C.</u>
Classification Grade (if in Federal Service) <u>GS-11</u> Salary <u>\$11,000</u>	Exact Title of your position <u>Special Agent in Charge</u>
Number and Class of Employees Supervised: <u>None</u>	Description of Duties: <u>Responsible for the supervision of the</u>
Employer <u>Department of Defense</u>	<u>Security Office, Department of Defense, Washington, D.C.</u>
Kind of Business or organization (i.e., paper products mfr, public utility) <u>Government Agency</u>	<u>Responsible for the supervision of the</u>

SECRET

Security Information

SECRET
Security Information

SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

- | | |
|--|--|
| 01 <input type="checkbox"/> U.S. Secret Service | 24 <input type="checkbox"/> Air Force A-2 |
| 02 <input type="checkbox"/> Civil Police | 25 <input type="checkbox"/> Foreign Economic Admin. |
| 03 <input type="checkbox"/> Military Police | 26 <input type="checkbox"/> Counter Intelligence Corps |
| 04 <input type="checkbox"/> U.S. Border Patrol | 27 <input type="checkbox"/> Immigration & Naturalization |
| 05 <input type="checkbox"/> U.S. Narcotics Squad | 28 <input type="checkbox"/> Strategic Services Unit |
| 06 <input type="checkbox"/> FBI | 29 <input type="checkbox"/> Foreign Service, State Dept. |
| 07 <input type="checkbox"/> Criminal Investigation Div. | 30 <input type="checkbox"/> Central Intelligence Group |
| 21 <input type="checkbox"/> Office of Naval Intelligence | 31 <input type="checkbox"/> Armed Forces Security Agency |
| 22 <input type="checkbox"/> Office of War Information | 32 <input type="checkbox"/> Coordinator of Information |
| 23 <input type="checkbox"/> Army G-2 | 33 <input type="checkbox"/> Office of Facts & Figures |
| 20 <input type="checkbox"/> Office of Strategic Services | 34 <input type="checkbox"/> Board of Economic Warfare |
| | 35 <input type="checkbox"/> Federal Communications Comm. |

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE	COMPETENCE						HOW ACQUIRED				
	Equivalent to Native Fluency *	Fluent but obviously Foreign *	Adequate for Research **	Adequate for Travel	Limited Knowledge		Native of Country	Prolonged Residence	Contact (Parents, etc.)	Academic	Study (Inc. CIA training)
Chinese											
French											

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein _____

**Specialized Language Competence: Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality. _____

SECRET
Security Information

SEC. IV. AREA KNOWLEDGE

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

Country or Region	Dates of Residence, Study Etc.	Manner in Which Knowledge Was Acquired (check (X) one)		
		Residence	Travel	Study
North China	1900-1944			
India	1940-1950			

2. Specialized Knowledge of Area

List specialized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

Country	Type of Knowledge	How and When Gained
North China	Geographical, political parties.	Through residence and assignment as Vice-Consul in Tientsin, North China.
India	Political	Residence and assignment as Vice-Consul in Calcutta, India.

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION) NOTE

Skill	Per Cent of Time Used	Not Used	WPM (Approximate Proficiency)	Prefer Assignment Using Skill Often
Typing	1.	2.		1. Yes 2. No
Shorthand	1.	2.		1. Yes 2. No

Shorthand System: 1. Manual 2. Machine 3. Speedwriting.

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc. No licenses. Training as Paratrooper, 1 year.	2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications.

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

List any professional or academic associations or honorary societies in which you hold membership.
None

SECRET
Security Information

SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction: professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of any published materials of which you were author or co-author.

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

Device	Patented	
None	(1) Yes	(2) No
	(1) Yes	(2) No
	(1) Yes	(2) No

SEC. X. CIA TESTS

Describe below the type of tests which you have taken in CIA:

Type of Test	Date Taken
None	

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

None

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

(1) 2 year Tour ____	(2) 4 year Tour ____	(3) Not interested at present ____
----------------------	----------------------	------------------------------------

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment in CIA do you think you are best qualified?

Contact Specialist

**SECURITY INFORMATION
CONFIDENTIAL**

PLEASE READ INSTRUCTION SHEET BEFORE PREPARING THIS FORM											
STATEMENT OF FEDERAL CIVILIAN AND MILITARY SERVICE						OFFICE Operations		DIVISION Contact			
MOORE, J. Walton						BRANCH Houston		SECTION ---			
I. FEDERAL CIVILIAN SERVICE (BEGIN WITH THIS AGENCY AND FOLLOW IN REVERSE CHRONOLOGICAL ORDER)											
AGENCY	LOCATION	FROM			TO			TOTAL SERVICE			
		DA.	MO.	YR.	DA.	MO.	YR.	DA.	MO.	YR.	
CIA, O/O	Houston, Texas	6	1	50	5	1	52	2	2		
CIA, OSO	Overseas	20	8	46	1	1	50	10	2	3	
FBI	San Francisco, California	16	10	42	20	1	45	2	2		
FBI	Springfield, Illinois		6	42	10	4	42				
FBI	Washington, D.C.	8	4	40	12	4	42			2	
Total Civilian Service								16	8	7	
II. MILITARY SERVICE (INCLUDE ONLY PERIODS OF ACTIVE DUTY; DO NOT INCLUDE TERMINAL LEAVE)											
BRANCH OF SERVICE	FROM			TO			TOTAL SERVICE				
	DA.	MO.	YR.	DA.	MO.	YR.	DA.	MO.	YR.		
US Navy	6	1	45	24	8	46	24	7	1		
Total Military Service								24	7	1	
III. CERTIFICATION											
<p>I hereby certify that the above Civilian and Military service is complete and accurate to the best of my knowledge.</p> <p>14 December 1951 J. Walton Moore</p> <p>DATE SIGNATURE OF EMPLOYEE</p>											
IV. REMARKS: (CONCERNING ABOVE SERVICE)						V. FOR PERSONNEL OFFICE USE ONLY					
<p>SCD-48-40 verified SSR 7/16/52</p>						TOTAL CREDITABLE SERVICE					
						DAYS		MONTHS		YEARS	
						10		11		7	
MAY BE CONTINUED ON NON-DETACHABLE REVERSE SIDE											

RESIDENCE AND DEPENDENCY REPORT

Z17A-146

Attn: Special Funds

Instructions

For use by staff officers and employees only. Submit in duplicate on entering Service and whenever designated place of residence or marital or dependency status changes. IMPORTANT in determining travel expenses and transit salary allowable in connection with leave at Government expense, return to residence upon separation, and in determining transportation expenses allowable in connection with shipment of remains of officer or employee or member of family.

Name of officer or employee

Ernest K. Raford.

James H. Moore

Place of residence when appointed to service

987 Foss Ave., Abilene, Texas.

If appointed abroad, last place of residence in continental United States

987 Foss Ave., Abilene, Texas.

Place in continental United States designated permanent or legal residence
Abilene, Texas.MARITAL STATUS☐ Single☒ MarriedPlace of marriage
Washington D.C.Date of marriage
12 April 1941

Place of divorce decree

Date of divorce decree

☐ Divorced

Place spouse died

Date spouse died

☐ WidowedMembers of Family
(As defined in GWT No. 11)

Identification of Members of Family	Relationship	Date of Birth
Patricia A. Raford	wife	Nov. 13, 1919
Michael Raford	son	July 2, 1943
Margaret Lee Raford	daughter	Sept. 10, 1944

Date of submission
12 January 1949Ernest K. Raford.
Signature

bcl

APPOINTMENT AFFIDAVITS

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

Central Intelligence Agency

Houston, Texas

(Department or agency)

(Bureau or division)

(Place of employment)

I, James W. Moore, 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 a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. 57, dated 19 October, 1946, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

J. Walton Moore
(Signature of appointee)

Subscribed and sworn before me this 6th day of December, A. D. 1949,

at Houston
(City)

Texas
(State)

Chapter 143, Title II, Sec. 206
Act of June 26, 1943

Elizabeth Menison
(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.

DECLARATION OF APPOINTEE

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

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

2457 Edgewood St. Abilene, Texas

2. (A) DATE OF BIRTH

Feb 5, 1919

(B) PLACE OF BIRTH (city or town and State or country)

Hartwell, Georgia, U.S.A.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY

Mrs. Patricia G. Moore

(B) RELATIONSHIP

wife

(C) STREET AND NUMBER, CITY AND STATE

Same as above

(D) TELEPHONE NO.

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (OTHER 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 blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATION- SHIP	MAR- RIED (Check one)	SINGLE
		1. 2. 3.		<input type="checkbox"/>	<input type="checkbox"/>
		1. 2. 3.		<input type="checkbox"/>	<input type="checkbox"/>
		1. 2. 3.		<input type="checkbox"/>	<input type="checkbox"/>

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

YES NO

ITEM NO.

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?

☒ YES ☐ NO

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

☐ YES ☒ NO

If your answer is "Yes", give details in Item 10

7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT, NOR ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?

☐ YES ☒ NO

If your answer is "Yes", give in Item 10 reason for retirement, that is, age, physical disability, or by reason of voluntary or involuntary discharge after 5 years service, amount of retirement pay, and where what retirement act, and rating, if retired from military or naval service

8. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?

☐ YES ☒ NO

If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.

9. SINCE YOUR BIRTH HAVE YOU EVER BEEN ARRESTED, INDICTED OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING OR CONVICTED OF ANY CRIME OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO "GOOD" BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, PENAL PROSECUTION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)?

☐ YES ☒ NO

If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in accordance 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, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

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

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

(3) **Citizenship**—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form of citizenship is a dividend for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

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

OFFICE OF OFFICE, AFFIDAVIT
AND
DECLARATION OF APPOINTEE

WAR DEPARTMENT

STRATEGIC SERVICES UNIT

SHANGHAI, CHINA

(Department or Establishment)

(Bureau or Division)

(Place of Employment)

A.
OATH OF
OFFICE

I, James W. Moore

Do solemnly swear (or affirm) that 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; and 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

Do further swear (or affirm) that I do not advocate, nor am I a member of any political party or organization that advocates the overthrow of the Government of the United States by force or violence; and that during such time as I am an employee of the Federal Government, I will not advocate nor become a member of any political party or organization that advocates the overthrow of the Government of the United States by force or violence.

C.
DECLARATION
OF APPOINTEE

Do further certify that (1) I have not paid or offered or promised to pay any money or other thing of value to any person, firm, or corporation for the use of influence to procure my appointment; (2) I will inform myself of and observe the provisions of the Civil Service law and rules and Executive orders concerning political activity, political assessments, etc., as quoted on the attached Information for Appointee, and (strike out either (3) or (4))

(3) the answers given by me in the Declaration of Appointee on the reverse of this sheet are true and correct;

(4) the answers contained in my Application for Federal Employment, Form No. 205a dated 27 May 1946, filed with the above-named department or establishment, which I have reviewed, are true and correct as of this date, except for the following (if necessary, use additional sheet; if no exceptions write "none"; if (4) is executed, the reverse of this sheet need not be used):

Subscribed and sworn before me this 29th day of August A. D., 1946

at Shanghai, China

(City)

[SEAL]

Bowman M. Moore, 1st Lt. CMP

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

29 August 1946

Intelligence Officer

5 October 1919

(Date of Entrance on Duty)

(Position to which appointed)

(Date of Birth)

J. 2272312

I, James W. Moore, do hereby swear or affirm
that I am not engaged in any strike against the Government of
the UNITED STATES; that I am not a member of an organization
of Government employees that asserts the right to strike against
the government of the UNITED STATES, and that I will not while a
Government employee become a member of such an organization.

James Walter Moore
signature of employee

Subscribed and sworn to before me this 29th day of August
1946 at Shanghai, China.

Bowman M. MacArthur
Bowman M. MacArthur, 1st Lt. CMP
ADJUTANT

(Form No. 205a)

APPLICATION FOR APPOINTMENT

All questions must be fully answered in the
applicant's handwriting

Date: 27 May 1946

I, the undersigned, hereby make application for appointment
as a _____.

1. (a) Name in full: James Walton Moore(b) Name as usually signed J. Walton Moore

(One Christian name at least
should be used, and not
initials only)

2. Permanent post office address: c/o W. O. Ansley Jr.807 Ross Avenue, Abilene, Texas3. Place and date of birth: Hartwell Georgia
(City) (State)

<u>5</u>	<u>October</u>	<u>1919</u>
(Day)	(Month)	(Year)

4. Married or single: Married

5. If married, give names of wife (~~xxxxxxx~~) and children
and ages of children; if other dependents, give names and status:

<u>Mrs. Patricia Ansley Moore</u>	<u>Wife</u>	
<u>Michael Walton Moore</u>	<u>Son</u>	<u>3 1/2 yrs</u>
<u>Margaret Lee Moore</u>	<u>Daughter</u>	<u>2 yrs</u>
_____	_____	_____
_____	_____	_____

6. Place of birth of wife (~~xxxxxxx~~): Houston, Texas

7. Length of residence of wife (~~XXXXXXXX~~) in the
United States: Total life - 26 Yrs

8. Name of State of which you are a legal resident, and
the length of legal residence therein: Texas - 6 Yrs

9. If a foreigner, state country of which a citizen or
subject: - - - - -

10. If a native citizen, a certified copy of birth certi-
ficate should be transmitted with application. (If
such certificate can not be obtained from office of
record, a sworn statement showing place and date of
birth should be furnished by your father or mother,
if living; otherwise, a person competent to make the
statement).

If a naturalized citizen, certificate of naturalization
should be transmitted with application. State how and when
citizenship was acquired: - - - - -

11. Name, nationality, and permanent address of father:

J. Walton Moore, American Deceased

12. Maiden name and permanent address of mother:

Minnie Lee Foster, 711 South 5th Street
Waco, Texas

13. Place and date of birth of father Murphy Co. N Carolina 1893

14. Place and date of birth of mother Mo Laen, Texas 1896

15. If parents are dead, state name, relationship, and
address of nearest living relative or friend: - - - - -

- 3 -

16. Describe your present physical condition, and state whether you have any physical defect or infirmity. Is your health and physical condition such that you can serve in any climate? (The right is reserved to require the applicant to submit to a medical examination.) Physical condition good
Any climate

17. At what institutions educated? Give dates covering time spent in each and state general courses of study pursued; degrees, if any, obtained; and years when conferred: _____
AB Degree Hardin-Simmons U, Abilene, Texas, 1936-1940
20 hrs law George Washington U, Washington D. C. 1940-
1941.

18. State briefly the extent of your knowledge of foreign languages; also the length of time you have resided abroad, if at all: Speaking - Language of Mandarin Chinese
16 Years residence in North China

19. Are you a stenographer? If so, how experienced? _____

No

20. Are you a typist? If so, how experienced? _____

Yes - Fair

21. State fully every kind of occupation you have followed including when and where you were employed; the addresses of the

- 4 -

different employers; the length of time employed by each;

salary paid in each instance, and the nature of the work

performed; whether you resigned voluntarily or were discharged:

April 1940 to Jan 1942 Employed as Clerk - Federal Bureau
of Investigation. Salary when departed \$1620 per annum.

Jan 1942 to Nov 1944 - Special Agent FBI - Salary when
departed \$4424.00 per annum. Resigned voluntarily both
instances.

Ensign - USNR - Since 6 Jan 1945. Worked in North China
with SSU since June 1945.

22. Have you any outstanding financial obligations? If so,
state names of creditors (individuals or firms), amounts due to
each, and date on which such obligations were contracted: _____

No

23. Were you ever in the public service of the United
States, military, naval, or civil; State or municipal? Name

- 5 -

offices and dates covering period of service in each: _____

Department of Justice - April 1940 to Nov 1944

U. S. Navy 6 Jan 1946 to present date

24. Do you now hold, or have you ever held, any position under any foreign government? If so, state the position or positions: No

25. What is the lowest salary you would accept, as a clerk?

XXXX XXXX

26. Give name of five responsible persons for references:

N. J. L. Pieper, FBI - 111 Sutter St., San Francisco

Chester L. Jacoby, FBI - 111 Sutter St. San Francisco

Mr. William Harrison, #1 Toledo Way, San Francisco

Mr. Buford Ellis, Farmers & Merchants Bank, Abilene, Texas

Dr. N. A. Richardson, President, Hardin Simmons U., Abilene, Texas.

27. Are your services immediately available for duty in any part of the world? Yes

J. Walton Moore
(Signature of Applicant)
J. WALTON MOORE,
Ensign - USNR

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 8 March 1971	
2. NAME (Last, First, Middle) Moore, James W.		3. POSITION TITLE	
5. OFFICE, DIVISION, BRANCH DCS		4. GRADE	
		6. EMPLOYEE'S EXT. 2265	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HDOS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> ETD STATION TDY OR PCS TYPE OF COVER NO. OF DEPENDENTS TO ACCOMPANY NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED </div> <input type="checkbox"/> RETURN FROM OVERSEAS <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> ETA STATION NO. OF DEP'S </div>	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE	
		ROOM NO. & BUILDING	
		EXT.	

10. COMMENTS	
11. REPORT OF EVALUATION	
Qualified ANNUAL Annual.	
DATE 15 March 1971	SIGNATURE FOR CHIEF OF MEDICAL STAFF Peter Ironka, ONS/pro

SECRET
(When Filled In)

MEDICAL ACTION REQUEST AND REPORT		
I. REQUEST FOR PHYSICAL EXAMINATION BY		
1. NAME (Last)	2. DATE	3. GRADE
MOORE, J. Walton	28 March 1959	GS-14
4. TO POSITION	5. OFFICE, DIVISION, BRANCH	6. GRADE
Intelligence Officer (Contact)	OO CONTACT/HQ-RTS	GS-14
7. TYPE OF POSITION	8. EVALUATE FOR	
<input type="checkbox"/> Departmental <input checked="" type="checkbox"/> U.S. Field <input type="checkbox"/> Overseas	<input type="checkbox"/> EOP <input type="checkbox"/> Overseas <input type="checkbox"/> Returnee <input type="checkbox"/> Pre-Employment <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special (Specify)	
II. REPORT OF MEDICAL EVALUATION		
<input type="checkbox"/> Qualified for Full Duty (General) <input type="checkbox"/> Qualified for Departmental Duty Only <input type="checkbox"/> Qualified for Full Duty (Special) <input type="checkbox"/> Disqualified		
Remarks:		
10 APR 1959 QUALIFIED FOR CURRENT DUTIES _____ SECRET Martin J. Fegner		

SECRET
(When Filled In)

MEDICAL ACTION REQUEST AND REPORT		
I. REQUEST FOR PHYSICAL EXAMINATION BY		
1. NAME (Last)	2. DATE	3. GRADE
MOORE, James	11 Sept - 28 August 1957	GS-14
4. TO POSITION	5. OFFICE, DIVISION, BRANCH	6. GRADE
IO	OO/Contact Division, Field	GS-14
7. TYPE OF POSITION	8. EVALUATE FOR	
<input type="checkbox"/> Departmental <input checked="" type="checkbox"/> U.S. Field <input type="checkbox"/> Overseas	<input type="checkbox"/> EOP <input type="checkbox"/> Overseas <input type="checkbox"/> Returnee <input type="checkbox"/> Pre-Employment <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Special (Specify)	
II. REPORT OF MEDICAL EVALUATION		
<input type="checkbox"/> Qualified for Full Duty (General) <input type="checkbox"/> Qualified for Departmental Duty Only <input type="checkbox"/> Qualified for Full Duty (Special) <input type="checkbox"/> Disqualified		
Remarks:		
Subject is qualified for U. S. Field. (9/16/57)		
MEDICAL OFFICE [Signature]		

REPORT OF PHYSICAL QUALIFICATION		
NAME	GRADE	DATE
Moore, James Walton	Returnee	2/27/53
FOR UNEMPLOYED EMPLOYEE ONLY		
NATURE OF ACTION	TYPE OF POSITION	
	<input type="checkbox"/> EOP <input type="checkbox"/> FIELD	
<input type="checkbox"/> FULLY QUALIFIED <input type="checkbox"/> NOT FULLY QUALIFIED FOR DUTY IN THE ABOVE GRADE AND POSITION		
FOR EMPLOYED EMPLOYEE ONLY		
<input type="checkbox"/> FULLY QUALIFIED FOR DUTY IN THE ABOVE GRADE AND POSITION		

PHYSICAL QUALIFICATION RECORD

NAME LOGAN, James W.	NATURE OF ACTION Transfer Funds
TITLE OF POSITION Intelligence Officer	GRADE GS-10
DEPARTMENT OR FIELD Field	

Subject was found physically ☒ fit ☐ unfit for duty with this organization in the above grade and position.

RECOMMENDATIONS:

Done 1.31.50

Paul V. Haugland

DATE

SIGNATURE OF PHYSICAL REQUIREMENTS OFFICER

OSS Form 11800
(Rev. 5/12/43)

OFFICE OF STRATEGIC SERVICES
Washington, D. C.

FD2

MAR 18 HGA

22 January 1947

Moore, James Walton

was given a physical

examination on this date and found qualified for

☒

Full Duty Overseas

☐

Limited Duty Overseas

☐

Duty in USA Only

Profile Serial (For Army RM only)

--	--	--	--	--	--

Defects Noted:

Repeat X-Ray in six months.

John R. Tietjen

JOHN R. TIETJEN, 1st. Lt. MG

SECRET
(When Filled In)

BWS

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 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 5B-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. 003820	NAME (Last-First-Middle) MOORE, J. Walton				DATE OF BIRTH 10-05-19	SD T	GRADE GS-14		
SECTION II									
EDUCATION									
HIGH SCHOOL									
LAST HIGH SCHOOL ATTENDED				ADDRESS (City, State, Country)			YEARS ATTENDED (From-To)		GRADUATE <input 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/OTR. HRS. (Specify)
				MAJOR	MINOR				
1.									
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
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE									
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION			FROM	TO	NO. OF MONTHS
1.									
2.									
SECTION III									
MARITAL STATUS									
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:									
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)									
3. DATE OF BIRTH				4. PLACE OF BIRTH (City, State, Country)					
5. OCCUPATION				6. PRESENT EMPLOYER					
7. CITIZENSHIP				8. FORMER CITIZENSHIP(S) COUNTRY(IES)				9. DATE U.S. CITIZENSHIP ACQUIRED	
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 type="checkbox"/> DELETE									
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE									

FORM 444n USE PREVIOUS EDITIONS
7-69

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

98 JUN 1979 (4-51)

SECRET

(When Filled In)

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 - CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	OTHER ASSIGNMENT
		MAY 30	2-13 FH '72				
SECTION VI: TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (RPM) 2. SHORTHAND (RPM) 3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM							
<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENO TYPE <input type="checkbox"/> OTHER SPECIFY:							
SECTION VII: SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.							
SECTION VIII: MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? 2. NEW CLASSIFICATION							
<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 <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 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. MILITARY MOBILIZATION ASSIGNMENT 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED							
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL STUDY OR SPECIALIZATION DATE COMPLETED							
<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED							
SECTION IX: PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER ADDRESS (Number, Street, City, State, Country) DATE OF MEMBERSHIP							
FROM TO							
1.							
2.							
3.							
SECTION X: REMARKS							
DATE SIGNATURE OF EMPLOYEE							
9 May 1972 J. Walton Moore							

SECRET

(WHEN FILLED IN)

Moore, J. W.

QUALIFICATIONS SYSTEM RECORD CHANGE

APPLICANT CODING DATA

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

LANGUAGE CODING DATA - FORM 444c

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

LANGUAGE PROFICIENCY TEST DATA

LANGUAGE PROFICIENCY TEST DATA													
1. ID	2. EMPLOYEE NO.	3. NAME	4. CODE	5. LANGUAGE DATA BEFORE TEST									
		3-LETTERS	C-A-D	BASE CODE	R	W	P	S	U	T	YR		
5	003824	MOO	C	BD93	0	0	8	0	0	4	69		
6. LANGUAGE DATA AFTER TEST				7. DATE OF TEST			DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 127a. LANGUAGE PROFICIENCY AND AWARDS DATA.						
BASE CODE				R	W	P	S	U	T	YR	MO	DA	YR
NOTT				L	A	N	G	H	A	GE	09	19	69

QUALIFICATIONS RECORD CHANGE

[illegible]

SECRET
(When 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 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 on your initiative.

SECTION I						BIOGRAPHIC AND POSITION DATA			
EMP. SER. NO. 003820	NAME (Last-First-Middle) MOORE, J. Walton				DATE OF BIRTH 10-05-19	SD IT			
SECTION II						EDUCATION			
HIGH SCHOOL									
LAST HIGH SCHOOL ATTENDED			ADDRESS (City, State, Country)			YEARS ATTENDED (From-To)		GRADUATE <input 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/OTR. HRS. (Specify)	
			MAJOR	MINOR					
1.									
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	
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE									
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1.									
2.									
SECTION III						MARITAL STATUS			
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:									
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)									
3. DATE OF BIRTH									
4. PLACE OF BIRTH (City, State, Country)									
5. OCCUPATION									
6. PRESENT EMPLOYER									
7. CITIZENSHIP				8. FORMER CITIZENSHIP(S) COUNTRY(IES)			9. DATE U.S. CITIZENSHIP ACQUIRED		
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 type="checkbox"/> DELETE								
2.	<input type="checkbox"/> ADD <input type="checkbox"/> DELETE								

FORM 444n USE PREVIOUS EDITIONS
10-68

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(4-91)

SECRET
(When Filled In)

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--CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
		May 10	35TH 71				

SECTION VI TYPING AND STENOGRAPHIC SKILLS	
1. TYPING (PPM)	2. SHORTHAND (PPM)
3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) 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.

SECTION VIII MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? <input type="checkbox"/> YES <input type="checkbox"/> NO	2. NEW CLASSIFICATION
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 <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 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. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)	
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION
	DATE COMPLETED
	<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS		
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP
		FROM TO
1.		
2.		
3.		

SECTION X REMARKS

DATE 30 April 1971	SIGNATURE OF EMPLOYEE J. Walton Moore
-----------------------	--

SECRET

SECRET
(When Filled In)

PLW

QUALIFICATIONS UPDATE						
READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS						
<p><i>Notes 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 on your initiative.</i></p>						
SECTION I BIOGRAPHIC AND POSITION DATA						
EMP. SER. NO.	NAME (Last-First-Middle)	DATE OF BIRTH	SD			
003820	MOORE, James Walton	10-05-19	IT			
SECTION II EDUCATION						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input 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/OTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						
<p>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.</p>						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS		
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS		
1.						
2.						
SECTION III MARITAL STATUS						
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:						
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)						
3. DATE OF BIRTH		4. PLACE OF BIRTH (City, State, Country)				
5. OCCUPATION		6. PRESENT EMPLOYER				
7. CITIZENSHIP		8. FORMER CITIZENSHIP(S) COUNTRY(IES)			9. DATE U.S. CITIZENSHIP ACQUIRED	
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 type="checkbox"/> DELETE						
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE						

FORM 444n 3 USE PREVIOUS EDITIONS
10-68

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

717-47 (4-81)

(3)

SECRET
(When Filled In)

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--CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
1.							
2.							

SECTION VI: TYPING AND STENOGRAPHIC SKILLS				
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) 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	

SECTION VIII: MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION
<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 <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 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. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)	
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION
DATE COMPLETED	

SECTION IX: PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS		
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP
		FROM TO
1.		
2.		
3.		

SECTION X: REMARKS	

DATE 5 June 1970	SIGNATURE OF EMPLOYEE <i>J. Walton Moore</i> J. Walton Moore
---------------------	--

SECRET

14

SECRET
(When 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 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 5K-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. 003820	NAME (Last-First-Middle) MOORE, James Walton	DATE OF BIRTH 5 Oct 1919	SD IT
-------------------------	---	-----------------------------	----------

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input 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/OTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
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

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:

2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)

3. DATE OF BIRTH

4. PLACE OF BIRTH (City, State, Country)

5. OCCUPATION

6. PRESENT EMPLOYER

7. CITIZENSHIP

8. FORMER CITIZENSHIP(S) COUNTRY(IES)

9. DATE U.S. CITIZENSHIP ACQUIRED

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 type="checkbox"/> DELETE				
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				

FORM 444n USE PREVIOUS EDITIONS
10-68

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification70 MAY 1975 (4-51)
(2)

SECRET

(When Filled In)

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--CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	BOOK ASSIGNMENT
			JAN 27 3 22 PM '70				

SECTION VI TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (PPM)	2. SHORTHAND (PPM)	3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) APPROPRIATE ITEM	
		<input type="checkbox"/> SHEDD <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	

SECTION VIII MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION
<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 <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 OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY	<input type="checkbox"/> REAL RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED
5. MILITARY MOBILIZATION ASSIGNMENT	6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)	
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION
	DATE COMPLETED
	<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS		
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP
		FROM TO

SECTION X REMARKS	
DATE	SIGNATURE OF EMPLOYEE
12 January 1970	James Walton Moore

SECRET

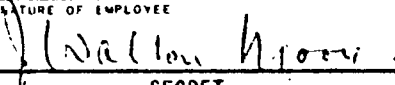
SECRET
(When Filled In)

llc

QUALIFICATIONS UPDATE							
READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS							
<p><i>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 SE-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.</i></p>							
SECTION I BIOGRAPHIC AND POSITION DATA							
EMP. SER. NO.	NAME (Last-First-Middle)					DATE OF BIRTH	
003820	MOORE, James Walton					10/05/19	
SECTION II EDUCATION							
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED			ADDRESS (City, State, Country)		YEARS ATTENDED (From-To)		GRADUATE <input 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
				MAJOR MINOR		YEAR RECEIVED	NO. SEM/CTR. HRS. (Specify)
1.							
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
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
SECTION III MARITAL STATUS							
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:							
2. NAME OF SPOUSE (Last) (First) (Middle) (maiden)							
3. DATE OF BIRTH				4. PLACE OF BIRTH (City, State, Country)			
5. OCCUPATION				6. PRESENT EMPLOYER			
7. CITIZENSHIP				8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	
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	12 Sep 44 San Francisco, Calif.		US	5145 Paxton Ln., Dallas	
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE							

SECRET

(When Filled In)

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--CHECK ONE			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
1.			Nov 12 1 37 PM '68				
2.							
SECTION VI TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (RPM)	2. SHORTHAND (RPM)	3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) APPROPRIATE ITEM					
		<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOGRAPHY <input type="checkbox"/> OTHER SPECIFY:					
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<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"/> NAVY		<input type="checkbox"/> MARINE CORPS <input type="checkbox"/> AIR FORCE		<input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <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			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> ALTERNATE <input type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
MILITARY SCHOOLS COMPLETED (Patented Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED		<input type="checkbox"/> RESIDENT <input type="checkbox"/> AGENCY-SPONSORED	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
						FROM TO	
1.							
2.							
3.							
SECTION X REMARKS							
DATE		SIGNATURE OF EMPLOYEE					
4 November 1968							

SECRET

SECRET

When Filled In

OFFICIAL USE ONLY (Do not fill in)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

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

SECTION I					BIOGRAPHIC AND POSITION DATA	
1. EMP. SER. NO.	2. NAME (Last First Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE GRADE STEP		
083820	MOORE, J. WALTON		10/05/19	GS-14-06		
6. SO	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country, City)			
IT	IO-CONTACT	DCS	TEXAS, USA			

SECTION II				AGENCY OVERSEAS SERVICE	
AREA	TYPE TOUR	FROM	TO		
CHINA	PCS 82	37/09/18	48/04/81		
INDIA	PCS 82	48/04/01	49/08/81		

OVERSEAS DATA

COPIED

DATE: 25 MAY 67 **INITIALS:** [Signature]

SECTION III				EDUCATION	
DEGREE	MAJOR FIELD	COLLEGE	YEAR		
BACH	POLITICAL SCIENCE (GOVERNMENT), GENERAL	HARDIN-SIMMONS UNIV TEX	40		

SECRET

67 OCT ENTD (451)

GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL

SECTION V

TYPING AND STENOGRAPHIC SKILLS

SECTION VI SPECIAL QUALIFICATIONS

SECTION VI

SPECIAL QUALIFICATIONS

3.

3.

When Filled In?

[illegible]

Standard Form 107-1 (Rev. 1-1-43)
U. S. CIVIL SERVICE COMMISSION

APPLICATION FOR FEDERAL EMPLOYMENT

Form approved
Budget Bureau No. 50-2046

INSTRUCTIONS: Answer every question fully and completely. If you are applying for a job, you must also indicate the examination and appointment system you desire. If you are applying for a job, you must also indicate the examination and appointment system you desire. If you are applying for a job, you must also indicate the examination and appointment system you desire. If you are applying for a job, you must also indicate the examination and appointment system you desire.

1. Name of examination or kind of position applied for.

2. Occupational field of work used in examination announcement.

3. Name of examination and of job for which you are applying.

4. Age, (show year, month, and day) **XXI James Walton Moore**

5. Street and number, R. F. D. number, City or post office, County, State, and Zip.

807 Ross Avenue, Abilene, Texas
Abilene, Texas

6. Local or voting residence in State. Office phone No. Home phone No.

Texas **6088**

7. If a local residence, State of town, county, and country.

Hartsell, Texas

8. Date of birth, year, month, and day. 10. Age last birthday. 11. ☒ Male ☐ Female

8 Oct. 1919 **27**

12. ☒ Married ☐ Single. 13. Height without shoes. Weight.

6 feet **200** pounds

14. Have you ever been employed by the Federal Government? ☒ Yes ☐ No

If now employed by the Federal Government, give present grade and date of last change of grade.

CAF-12, April 1944

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

☐ Answer ☐ Material ☐ Interview

☐ Summary ☐ Remarks

Notations: Age: **XXI**

Attention:

OPTION	GRADE	EARNED EATING	FEEDING	ANIMAL EATING
		<input type="checkbox"/> 5 cents (per day)		
		<input type="checkbox"/> 10 cents		
		<input type="checkbox"/> 15 cents		
		<input type="checkbox"/> 20 cents		
		<input type="checkbox"/> 25 cents		
		<input type="checkbox"/> 30 cents		
		<input type="checkbox"/> 35 cents		
		<input type="checkbox"/> 40 cents		
		<input type="checkbox"/> 45 cents		
		<input type="checkbox"/> 50 cents		
		<input type="checkbox"/> 55 cents		
		<input type="checkbox"/> 60 cents		
		<input type="checkbox"/> 65 cents		
		<input type="checkbox"/> 70 cents		
		<input type="checkbox"/> 75 cents		
		<input type="checkbox"/> 80 cents		
		<input type="checkbox"/> 85 cents		
		<input type="checkbox"/> 90 cents		
		<input type="checkbox"/> 95 cents		
		<input type="checkbox"/> 1.00		
		<input type="checkbox"/> 1.05		
		<input type="checkbox"/> 1.10		
		<input type="checkbox"/> 1.15		
		<input type="checkbox"/> 1.20		
		<input type="checkbox"/> 1.25		
		<input type="checkbox"/> 1.30		
		<input type="checkbox"/> 1.35		
		<input type="checkbox"/> 1.40		
		<input type="checkbox"/> 1.45		
		<input type="checkbox"/> 1.50		
		<input type="checkbox"/> 1.55		
		<input type="checkbox"/> 1.60		
		<input type="checkbox"/> 1.65		
		<input type="checkbox"/> 1.70		
		<input type="checkbox"/> 1.75		
		<input type="checkbox"/> 1.80		
		<input type="checkbox"/> 1.85		
		<input type="checkbox"/> 1.90		
		<input type="checkbox"/> 1.95		
		<input type="checkbox"/> 2.00		
		<input type="checkbox"/> 2.05		
		<input type="checkbox"/> 2.10		
		<input type="checkbox"/> 2.15		
		<input type="checkbox"/> 2.20		
		<input type="checkbox"/> 2.25		
		<input type="checkbox"/> 2.30		
		<input type="checkbox"/> 2.35		
		<input type="checkbox"/> 2.40		
		<input type="checkbox"/> 2.45		
		<input type="checkbox"/> 2.50		
		<input type="checkbox"/> 2.55		
		<input type="checkbox"/> 2.60		
		<input type="checkbox"/> 2.65		
		<input type="checkbox"/> 2.70		
		<input type="checkbox"/> 2.75		
		<input type="checkbox"/> 2.80		
		<input type="checkbox"/> 2.85		
		<input type="checkbox"/> 2.90		
		<input type="checkbox"/> 2.95		
		<input type="checkbox"/> 3.00		
		<input type="checkbox"/> 3.05		
		<input type="checkbox"/> 3.10		
		<input type="checkbox"/> 3.15		
		<input type="checkbox"/> 3.20		
		<input type="checkbox"/> 3.25		
		<input type="checkbox"/> 3.30		
		<input type="checkbox"/> 3.35		
		<input type="checkbox"/> 3.40		
		<input type="checkbox"/> 3.45		
		<input type="checkbox"/> 3.50		
		<input type="checkbox"/> 3.55		
		<input type="checkbox"/> 3.60		
		<input type="checkbox"/> 3.65		
		<input type="checkbox"/> 3.70		
		<input type="checkbox"/> 3.75		
		<input type="checkbox"/> 3.80		
		<input type="checkbox"/> 3.85		
		<input type="checkbox"/> 3.90		
		<input type="checkbox"/> 3.95		
		<input type="checkbox"/> 4.00		
		<input type="checkbox"/> 4.05		
		<input type="checkbox"/> 4.10		
		<input type="checkbox"/> 4.15		
		<input type="checkbox"/> 4.20		
		<input type="checkbox"/> 4.25		
		<input type="checkbox"/> 4.30		
		<input type="checkbox"/> 4.35		
		<input type="checkbox"/> 4.40		
		<input type="checkbox"/> 4.45		
		<input type="checkbox"/> 4.50		
		<input type="checkbox"/> 4.55		
		<input type="checkbox"/> 4.60		
		<input type="checkbox"/> 4.65		
		<input type="checkbox"/> 4.70		
		<input type="checkbox"/> 4.75		
		<input type="checkbox"/> 4.80		
		<input type="checkbox"/> 4.85		
		<input type="checkbox"/> 4.90		
		<input type="checkbox"/> 4.95		
		<input type="checkbox"/> 5.00		
		<input type="checkbox"/> 5.05		
		<input type="checkbox"/> 5.10		
		<input type="checkbox"/> 5.15		
		<input type="checkbox"/> 5.20		
		<input type="checkbox"/> 5.25		
		<input type="checkbox"/> 5.30		
		<input type="checkbox"/> 5.35		
		<input type="checkbox"/> 5.40		
		<input type="checkbox"/> 5.45		
		<input type="checkbox"/> 5.50		
		<input type="checkbox"/> 5.55		
		<input type="checkbox"/> 5.60		
		<input type="checkbox"/> 5.65		
		<input type="checkbox"/> 5.70		
		<input type="checkbox"/> 5.75		
		<input type="checkbox"/> 5.80		
		<input type="checkbox"/> 5.85		
		<input type="checkbox"/> 5.90		
		<input type="checkbox"/> 5.95		
		<input type="checkbox"/> 6.00		
		<input type="checkbox"/> 6.05		
		<input type="checkbox"/> 6.10		
		<input type="checkbox"/> 6.15		
		<input type="checkbox"/> 6.20		
		<input type="checkbox"/> 6.25		
		<input type="checkbox"/> 6.30		
		<input type="checkbox"/> 6.35		
		<input type="checkbox"/> 6.40		
		<input type="checkbox"/> 6.45		
		<input type="checkbox"/> 6.50		
		<input type="checkbox"/> 6.55		
		<input type="checkbox"/> 6.60		
		<input type="checkbox"/> 6.65		
		<input type="checkbox"/> 6.70		
		<input type="checkbox"/> 6.75		
		<input type="checkbox"/> 6.80		
		<input type="checkbox"/> 6.85		
		<input type="checkbox"/> 6.90		
		<input type="checkbox"/> 6.95		
		<input type="checkbox"/> 7.00		
		<input type="checkbox"/> 7.05		
		<input type="checkbox"/> 7.10		
		<input type="checkbox"/> 7.15		
		<input type="checkbox"/> 7.20		
		<input type="checkbox"/> 7.25		
		<input type="checkbox"/> 7.30		
		<input type="checkbox"/> 7.35		
		<input type="checkbox"/> 7.40		
		<input type="checkbox"/> 7.45		
		<input type="checkbox"/> 7.50		
		<input type="checkbox"/> 7.55		
		<input type="checkbox"/> 7.60		
		<input type="checkbox"/> 7.65		
		<input type="checkbox"/> 7.70		
		<input type="checkbox"/> 7.75		
		<input type="checkbox"/> 7.80		
		<input type="checkbox"/> 7.85		
		<input type="checkbox"/> 7.90		
		<input type="checkbox"/> 7.95		
		<input type="checkbox"/> 8.00		
		<input type="checkbox"/> 8.05		
		<input type="checkbox"/> 8.10		
		<input type="checkbox"/> 8.15		
		<input type="checkbox"/> 8.20		
		<input type="checkbox"/> 8.25		
		<input type="checkbox"/> 8.30		
		<input type="checkbox"/> 8.35		
		<input type="checkbox"/> 8.40		
		<input type="checkbox"/> 8.45		
		<input type="checkbox"/> 8.50		
		<input type="checkbox"/> 8.55		
		<input type="checkbox"/> 8.60		
		<input type="checkbox"/> 8.65		
		<input type="checkbox"/> 8.70		
		<input type="checkbox"/> 8.75		
		<input type="checkbox"/> 8.80		
		<input type="checkbox"/> 8.85		
		<input type="checkbox"/> 8.90		
		<input type="checkbox"/> 8.95		
		<input type="checkbox"/> 9.00		
		<input type="checkbox"/> 9.05		
		<input type="checkbox"/> 9.10		
		<input type="checkbox"/> 9.15		
		<input type="checkbox"/> 9.20		
		<input type="checkbox"/> 9.25		
		<input type="checkbox"/> 9.30		
		<input type="checkbox"/> 9.35		
		<input type="checkbox"/> 9.40		
		<input type="checkbox"/> 9.45		
		<input type="checkbox"/> 9.50		
		<input type="checkbox"/> 9.55		
		<input type="checkbox"/> 9.60		
		<input type="checkbox"/> 9.65		
		<input type="checkbox"/> 9.70		
		<input type="checkbox"/> 9.75		
		<input type="checkbox"/> 9.80		
		<input type="checkbox"/> 9.85		
		<input type="checkbox"/> 9.90		
		<input type="checkbox"/> 9.95		
		<input type="checkbox"/> 10.00		
		<input type="checkbox"/> 10.05		
		<input type="checkbox"/> 10.10		
		<input type="checkbox"/> 10.15		
		<input type="checkbox"/> 10.20		
		<input type="checkbox"/> 10.25		
		<input type="checkbox"/> 10.30		
		<input type="checkbox"/> 10.35		
		<input type="checkbox"/> 10.40		
		<input type="checkbox"/> 10.45		
		<input type="checkbox"/> 10.50		
		<input type="checkbox"/> 10.55		
		<input type="checkbox"/> 10.60		
		<input type="checkbox"/> 10.65		
		<input type="checkbox"/> 10.70		
		<input type="checkbox"/> 10.75		
		<input type="checkbox"/> 10.80		
		<input type="checkbox"/> 10.85		
		<input type="checkbox"/> 10.90		
		<input type="checkbox"/> 10.95		
		<input type="checkbox"/> 11.00		
		<input type="checkbox"/> 11.05		
		<input type="checkbox"/> 11.10		
		<input type="checkbox"/> 11.15		
		<input type="checkbox"/> 11.20		
		<input type="checkbox"/> 11.25		
		<input type="checkbox"/> 11.30		
		<input type="checkbox"/> 11.35		
		<input type="checkbox"/> 11.40		
		<input type="checkbox"/> 11.45		
		<input type="checkbox"/> 11.50		
		<input type="checkbox"/> 11.55		
		<input type="checkbox"/> 11.60		
		<input type="checkbox"/> 11.65		
		<input type="checkbox"/> 11.70		
		<input type="checkbox"/> 11.75		
		<input type="checkbox"/> 11.80		
		<input type="checkbox"/> 11.85		
		<input type="checkbox"/> 11.90		
		<input type="checkbox"/> 11.95		
		<input type="checkbox"/> 12.00		
		<input type="checkbox"/> 12.05		
		<input type="checkbox"/> 12.10		
		<input type="checkbox"/> 12.15		
		<input type="checkbox"/> 12.20		
		<input type="checkbox"/> 12.25		
		<input type="checkbox"/> 12.30		
		<input type="checkbox"/> 12.35		
		<input type="checkbox"/> 12.40		
		<input type="checkbox"/> 12.45		
		<input type="checkbox"/> 12.50		
		<input type="checkbox"/> 12.55		
		<input type="checkbox"/> 12.60		
		<input type="checkbox"/> 12.65		
		<input type="checkbox"/> 12.70		
		<input type="checkbox"/> 12.75		
		<input type="checkbox"/> 12.80		
		<input type="checkbox"/> 12.85		
		<input type="checkbox"/> 12.90		
		<input type="checkbox"/> 12.95		
		<input type="checkbox"/> 13.00		
		<input type="checkbox"/> 13.05		
		<input type="checkbox"/> 13.10		
		<input type="checkbox"/> 13.15		
		<input type="checkbox"/> 13.20		

16 CONTINUED

<p> Date of employment (Month, year): Jan. 12, 1942 To: Jan. 1, '45 Place of employment (city and State): Washington, D. C. Name and address of employer (firm, organization, or person): FBI, Dept. of Justice Kind of business or organization (e.g., wholesale mkt., insurance agency, city of locks, etc.): Federal Government Number and kind of employees supervised by you: Name and title of immediate supervisor: H. J. L. Pieper, San Francisco Reason for leaving: Enter military service </p>	<p> Exact title of your position: Special Agent Salary or method of payment: \$2300 per yr. Description of your work: Investigation of violations of Federal laws coming under the jurisdiction of the Department of Justice. </p>
<p> Date of employment (Month, year): Apr. 8, 1940 To: Jan. 12, '42 Place of employment (city and State): Washington, D.C. Name and address of employer (firm, organization, or person): FBI, Department of Justice Kind of business or organization (e.g., wholesale mkt., insurance agency, city of locks, etc.): Federal Government Number and kind of employees supervised by you: Name and title of immediate supervisor: Reason for leaving: Acceptance of position of Special Agent </p>	<p> Exact title of your position: Special Straggler Searcher Salary or method of payment: \$1400 per yr. Description of your work: </p>
<p> Date of employment (Month, year): To: Place of employment (city and State): Name and address of employer (firm, organization, or person): Kind of business or organization (e.g., wholesale mkt., insurance agency, city of locks, etc.): Number and kind of employees supervised by you: Name and title of immediate supervisor: Reason for leaving: </p>	<p> Exact title of your position: Salary or method of payment: Starting \$ per Final \$ per Description of your work: </p>
<p> Date of employment (Month, year): To: Place of employment (city and State): Name and address of employer (firm, organization, or person): Kind of business or organization (e.g., wholesale mkt., insurance agency, city of locks, etc.): Number and kind of employees supervised by you: Name and title of immediate supervisor: Reason for leaving: </p>	<p> Exact title of your position: Salary or method of payment: Starting \$ per Final \$ per Description of your work: </p>

[illegible]

<p>(a) First Special Service School attended:</p> <p>Location: <u>China</u></p> <p>Dates attended (month, year):</p> <p>From: <u>Jan 6, 1948</u> To: <u>Aug. 28, '48</u></p> <p>Rating received at end of this training:</p> <p>(c) Duty assignment or rating after this training (give all important changes in duty assignment, location or rate you attended a Service School):</p> <p>Dates of duty assignment (month, year):</p> <p>From: <u>T</u> To: <u></u></p> <p>(e) Second Special Service School attended:</p> <p>Location: <u></u></p> <p>Dates attended (month, year):</p> <p>From: <u></u> To: <u></u></p> <p>Rating received at end of this training:</p> <p>(g) Duty assignment after this training:</p> <p>Dates of duty assignment (month, year):</p> <p>From: <u></u> To: <u></u></p> <p>List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.</p>	<p>(b) What were you taught in First Special Service School?</p> <p>Intelligence Officer, OSS</p> <p>Ensign, USNR, 448048</p> <p>(d) What did you do during this duty assignment?</p>																																																
<p>16. EDUCATION (Circle highest grade completed)</p> <p>1 2 3 4 5 6 7 8 9 10 11 12 <u>(12)</u></p> <p>Mark (a) the appropriate box to indicate satisfactory completion of:</p> <p><input type="checkbox"/> Elementary School <input type="checkbox"/> Junior High School <input checked="" type="checkbox"/> Senior High School</p> <p>(c) Name and Location of College or University: <u>Hardin-Simmons College, Texas</u> Major: <u>Pol. Sci.</u></p> <p>(d) List Your Chief Undergraduate College Subjects: <u>1 yr. Graduate Work - George Washington Univ., Wash., D.C.</u></p>	<p>(f) What were you taught in Second Special Service School?</p> <p>(h) What did you do during this duty assignment?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Dates Attended</th> <th colspan="2">Years Completed</th> <th colspan="2">Degrees Conferred</th> <th rowspan="2">Semester Hours Credit</th> </tr> <tr> <th>From</th> <th>To</th> <th>Day</th> <th>Night</th> <th>Title</th> <th>Date</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td>BA</td> <td></td> <td></td> </tr> </tbody> </table> <p>(i) Subjects studied in high school which apply to position desired:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Subjects Studied</th> <th colspan="2">Dates Attended</th> <th colspan="2">Years Completed</th> </tr> <tr> <th>From</th> <th>To</th> <th>Day</th> <th>Night</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>(j) List Your Chief Graduate College Subjects:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Subjects Studied</th> <th colspan="2">Dates Attended</th> <th colspan="2">Years Completed</th> </tr> <tr> <th>From</th> <th>To</th> <th>Day</th> <th>Night</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit	From	To	Day	Night	Title	Date					BA			Subjects Studied	Dates Attended		Years Completed		From	To	Day	Night						Subjects Studied	Dates Attended		Years Completed		From	To	Day	Night					
Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit																																											
From	To	Day	Night	Title	Date																																												
				BA																																													
Subjects Studied	Dates Attended		Years Completed																																														
	From	To	Day	Night																																													
Subjects Studied	Dates Attended		Years Completed																																														
	From	To	Day	Night																																													
<p>17. Indicate your knowledge of foreign languages:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Language</th> <th colspan="2">Reading</th> <th colspan="2">Speaking</th> <th colspan="2">Understanding</th> </tr> <tr> <th>Good</th> <th>Fair</th> <th>Good</th> <th>Fair</th> <th>Good</th> <th>Fair</th> </tr> </thead> <tbody> <tr> <td>Chinese</td> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>(a) How was your knowledge of foreign languages obtained?</p> <p>travelled in China</p> <p>(b) If you have traveled or resided in any foreign countries, indicate:</p> <p>(1) names of countries, (2) dates and length of time spent there and (3) reason for purpose (e.g., business, education, recreation):</p> <p>Europe</p> <p>(c) List any awards, titles, honors and medals and equipment you can use such as operation of aircraft, radio, flashlight, compass, etc. (any punch, turret, etc. awarded or professional service):</p>	Language	Reading		Speaking		Understanding		Good	Fair	Good	Fair	Good	Fair	Chinese			<input checked="" type="checkbox"/>				<p>(k) 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.)?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Give kind of license and State:</p> <p>First license or certificate (year):</p> <p>Last: _____</p> <p>(l) Give any special qualifications not covered elsewhere in your application such as:</p> <p>(a) your more important publications (do NOT list if copies unless requested)</p> <p>(b) your patents or inventions</p> <p>(c) patent speaking and public relations experience</p> <p>(d) membership in professional or academic societies, etc.</p>																												
Language		Reading		Speaking		Understanding																																											
	Good	Fair	Good	Fair	Good	Fair																																											
Chinese			<input checked="" type="checkbox"/>																																														

23. REFERENCES - List three persons living in the United States or Territories of the United States who are NOT related to you or who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Part 16 (SEE ITEM 16).		
FULL NAME	BUSINESS OR HOME ADDRESS (Give complete address including street and number)	BUSINESS OR OCCUPATION
Buford Ellis	Farmers & Merchants National Bank. Abilene, Texas	Bank Pres.
Dr. H. A. Richardson	President of Hardin Simmons Univ.	Pres. of Univ.
Mrs. J. H. Robnett	1738 Q St., Wash., D.C.	
24. May inquiry be made of your present employer regarding your character, qualifications, etc.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Indicate "Yes" or "No" answer by placing X in proper column		
25. Are you a citizen of the United States?	X	26. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? If your answer is "Yes" give complete details in Item 28
27. Within the past 12 months have you habitually used intoxicating beverages to excess?	X	28. Have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any position? If your answer is "Yes" give in Item 28 the name and address of employer, date, and reason in each case
29. Since your 18th birthday have you ever been sentenced or fined, or imprisoned, or placed on probation, or have you ever been ordered to detain bail, for the violation of any law, police regulation or ordinance (including minor traffic violations for which a fine of \$25 or less is imposed)? If your answer is "Yes" list all such cases under Item 30 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the Court, (4) the penalty imposed, if any, or other disposition of the case. If appended your fingerprints will be taken	X	30. Do you receive an annuity from the U. S. or D. C. Government under any retirement act for any pension or other compensation for military or naval service? If your answer is "Yes" give in Item 30 section for retirement that is age optional, disability or by reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act, and stating if retired from military or naval service
31. Are you an official or employee of any State, Territory, county, or municipality? If your answer is "Yes" give details in Item 34	X	32. Does the U. S. Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 6 months? If your answer is "Yes" show in Item 34 Section EACH such relative (1) full name, (2) present address, (3) relationship, (4) department or agency by whom employed, and (5) kind of appointment
33. Have you ever had a nervous breakdown? If your answer is "Yes" give complete details in Item 34	X	34. Have you ever had tuberculosis? If your answer is "Yes" give complete details in Item 34
35. Space for detailed answers to other questions indicated item numbers to which answers apply.		
ITEM No.	ITEM No.	
If more space is required, use pages the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.		
FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW (U. S. CODE, TITLE 18, SECTION 90). I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.		
Date 19 Oct. 1946		
Signature of applicant /s/ J. Walter Moore		
(Sign your name in INK, and print name in full below. If name is printed, please write "True" and initial marital name, if married.)		

Return to

SECRET

(When Filled In)

DEC

103920		PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE 8 January 1957	
1664 Curie					
<p><i>This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.</i></p>					
SECTION I GENERAL					
1. FULL NAME (Last-First-Middle) MOORE, James Walton					
2. CURRENT ADDRESS (No., Street, City, Zone, State) 5145 Rexton Lane, Dallas, Texas				3. PERMANENT ADDRESS (No., Street, City, Zone, State) Same	
4. HOME TELEPHONE NUMBER EMerson-1-0749		5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE USA			
SECTION II PERSON TO BE NOTIFIED IN CASE OF EMERGENCY					
1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S. Moore, Patricia Ansley				2. RELATIONSHIP Wife	
3. HOME ADDRESS (No., Street, City, Zone, State, Country) 5145 Rexton Lane, Dallas, Texas, USA					
4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country)- INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE NA					
5. HOME TELEPHONE NUMBER EMerson-1-0749		6. BUSINESS TELEPHONE NUMBER NA		7. BUSINESS TELEPHONE EXTENSION NA	
8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE. Mrs. M. F. Moore, 711 So. 5th St., Waco, Texas					
SECTION III MARITAL STATUS					
1. CHECK (X) ONE: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED					
2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS NA					
WIFE OR HUSBAND: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancé.					
3. NAME (First) (Middle) (Maiden) (Last) Alice Patricia Ansley Moore					
4. DATE OF MARRIAGE 12 April 1941		5. PLACE OF MARRIAGE (City, State, Country) Washington, D. C.			
6. HIS (or her) ADDRESS BEFORE MARRIAGE (No., Street, City, State, Country) 857 Ross Ave., Abilene, Texas					
7. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		8. DATE OF DEATH NA		9. CAUSE OF DEATH NA	
10. CURRENT ADDRESS (Give last address, if deceased) 5145 Rexton Lane, Dallas, Texas					
11. DATE OF BIRTH 28 Nov 1919		12. PLACE OF BIRTH (City, State, Country) Houston, Texas			
13. IF BORN OUTSIDE U.S.-DATE OF ENTRY NA		14. PLACE OF ENTRY NA			
15. CITIZENSHIP (Country) USA		16. DATE ACQUIRED NA		17. WHERE ACQUIRED (City, State, Country) NA	
18. OCCUPATION Housewife		19. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers) NA			
20. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country) NA					
SECTION III CONTINUED TO PAGE 2					

SECRET

(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE (From - To) BY MONTH AND YEAR NA	
22. BRANCH OF SERVICE NA	23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED NA
24. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN NA	

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
	NA		
2	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
	NA		
3	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
	NA		
4	1. FULL NAME (Last-First-Middle) NA	2. RELATIONSHIP	3. AGE
	4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
	5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
	NA		
5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES NA			

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
2. IF YOUR ANSWER IS "NO" TO THE ABOVE, STATE SOURCES OF OTHER INCOME NA			
3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS			
NAME OF INSTITUTION		ADDRESS (City, State, Country)	
Republic National Bank		Dallas, Texas	

SECTION V CONTINUED TO PAGE 3

SECRET

SECRET
(When Filled In)

SECTION V CONTINUED FROM PAGE 2										
4. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY?					YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
5. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)										
NA										
6. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										
7. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS										
NA										
8. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YOU HAVE ANSWERED "YES", GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.										
SECTION VI CITIZENSHIP										
1. PRESENT CITIZENSHIP (Country)					2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE:					
USA					<input checked="" type="checkbox"/> BIRTH <input type="checkbox"/> MARRIAGE <input type="checkbox"/> OTHER (Specify):					
3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					4. GIVE PARTICULARS					
					NA					
5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (First papers, etc.)										
NA										
SECTION VII EDUCATION										
1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED										
LESS THAN HIGH SCHOOL GRADUATE					OVER TWO YEARS OF COLLEGE - NO DEGREE					
HIGH SCHOOL GRADUATE					<input checked="" type="checkbox"/> BACHELOR'S DEGREE					
TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE					<input checked="" type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE					
TWO YEARS COLLEGE OR LESS					MASTER'S DEGREE DOCTOR'S DEGREE					
2. COLLEGE OR UNIVERSITY STUDY										
NAME AND LOCATION OF COLLEGE OR UNIVERSITY				SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/OTR. HOURS SPECIFY
				MAJOR	MINOR	FROM	TO			
Hardin Simmons University, Abilene, Tex.				Political		1936	1940	BA	Feb 40	
(night school)				Science Eng.						
George Washington Univ., Wash. D. C.				Law		1940	1941			20
3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS										
NAME OF SCHOOL			STUDY OR SPECIALIZATION			DATES ATTENDED		TOTAL MONTHS		
						FROM	TO			
Quantico, Virginia						Jan 1942	Apr 1943	3 mos.		
FBI. Special Agent School			--							
4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)										
NAME OF SCHOOL			STUDY OR SPECIALIZATION			DATES ATTENDED		TOTAL MONTHS		
						FROM	TO			
California										
OSS School at Catalina Island			Intelligence			Jan 45	Apr 45	3 mos.		
5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE										
NA										

SECRET
3

SECRET

(When Filled In)

SECTION VIII FOREIGN LANGUAGE ABILITIES														
LANGUAGE <small>(List below each language in which you possess any degree of competence. Indicate your proficiency to read, write or speak by placing a check (X) in the appropriate boxes)</small>	COMPETENCE - IN ORDER LISTED													
	EQUIVALENT TO NATIVE FLUENCY		FLUENT BUT OBVIOUSLY FOREIGN		ADEQUATE FOR RESEARCH		ADEQUATE FOR TRAVEL		LIMITED KNOWLEDGE		NATIVE TO COUNTRY	PROLONGED RESIDENCE	CONTACT (WITH PARENTS ETC.)	ACADEMIC STUDY (ALL LEVELS)
	R	W	S	R	W	S	R	W	S	R				
Mandarin Chinese										X			X	
French										X	X	X		X
2. IF YOU HAVE CHECKED "ACADEMIC STUDY" UNDER "HOW ACQUIRED", INDICATE LENGTH AND INTENSIVENESS OF STUDY Two year high school One year college														
3. DESCRIBE YOUR ABILITY TO DO SPECIALIZED LANGUAGE WORK INVOLVING VOCABULARIES AND TERMINOLOGY ON THE SCIENTIFIC, ENGINEERING, TELECOMMUNICATIONS, MILITARY OR ANY OTHER SPECIALIZED FIELD NA														
SECTION IX GEOGRAPHIC AREA KNOWLEDGE														
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE KNOWLEDGE GAINED AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR WORK ASSIGNMENT. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE", INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, COASTS, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.														
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY											
			RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT								
Shantung Province North China	General Knowledge	1920 - 1936 1945 - 1947	X			X								
Calcutta, India	General Knowledge	1948 - 1950				X								
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE In China with parents - 1920-1936, with OSS 1945-1947 In India with CIA - 1948-1950														
SECTION X TYPING AND STENOGRAPHIC SKILLS														
1. TYPING (W.P.M.)	2. SHORTHAND (W.P.M.)	3. SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM												
40	NA	GREGG	SPEEDWRITING	STENOTYPE	OTHER (Specify):									
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Comptometer, Mimeo-graph, Card Punch, etc.) NA														
SECTION XI SPECIAL QUALIFICATIONS														
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH Handball - Good Tennis, Swimming, Soccer, Ping Pong - Fair														
2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK Qualified as paratrooper with OSS ✓														
3. EXCLUDING EQUIPMENT NOTED IN SECTION X, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORTWAVE RADIO, MULTILITH, TURRET LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC. NA														
4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, etc.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRY NUMBER, IF KNOWN. NA														
5. FIRST LICENSE OR CERTIFICATE (Year of Issue)			6. LATEST LICENSE OR CERTIFICATE (Year of Issue)											
NA			NA											

SECRET

SECRET
(When Filled In)

SECTION XI CONTINUED FROM PAGE 8

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

NA

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

NA

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

NA

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

NA

SECTION XII ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
Jan 1950 - April 1954	12	OO/C
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
None	Contact Specialist	
6. DESCRIPTION OF DUTIES		
Duties of a Contact Specialist		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
April 1954 - Jan 1957	13	OO/C
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
One	Contact Specialist and Resident Agent in Dallas	
6. DESCRIPTION OF DUTIES		
Duties of a C/S and RA		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
NA		
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
6. DESCRIPTION OF DUTIES		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
NA		
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
6. DESCRIPTION OF DUTIES		
1. INCLUSIVE DATES (From- and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
NA		
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	
6. DESCRIPTION OF DUTIES		

(Use additional pages if required)

SECRET

SECRET

(When Filled In)

SECTION XIII CHILDREN AND OTHER DEPENDENTS						
1. NUMBER OF CHILDREN (Including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.			4		2. NUMBER OF OTHER DEPENDENTS (Including spouse, parents, stepparents, sister, etc.) WHO DEPEND ON YOU FOR AT LEAST SOME OF THEIR SUPPORT, OR, CHILDREN OVER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.	
3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS						
NAME	RELATIONSHIP	YEAR OF BIRTH	SEX		CITIZENSHIP	ADDRESS
			M	F		
Michael Walton Moore	Son	1943	X		US	5145 Rexton Lane Dallas, Texas
Margaret Lee Moore	Daughter	1944		X	US	5145 Rexton Lane
Mary Monique Moore	Daughter	1951		X	US	5145 Rexton Lane
Deborah Dallas Moore	Daughter	1954		X	US	5145 Rexton Lane

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

Jan 1950 - Jun 1950 2600 Pemberton, Houston, Texas
Jun 1950 - Apr 1954 3502 Underwood, Houston, Texas
Apr 1954 - Jul 1954 3406 Dartmouth, Dallas, Texas
Aug 1954 - Present 5145 Rexton Lane, Dallas, Texas

DATE COMPLETED 8 January 1957

SIGNATURE OF EMPLOYEE *Michael Moore*

SECRET

PERSONAL HISTORY STATEMENT

- Instructions: 1. Answer all questions completely. If question does not apply write "not applicable." 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
Yes or No

SEC. 1. PERSONAL BACKGROUND

Telephone: _____
Office: _____
Ext. _____
Home: _____

A. FULL NAME Mr. James Walton Moore Mrs. _____
(Use No Initials) First Middle Last

PRESENT ADDRESS 2000 Pemberton Ave., Houston, Texas USA
St. & No. City State Country

PERMANENT ADDRESS 2457 Idlewild St., Abilene, Texas USA
St. & No. City State Country

B. NICKNAME Jim - Jimmie WHAT OTHER NAMES HAVE YOU USED? None

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? Not applicable.

HOW LONG? _____ IF A LEGAL CHANGE, GIVE PARTICULARS _____

C. DATE OF BIRTH 5 Oct 1919 PLACE OF BIRTH Hartwell Georgia USA
Where? City State Country

D. PRESENT CITIZENSHIP US BY BIRTH? Yes BY MARRIAGE? _____
Country

BY NATURALIZATION CERTIFICATE / _____ ISSUED _____ BY _____
Date Court

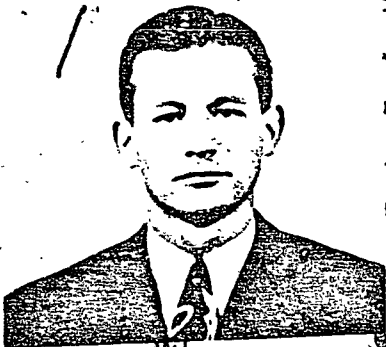
AT _____ State _____ Country _____

3 A PREVIOUS NATIONALITY? No
Yes or No Country

4 WHAT DATES? _____ TO _____ ANY OTHER NATIONALITY? _____
Country

LARS _____

IN STEPS TO CHANGE PRESENT CITIZENSHIP? No GIVE PARTICULARS: _____



APR 1948

14-00000

2. IF BORN OUTSIDE U.S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? _____

PORT OF ENTRY? _____ ON PASSPORT OF WHAT COUNTRY? _____

LAST U.S. VISA _____
Number Type Place of Issue Date of Issue

SEC. 2. PHYSICAL DESCRIPTION

AGE 30 SEX Male HEIGHT 6' WEIGHT 190 lbs.
EYES Brown HAIR Brown COMPLEXION Medium SCARS None
BUILD Average OTHER DISTINGUISHING FEATURES _____

SEC. 3. MARITAL STATUS

A. SINGLE _____ MARRIED X DIVORCED _____ WIDOWED _____

STATE DATE PLACE AND REASON FOR SEPARATION, DIVORCE OR ANNULMENT _____

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

NAME OF SPOUSE Alice First Patricia Middle Ansley Maiden Moore Last

PLACE AND DATE OF MARRIAGE Washington D. C., April 12, 1941

HIS (OR HER) ADDRESS BEFORE MARRIAGE 857 Ross Ave., Abilene, Texas
St. & No. City State Country

LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE _____

PRESENT, OR LAST, ADDRESS 2600 Pemberton Ave., Houston, Texas USA
St. & No. City State Country

DATE OF BIRTH 23 Nov 1919 PLACE OF BIRTH Houston Texas USA
City State Country

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

CITIZENSHIP cs WHEN ACQUIRED? _____ WHERE? _____
City State Country

OCCUPATION housewife LAST EMPLOYER FBI

EMPLOYER'S OR BUSINESS ADDRESS Washington D. C. USA
St. & No. City State Country

MILITARY SERVICE FROM _____ TO _____ BRANCH OF SERVICE _____
Date Date

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

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

1. NAME Michael Walton Moore RELATIONSHIP Son AGE 6
CITIZENSHIP US ADDRESS 2600 Pemberton, Houston, Texas USA
2. NAME Margaret Lee Moore RELATIONSHIP Daughter AGE 5
CITIZENSHIP US ADDRESS 2600 Pemberton, Houston, Texas USA
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
St. & No. City State Country

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

FULL NAME James Walton Moore
LIVING OR DECEASED Deceased DATE OF DECEASE Dec. 1938 CAUSE Cancer
PRESENT, OR, LAST, ADDRESS 1701 Sanderfer St., Abilene, Texas USA
DATE OF BIRTH 1909 PLACE OF BIRTH Murphy County, N. Carolina
IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY _____
CITIZENSHIP _____ WHEN ACQUIRED? _____ WHERE? _____
City State Country
OCCUPATION Missionary LAST EMPLOYER Baptist Foreign Mission Board
EMPLOYER'S OR OWN BUSINESS ADDRESS Louisville, Kentucky USA
MILITARY SERVICE FROM 1917 TO 1923 BRANCH OF SERVICE US Army
COUNTRY _____ DETAILS OF OTHER GOVT SERVICE, U.S. OR FOREIGN. _____

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

FULL NAME Ninnie Lee Moore
LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE _____
PRESENT, OR LAST, ADDRESS 711 South 5th St., Hico, Texas USA
DATE OF BIRTH 1902 PLACE OF BIRTH Holmes, Texas
CITIZENSHIP US WHEN ACQUIRED? _____ WHERE? _____
City State Country
IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY _____

OCCUPATION Hansen Co LAST EMPLOYER _____
 EMPLOYER'S OR OWN BUSINESS ADDRESS _____
 St. & No. City State Country
 MILITARY SERVICE FROM _____ TO _____ BRANCH OF SERVICE _____
 COUNTRY _____ DETAILS OF OTHER GOVT SERVICE, U.S. OR FOREIGN. _____

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

1. FULL NAME Martha Jane Hutchins AGE 32
 First Middle Last
 PRESENT ADDRESS Bonna Carroll, Illinois USA US
 City State Country Citizenship
 2. FULL NAME Julia Wilson AGE 37
 First Middle Last
 PRESENT ADDRESS Pittsburg, Penn. USA US
 City State Country Citizenship
 3. FULL NAME Betty No. Ruth Parker AGE _____
 First Middle Last
 PRESENT ADDRESS 711 3. 5th St., Waco, Texas USA US
 St. & No. City State Country Citizenship
 4. FULL NAME _____ AGE _____
 First Middle Last
 PRESENT ADDRESS _____
 St. & No. City State Country Citizenship
 5. FULL NAME _____ AGE _____
 First Middle Last
 PRESENT ADDRESS _____
 St. & No. City State Country Citizenship

SEC. 8. FATHER-IN-LAW

FULL NAME William O. Analey
 First Middle Last
 LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE _____
 PRESENT, OR LAST ADDRESS 857 Ross Ave., Abilene, Texas USA
 St. & No. City State Country
 DATE OF BIRTH 1889 PLACE OF BIRTH Houston, Texas
 IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY _____
 CITIZENSHIP _____ WHEN ACQUIRED? _____ WHERE? _____
Hoffman Electrical Supply Co. Country
~~Manager of Hoffman Electrical Supply Co.~~

SEC. 9. MOTHER-IN-LAW

FULL NAME Margaret Middle Ann Last Ansley
 LIVING OR DECEASED living DATE OF DECEASE _____ CAUSE _____
 PRESENT, OR LAST, ADDRESS 859 Ross Ave., Abilene, Texas Country USA
 DATE OF BIRTH _____ PLACE OF BIRTH San Antonio, Texas
 IF BORN OUTSIDE U.S. INDICATE DATE AND PLACE OF ENTRY _____
 CITIZENSHIP _____ WHEN ACQUIRED? _____ WHERE? _____
 City State Country
 OCCUPATION housewife LAST EMPLOYER _____

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

1. NAME Not applicable. RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 St. & No. City State Country
 2. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 St. & No. City State Country
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 St. & No. City State Country

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

1. NAME Not applicable. RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 St. & No. City State
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
 2. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 St. & No. City State
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 St. & No. City State
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____

SEC. 12. EDUCATION

ELEMENTARY SCHOOL China Inland Mission Public School Chafco, Shantung, N. China
 DATES ATTENDED 1925 - 1929 GRADUATE Yes
 HIGH SCHOOL China Inland Mission Chafco, Shantung, N. China
 DATES ATTENDED 1930 - 1936 GRADUATE Yes
 COLLEGE Simon's University Abilene, Texas USA
 DATES ATTENDED 1936 - 1939 DEGREE BA
 COLLEGE George Washington Law School Washington D. C. USA
 DATES ATTENDED 1940 - 1941 DEGREE LLM

SEC. 13. MILITARY, NAVAL OR OTHER GOV'T SERVICE — U.S. OR FOREIGN

COUNTRY USA SERVICE Navy RANK Ensign DATE OF SERVICE Jan 6, 45 to June 46
 LAST USA 1946 Honorable
 REMARKS: _____
 SELECTIVE SERVICE BOARD NUMBER _____ ADDRESS _____
 IF DEFERRED GIVE REASON _____
 INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS _____

SEC. 14. 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.

1. FROM June 1946 TO Present
 EMPLOYING FIRM OR AGENCY CIA
 ADDRESS Washington D. C. State Country USA
 KIND OF BUSINESS _____ NAME OF SUPERVISOR _____
 TITLE OF JOB _____ SALARY \$ 6800. PER month
 YOUR DUTIES _____
 REASONS FOR LEAVING _____

2. FROM Jan 6, 1945 TO June 1946
 EMPLOYING FIRM OR AGENCY US Navy

ADDRESS Washington D. C. City USA State USA

KIND OF BUSINESS _____ NAME OF SUPERVISOR _____

TITLE OF JOB _____ SALARY \$ _____ PER _____

YOUR DUTIES _____

REASONS FOR LEAVING Honorable discharge.

3. FROM Jan 1942 TO Jan 1945

EMPLOYING FIRM OR AGENCY FBI

ADDRESS Washington D. C. City USA State USA

KIND OF BUSINESS _____ NAME OF SUPERVISOR _____

TITLE OF JOB Special Agent SALARY \$ CAP-11 PER _____

YOUR DUTIES _____

REASONS FOR LEAVING _____

4. FROM April 1940 TO Jan 1942

EMPLOYING FIRM OR AGENCY FBI

ADDRESS Washington D. C. City USA State USA

KIND OF BUSINESS _____ NAME OF SUPERVISOR _____

TITLE OF JOB Special Straggler Searcher SALARY \$ CAP-4 PER _____

YOUR DUTIES _____

REASONS FOR LEAVING _____

5. FROM _____ TO _____

EMPLOYING FIRM OR AGENCY _____

ADDRESS _____ St & No. _____ City _____ State _____ Country _____

KIND OF BUSINESS _____ NAME OF SUPERVISOR _____

TITLE OF JOB _____ SALARY \$ _____ PER _____

YOUR DUTIES _____

REASONS FOR LEAVING _____