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8 January 1952

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STANDARD FORM 61 (RUSSED RUGUST 190)
PROMULGATED BY CIVE SERVICE COMMISSION
FEDERAL PERSONNEL MANUAL

APPOINTMENT AFFIDAVITS

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

..... do solemnly swear (or affirm) that-

A. OATH OF OFFICE	: :::	C + 128-man-projective	The same of the sa	~
I will support and defend the Co domestic; that I will bear true faith without any mental reservation or p duties of the office on which I am ab	n and allegiand urpose of evasion	e to the same; the	at I take this obl Il and faithfully	igation freely
B. AFFIDAVIT AS TO SUBVERSIVE ACT	VITY AND AFFI	LIATION		** · · ·
I am not a Communist or Fascisthat advocates the overthrow of the unconstitutional means or seeking by Constitution of the United States. I become a member of such organize Government.	Government of force or violen I do further sw	the United State ce to deny other car (or affirm) I	s by force or viol persons their rigl will not so advo	ence or other hts under the cate, nor will
C. AFFIDAVIT AS TO STRIKING AGAINS	THE FEDERA	L GOVERNMENT		
I am not engaged in any strike a so engage while an employee of the C an organization of Government empl of the United States, and that I will an organization.	gainst the Gove Government of ovees that asse	mment of the Un the United States arts the right to st	s; that I am not trike against the	a member of Government
D. AFFIDAVIT AS TO PURCHASE AND S	ALE OF OFFICE		•	-
I have not paid, or offered or profirm or corporation for the use of influ	mised to pay, a	ny money or other	thing of value to	any person,
E. AFFIDAVIT AS TO DECLARATION OF	APPOINTEE			
The answers given in the Decla correct.		intee on the reve	erse of this form	are true and
correct.	. 0			
17 December 1951 (Date of cutrains on duty)	C)a	nes J. C. (Signation	Tre of appointee)	<u> </u>
	_			
Subscribed and sworn before me this	17 day	or Ble	~ .	A. D. 19,
at (City)		0.00	(State)	
		201	7 7/	. /
[SEAL]	<i>(</i>)	Const	lisk	
NOTE.—If the oath is taken before a N be shown.	lotary Public th	e date of expirati	(Tide) on of his commi	ssion should

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. 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.

LIPRESENT ADDRESS (street and number,	city and State)				11:00 10		į	
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VIRGINIA P. O		.,,	E	1	RLINGTON VIRGIN	A Vis	12	3672
4 DOES THE UNITED STATES GOVERNMENT AMP THE PAST 24 MONTHS! YES PRO If so, for each such relative fill in the					OURS (EITHER BY SLOOD OR MARRIAGE) WITH WHOM		·	
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INDICATE "YES" OR "NO" ANSWER IN PROPER COLU	MN BY PLACING "A"	YES	NO	NO.	WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO W	HICH DETAILED	ANSWERS	APPLY
A ARE YOU A CITIZEN OF OR DO YOU O'ST ALLEGIA	NCK TO THE UNITED STATES!	X_				***********		
APE YOU AN OFFICIAL OR EMPLOYEE OF ANY STI	ATE, TERRITORY, COUNTY, OR							
If your answer is "Yes", give details i	in Item 10.	<u> </u>						
P. DO YOU RECEIVE ANY ANNUITY FROM THE UNICOLUMBIA GOVERNMENT UNDER ANY RETILEMOTHER COMPENSATION FOR MILITARY OR MAYAL	SERVICE?	-					·····	
If your answer is "Yes", give in Item It that is, ege, optional disability, or b	reason for retirement. by reason of voluntery	l						
retuement pay, and under what retir if retured from military or naval servi		X	L		***************************************		· · · · · · · · · · · · · · · · · · ·	
L SINCE YOU FILED APPLICATION RESULTING IN BEEN DISCHARGED, OR FORCED TO RESIGN, FO FACTORY SERVICE FROM ANY POSITION!							··········	
If your answer is "Yes", give in Item in employer, date and reason in each	0 the name and address case.		X					······································
R. HAVE YOU BEEN ARRESTED (NOT INCLUDING WHICH YOU WERE FINED 325 OR LESS, OR FORF LESS, SINCE YOU FILED APPLICATION RESULT!								······································
If your answer is "Yes", list all suc- Give in each case: (1) The date; (2) to or violation; (3) the name and location and the immored of any or other d	h cases under Item 10. he nature of the offense on of the court; (1) the hipposition of the case.		k.					······································
If appointed, your fingerprints will b	e taken.		1'					

INSTRUCTIONS TO APPOINTING OFFICER

POINTING OFFICER

(2) Ads.—If definite age limits have been established for the position, it slike determined that spointant is not outside the age range for appointment until such determination is made, the appointment may not be consummated (3) Citilenship—The appointing officer is repumble for observing citizenship provisions of (1) the Civil Service Rules and (1) appropriation a form of I constitutes an affalsivit for both purposes and is acceptable procitizeship status in the absence of conficting evidence. In absolution save appointment should not be consummated until clearance has been secured in the certifying office of the Civil Service Commission.

(4) Members of Family—Section 9 of the Civil Service Act provides a whenever there are already two or more members of a family service is member of such family in eligible for probational or permanent appointment in the compensation of member of such family in eligible for probational creations are not as the compensative service. The appointment in the compensation of the com



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5. OCCUPATION	6. PRESENT EM	PLOYER						
7. CITIZENSHIP	8. FORM	ER CITIZENSHIP	(S) COUNTRY!	(168)	9. DAT	TE U.S	. CITIZEN	SHIP ACQUIRED
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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 LWP. SER. NO. NAME (Last-First-Middle) DATE OF BIRTH GRADE O'CONNELL, J. P., Jr. 009784 19 Геб 1917 SS CS-16 SECTION 11 HIGH SCHOOL LAST HIGH SCHOOL ATTENDED ADDRESS (City, State, Country) □ · · · □ · · COLLEGE OR UNIVERSITY STUDY NO. SEM/QTR. YEARS ATTENDED DEGREE YEAR RECEIVED IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS. INDICATE THE TIFLE OF THE TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS NAME AND ADDRESS OF SCHOOL STUDY OR SPECIALIZATION FROM NO. OF MONTHS OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE NAME AND ADDRESS OF SCHOOL STUDY OR SPECIALIZATION FROM TO MARITAL STATUS 1. PRESENT STATUS (Single Warried, Widowed, Separated, Divorced, Annualled Reservied) SPECIFY: 2. NAME OF SPOUSE (Last) (First) (Middle) (Vaiden) 3. DATE OF BIRTH 4. PLACE, OF BIRTH (City, State, Country) . OCCUPATION 7. CITIZENSHIP 8. FORMER CITIZENSHIP(S) COUNTRY(1ES) 9. DATE U.S. CITIZENSHIP ACQUIRED SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE DATE AND PLACE OF BIRTH . CITIZENSHIP AUD OELETE A00 DELETE

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QUALIFICATIONS UPDATE

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

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Additionally, a qualifications update may take place at any time there is information to be added or changed simply

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QUALIFICATIONS UPDATE

TIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be emploidedly 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 444j, "Qualifications Supplement to the Personal History Statement," or a previous update form, to use in doubt whether information has been provided when the doubt when the dou you submitted your corm 444). Qualifications Supplement to the rersonal history statement. Of a precious aparter formed 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. BIOGRAPHIC AND POSITION DATA SECTION 1 DATE OF BIRTH NAME (Last-First-Widdle) 19 Feb 1917 EMP. SER. NO. O'CONNELL, James P. 009784 EDUCATION PECTION 11 HIGH SCHOOL GRADUATE YEARS ATTENDED (FIND-TO) ADDRESS (City, State, Country) □ *** □ *** LAST HIGH SCHOOL ATTENDED COLLEGE OR UNIVERSITY STUDY NO. SEM/QTR. HRS.(Specify) SUBJECT 3903d FROM - - TO - -RECEIVED RECEIVED NAME AND LOCATION OF COLLEGE OR UNIVERSITY 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 NO. OF MONTHS FROM 73 STUDY OR SPECIALIZATION NAME AND ADDRESS OF SCHOOL OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE NO. OF MONTHS 10 STUDY OR SPECIALIZATION FROM NAME AND ADDRESS OF SCHOOL HARITAL STATUS PRESENT STATUS (Single, Warried, Pidoved, Separated, Divorced, Annulled Remarried) SPECIEY: SECTION III NAME OF SPOUSE 4. PLACE OF GIRTH (City. State Country) 3. DATE OF BIRTH 4. PRESENT EMPLOYER 1. GCCUPATION 9. DATE U.S. CITIZENSHIP ACQUIRED 9. FORMER C'TIZENSHIP(S) COUNTRY(IES) 7. CITIZENSHIP DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE SECTION IV PERMANENT ADDRESS CITIZESSHIP RELATIONSHIP; DATE AND PLACE OF BIRTH A00 . DELETE ADD

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SECTION VII		MILITARY SERVICE			,
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S IF YOU ARE CURRENITY ASSIGNED TO A RESERV	E OR NATIONAL GUARD	RAINING UNIT, IDENTIFY THE	UNIT AND ITS ADDRESS		
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UUNG 1959 - JUNEGO HEAD QUARTERS 6515 SUPPORT DIVISION OPERATIONAL

ADMINISTERED ACTIVITIES FERTAINING TO THE OPERATIONAL SUPPORT TO THE CLAUPENTINE SERVICES AND OTHER HOOVEY COM PONEUTS, THIS COUSISTED OF ACCEPTING REPUREMENTS AND ANALYZING THE BEST METHODS OF IMPLEMENT ING THEM THROUGH THE 0/3 FACILITIES. SUPERVISED HEADY-ARTERS YERSONNE WHO DAVE THESE ASSIGNMENTS TO THE DOMESTIC FIELD OFFICES. THE NATURE OF REQUESTS RANGED FROM STAPLE TYPE SUPPURT SUCH AS A LETTER DRUP TO THE COMPLEX HANDHING OF A HIGH LEVEL DEFECTUR WHICH INJOLUED ESCORTS, SAFE HOUSE FACILITIES, SURVEIL ANDE ACTIVITIES ETC.

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SECTION VIII	AGENCY EMPLOYMENT HISTORY (Co	mt'd)
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SECTION XI	PROFESSIO	ONAL SOCIETIES AND OTHER O	PRGANIZATIONS		T	,
	T				·	AEMBERSHIP
NAME AND CHAPTER		ACDRESS INumber, Str	est. City State, Countr	y!	FBOM	10
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SECRET - 7 -

O CONNELL JAMES P

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SUBJECT: NOTIFICATION OF GRANTING OF OF RENOCATION OF CRYPTOGRAPHIC CLEARANCE

THE ABOVE NAMED INDIVIDUAL (ITEM I) HAS BEEN GRANTED A CRYPTOGRAPHIC CLEADANCE ICR THE CRYPTOGRAPHIC CLEARANCE HELD BY THIS INDIVIDUAL HAS BEEN REVOKED! UNDER THE PROVISIONS OF SH 90.4. THE CLEARANCE LITEM 2) OR REVOCATION (ITEM 4), IS EFFECTIVE AS OF THE MORTH AND YEAR SHOPN REDEET, SLAVEST HAS BEEN BRIFFED ON BEEN REFER CONCERNING SYPTOGRAPHIC AND BELATED COMMUNICATIONS SECURITY MATTERS AND HAS SIGNED A DRIFFING/DEBRIFFING STATEMENT, AS APPROPRIATE, ACKNOWLEDGING RESPONSIBILITY FOR THE PROTECTION OF CHYPTOGRAPHIC CLEARANCE SUBJECT IS NOT AUTHORIZED TO MAYE CONTINUED CUSTODY OF, ACCESS TO, OR OTHERWISE GAIN FURTHER KNOWLEDGE OF STAFF CONFIDORAPHIC MATERIAL OR INFORMATION.

NEAD EMPLOYEE NO LONGER REQUIRES THE CLEARANCE IN ORDER TO PERFORM HIS HER ASSIGNED DUTIES. IT IS THE REQUESTED THAT THE COMMUNICATIONS SECURITY STAFF, OC. BE NOTIFIED THAT THE CLEARANCE WAY DE REVONED.

DISTRIBUTION: "

1 - EMPLOYEE'S COMPONENT LITEM 3)

1 - OFFICE OF PERSONNEL

والمراب والمناس والمعارض والمراك والمعارض أناه المرابط والمناطر المرابط المرابط والمعارض المرابط والمعارض والمناطقة

FORM 1597b USE PREVIOUS

CONFIDENTIAL DOCTRINES

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	109734 PERSONAL	HISTORY STATEMENT	AB		
		J. WSTI	CCTIONS.		
	This form provides the means whereby			tent current. Even	though it duplicates
	This form provides the means whereby information you have furnished previo entirety. Too need complete <u>Sections</u> the organization or if you believe th	VII through XIII on	<u>ty if there has been</u>	i a change since you	entered on duty with
•	SECTION 1	GE	HERAL	····	
1	1. FULL NAME (Last-First-Widdle)	0 .			
	O'CONNELL JAMES 2. CURRENT ADDRESS (No., Seroet, City	PATRICK	UP.		
	826 WHIS FERING LA	r, Zone, Stele)	3. PERMANENT ADDRE	iss (No., Street, Ci	ty, Zone, State)
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ł	4. HOME TELEPHONE NUMBER		RY. POSSESSION OF C	OUNTRY IN PHICH YOU	NOW CLAIM RESIDENCE
Ł	CLEAREROOK 6-1891	VIRG	•		
.[SECTION 11 . P	ERSON TO BE NOTIFIED			
1	1. HAME (Last-First-Hiddle) PREFFRABL			Z. RELATIONSHIP	
ŀ	3. HOME ADDRESS (No. Street, City, 2	9		WIFE	
1		-		mil Win	- lin
ł	4. BUSINESS ADDRESS (No., Street, City	y, Zone, State, Count	TY)- INDICATE NAME (OF FLAN OR EMPLOYER.	IF APPLICABLE
L	1400	6. BUSINESS TELEP			÷ .
	5. HOME SELEPHONE NUMBER CLG - 189	6. BUSINESS TELEP	HONE NUMBER	7. BUSINESS TELEP	HONE EXTENSION
Ţ	8. IN CASE OF EMERGENCY, OTHER CLOSE A	ELATIVES (Spouse, Mo	ther, Father) MAY AL	SO DE NOTIFIED. IF	SUCH NOTIFICATION
l			-	100	111
ŀ	ANNA C. O'CONNEL	C (NOINER)	Z OLD HILLS	LANE, PORT	EDGHINGTON NO
-	1- CHECK (X) ONE:	SINGLE X MARRIED		SEPARATED DIVORC	ED ANNULLED
1	2. FURNISH DATE, PLACE AND REASON FOR				
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	IFE OR HUSBAND: If you have been mers r husband giving data below for all ps				
1	I- NAME (First)	(Widdle)	(Maiden)	(Lei	0
L	VIRGINIA	<i>P</i>	DEANE	O'Cal	WELL
ľ		MARRIAGE (City. State	1/Y		
6	. HIS (OF her) ADDRESS BEFORE MARRIAGI	E (Nop. Street, City.	Staté, Country)		
L	7. LIVING OF DATE OF	TLACE DI	POSKLYN	NY.	
L,		DEATH 9. C	NUSE OF DEATH		
_	O. CURRENT ADDRESS (Give last address,	if deceased)	· · · · · · · · · · · · · · · · · · ·		
l''	176 WHICDEDINA	ANT EA	415 041	urelt. V	'n
h	1. DATE OF BIRTH 12. PLACE OF	BIRTH (Cary, State,	Country),	201011	7-
L	18 UAN 1917 NE	N YORK	N.Y.		٧
1	3. IF BORN OUTSIDE U.S. DATE OF ENTRY	14- PLACE OF ENTRY	,		
19	S- CITIZENSHIP (COUNTRY)	16. DATE ACQUIRED	" 17. WHERE ACQUIT	PED (City, State, Co	untry)
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'	6. OCCUPATION .		(Also give former	eaployer, or if spo	- / /
١,	MOUSEWIFE	Street City State	HA	KIZY WINST	IN (1444)

FORM NO. 4444 STREETS FORM 275

SECTION 111 CONTINUED TO PAGE 2

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•	SECTION IV RELATIVES BY BLO	OD, MARRIAGE OR ADOPTI	ON LIVING ABROAD O	R WHO ARE	NOT U.S. CITIZENS	
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5.	SPECIAL REMARKS, IF ANY, CONCER	NING THESE RELATIVES		1		
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e SE	CTION Y	FINANCI	AL STATUS	 		
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		SECTION V CONT	INUED TO PAGE 3			·
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·		SECTION	V CONTII	UED FROM	PAGE 2				
4	MAVE YOU EVER BEEN IN. OR PETITION	ED FOR. BANKR	UPTCYT	. ***					
3.	IF YOUR ANSWER IS "YES" TO THE ABO	VE QUESTION,	GIVE PAR	IICULAPS.	INCLUDING	COURT AN	D DATE(S)		
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6.	DO YOU RECEIVE AN ANNUITY FROM THE	UNITED STATE		TRICT OF	COLUMBIA G	PREMERT	UNDER ANY	RETIREM	ENT ACT.
	PENSION, OR COMPENSATION FOR WILLIAM	RY OR NAVAL	SERVICET	السا	· · · · · · · · · · · · · · · · · · ·	XI			
7.	IF YOUR ANSWER IS "YES" TO THE ABOV	E GUESTION, C	IVE COM	LETE DET.	AIL S				
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8.	DO YOU HAVE ANY FINANCIAL INTEREST BITH U.S. CGRPORATIONS OR BUSINESSE	IN. OR OFFICE	AL CONNI	10 POITS	14, NON-U.3 Interests:	. CORPORA			F YOU HAY
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5.	IF YOU HAVE APPLIED FOR U.S. CITIZE	NSHIP, INDICA	TE PRES	ULATE THE	S OF YOUR	APPL I CATIO	n (First p	apera, a	ec. j
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PERSON WILL ARCAMI PATION WORK EXPERI	ENCE - SINCE LAST COMPLETION OF A PERSCHNEL QUALIFICATIONS QUESTIONNAIRE
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1. INCLUSIVE DATES (Proper and 10-)	12 a legal aleaning Round
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UNDER 21 YEARS	OF AGE. AND	ARE NOT SELF.		THELD	SUPPO	INT, OR. CHILL	OREN OVER 21 VEARS
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PERSONAL HISTORY STATEMENT

Answer all questions completely. If question is not applicable write "NA." Write Instructions: 1. "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 SEC. 1. PERSONAL BACKGROUND B. NICKNAME VIM WHAT OTHER NAMES HAVE YOU USED! WON UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE HOW LONG? A IF A LEGAL CHANGE, GIVE PARTICULARS WA C. DATE OF BIRTH 2/19/12 PLACE OF BIRTH EL MHIRST NEW YORK IP 4 SIGNATION BY BIRTH: YES BY MARRIAGE: I CERTIFICATE NO. NA ISSUED NA BY LA REVIOUS NATIONALITY? (Yes of No) (Country) AT DATES: NA TO NA ANY OTHER NATIONALITY! NA

TEPS TO CHANGE PRESENT CITIZENSHIP? NO GIVE PARTICULARS:

	ARRIVE IN THIS COUNTRY? NA
	E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY?
	PORT OF ENTRY? NA ON PASSPORT OF WHAT COUNTRY?
	LAST U. S. VISA (Number) (There of hour) (Date of lasces)
	The state of the s
SEC.	2. PHYSICAL DESCRIPTION 2. PHYSICAL DESCRIPTION 2. PHYSICAL DESCRIPTION 3. WEIGHT 6.3" WEIGHT 210 LBS
ì	AGE 34 SEX MALE HEIGHT 6'3" WEIGHT 210 LBS
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SEC.	A. SINGLE MARRIED DIVORCED WIDOWED
	A. SINGLE MARKIED MARKIED ANNULMENTS
	A. SINGLE MARKETED STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS
	ANNUL ANNUL
	B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING MATA REQUIRED MENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED MENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED
	MENTS-USE A SET AUTOUS MARRIAGES.)
	NAME OF SPOUSE PROMITE PATRICIA (Mobile) (Minister)
	PLACE AND DATE OF MARRIAGE NEW YORK NY. BONE BRLYW NY.
	HIS (OR HER) ADDRESS BEFORE MARRIAGE/SI, and Number) (City) (Country)
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	TO THE OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
	(Country)
	CITIZENSHIP CAH WHEN ACQUIRED FLYING SCHOOL
	EMPLOYER'S OR BUSINESS ADDRESS LOYD BENNETT AIRFIELD BY LIN (County)
	TO TO BRANCH OF SERVICE
	DETAILS OF OTHER GOVT, SERVICE, G. S. OR T.
	COUNTRY A FAMILY AND A MARKET

. • .	L CHILDREN OR DEPENDENTS (Include partial dependents):
Sec. 4	1. NAME MAURIEN RELATIONSHIP DAUGHTER AGE 9
	CITIZENSHIP USA ADDRESS TO 2 So, 4 ST. Market No (County)
	2 NAME DIANE RELATIONSHIP DAVOHIER AGE 5
	CITIZENSHIP USA ADDRESS AMI AS ABOVETY (State) (Country)
	8 NAME VANES RELATIONSHIP DON AGE 4
	CITIZENSHIP (St. and Number) (City) (State) (Country)
SEC.	5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)
	FULL NAME TAMES FAIRICK ONNELL (Last)
	LIVING OR DECEASED DECEASE WILL CAUSE HEART
	PRESENT, OR LAST, ADDRESS 133 JAMES (State) (Country)
	DATE OF BIRTH JACE OF BIRTH BROWN (City) (Country)
	IF RORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
	CITIZENSHIP A WHEN ACQUIRED? NH WHERE? (City) (State) (Country)
	OCCUPATION, RALKING & NAKOHO SINGST EMPLOYER CLIN DESCRIPTOS
	EMPLOYER'S OR OWN BUSINESS ADDRESS 69 (S), and Sumber) (City) (State) (Country)
	MILITARY SERVICE FROM A TO WHY BRANCH OF SERVICE
	COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
	VA
SEC. 6	. MOTHER (Give the same information for stepmother on a separate sheet)
	FULL NAME ANNE DENNINS (Middle) (Last)
	LIVING OR DECEASED ALLE DATE OF DECEASE ALL CAUSE
•	PRESENT, OR LAST, ADDRESS & ST. CAMES A TE County (City)
•	DATE OF BIRTH 3/19/9/ PLACE OF BIRTH CORONA, WEN YORK
	CITIZENSHIP S A WHEN ACQUIRED? DAZ, WHERE? (City) (Spate) (Country)
	IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY

	(4)
	OCCUPATION HO. SEWIFE LAST EMPLOYER NA
	EMPLOYER'S OR OWN BUSINESS ADDRESS MARKET
	(St and Sumber) (City) (State) (Country)
	MILITARY SERVICE FROM MA TO A A BRANCH OF SERVICE MA
	COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
ec. 7.	BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):
1	1. FULL NAME THE AGE 26
-	PRESENT ADDRESS 33 ST. (City) ALE Country (Citisenship)
1	2. FULL NAME
	PRESENT ADDRESS (St. and Number) (Cits) (State) (Country) (Citisenahip)
,	AGE
	PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citisenship)
4	I. FULL NAME (First) (Midde) (Last)
	PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citisenship)
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	PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Cithenship)
	
c. 8. I	FATHER-IN-LAW
	FULL NAME JOST (Jan)
	LIVING OR DECEASED LEAD DATE OF DECEASE AND CAUSE A
	PRESENT, OR LAST, ADDRESS A # 1/1 B (City) (State) (Country)
	DATE OF BIRTH 2 190 PLACE OF BIRTH DROBLYN, A.Y.
	AND DOWN OUTSIAN IS S INDICATE DATE AND PLACE OF ENTRY
	IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
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	CITIZENSHIP JA WHEN ACQUIRED! JOSTA WHERE! (Con) Island (Construction)
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DC.	9. MOTHER-IN-LAW
	FULL NAME A THE RYN MATRY DEPART (Last)
	LIVING OR DECEASED LOW DATE OF DECEASE A CAUSE
	PRESENT, OR LAST, ADDRESS CONTEST AND MINISTER (City) (State) (Country)
:	DATE OF BIRTH HILLY T. PLACE OF BIRTH
	IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
	CITIZENSHIP WHEN ACQUIREDS NOTH WHERE? (CM) (State) (Country
	OCCUPATION ASSESSION LAST EMPLOYER
EC.	10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:
	1. NAME AGE AGE
	CITIZENSHIP ADDIN'SS (St. and Number) (City) (State) (Country)
	2 NAME
	CITIZENSHIP ADDRESS (St. and Number) (City) (State) (Country)
	3 NAME VA RELATIONSHIP VA AGE AH
	CITIZENSHIP A ADDRESS (St. and Number) (City) (State) (Country)
EC.	11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U.S. OR OF A FOREIGN GOVERNMENT:
	1. NAME NA RELATIONSHIP NA AGE NA
	CITIZENSHIP ADDRESS (St. and Number) (City) (State) (Country)
	TYPE AND LOCATION OF SERVICE (IF KNOWN)
	2 NAME AGE AGE AGE
	CITIZENSHIP ADDRESS (St. and Number) (City) (State) (Country)
	TYPE AND LOCATION OF SERVICE (IF KNOWN)
	3 NAME AGE AGE
	CITIZENSHIP ADDRESS (St. and Number) (City) (State) (Country)
	TYPE AND LOCATION OF SERVICE (IF KNOWN)

SEC. 12. POSITION DATA

A KIND OF POSITION APPLIED FOR	
B. WHAT IS THE LOWEST ANNUAL EN	STRANCE SALARY YOU WILL ACCEPT: 2040. 6 Position With A Lower Entrance Salary.)
C. IF YOU ARE WILLING TO TRAVEL,	SPECIFY: OCCASIONALLY
	CONSTANTLY
D. CHECK IF YOU WILL ACCEPT APPO	OINTMENT, IF OFFERED: IN WASHINGTON, D. C
ANYWHERE IN THE UNITED STATE	esoutside the united states//
E. IF YOU WILL ACCEPT APPOINTME	NT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS
PREFER EASTER	N STATES
3. EDUCATION	
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SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE SELECTIVE SERVICE BOARD NUMBER 256 ADDRESS JACKSON HEROTTS NY IF DEFERRED GIVE REASON USINR INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZA 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS GIVE ADDRESSES AND STATE WHAT YOU DID DURING SEC. PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment, by a foreign government, regardless of dates.) CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) (GS 12 FROM 2/47 TO 11,30/51 EMPLOYING FIRM OR AGENCY EDERAL BURNAL OF INVESTIGATION ADDRESS VASHINGTON DL KIND OF BUSINESS NEETING ATTICE NAME OF SUPERVISOR R. B. Joos TITLE OF JOBS PECIAL AGENT SALARY 7040 ME PER HOWUM YOUR DUTIES NESTIGATE MATTERS THOSE PERTALING TO THE INTERNAL SECURITY OF THE COUNTRY on Rostant & Practi REASONS FOR LEAVING 12 SOIL & PESTION SITH GROWER BOURSEMENT KIND OF EUSINESS FACTOR & CLASS AME OF SUPERVISOR YOUR DUTIES PECTED BUSINESS CONSULTAINS SEE 10 TRUCKS THASES SICH AS TO TENTO. OF MY THERE. SPATCHWILL REASONS FOR LEAVING FATTER (7)

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KIND OF BUSINESS TELLAL MAKE OF SUPERVISOR CELLAN
TITLE OF JOB/ACCHASE SPECION SALARY \$ 38 J. SE PER ANNOS
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THE NORDEN BEMESION AND STHER VALAL CRITARES MAN
REASONS FOR LEAVING TO GNIER NAVAL SERICE
FROM TO S/13 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE)
EMPLOYING FIRM OR AGENCY JAMES P. O. CONNELL TRUCKING CO
ADDRESS 64 6 5 FAS J ST BRO NEYN (State) (Country)
KIND OF BUSINESS LACE NAME OF SUPERVISOR DE CAMBELL SE
TITLE OF JOB, SEEMAN SALARY OF SER BUNUM
YOUR DUTIES J. P. R. L. S. LOADING & VALLEDONIE OF TRACKS TO
4 SREW RHURSON VARDS TO THE WAREHOUSE.
REASONS FOR LEAVING TO OBTAIN A DEFENSE VOB
ROM 3/40 TO 9/4/ CLASSIFICATION GRADE (IF IN FEDERAL SERVICE)
EMPLOYING FIRM OR AGENCY S. G. VISAM CONFANY
ADDRESS 63 (St. and Number) (City) (State) (Country)
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17. GENERAL QUALIFICATIONS A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FLUENT") LANGUAGE SPEAK READ WRITE LANGUAGE SPEAK READ WRITE LANGUAGE SPEAK READ WRITE CIENCY IN EACH: C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIE MIGHT FIT YOU FOR A PARTICULAR POSITION! ACK OF MIGHANT TO A SUCH AND AS JUCK AND REGARD ON CORNERS HIMINALES THE SECRET OF TRAINING OR EXPERIENCE OF THE STORY OF T	E J.A.
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	F. IF. TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:
	FRI
	125 179

Sec. :	26 PERSON TO BE NOTICINE W. C
	26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:
	NAME TREATIONSHIP WIFE
	ADDRESS 32/2 do (St and Number) (City) State
SEC. 2	7. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.
	ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SURSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."
SEC. 28.	1 Opposition
•	I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.
	SIGNED AND SLINITION DATE 1 155
	(Witness) (Witness) (Witness)
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SEC. 15 EMPLOYMENT,

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ASSISTANT MICK. 100.00 DUMS.

REASON FOR LEAVING: SEASONDE WORK

BROOKLYN NEW YORK DEPARTMENT OFFENDING INTERNITURE TO STORE INTERNITURE INTERNITURE DEPARTMENT DEPA

CONFIDENTIAL

DATE 6 Centerber 1962

PROT.

OT Director of Security

14-00000

Director of Security

Director of Personnel

Chief, Communications Security Staff

SUBJECT: Notification of Cryptographic Clearance - James P. O'Connell

1. Subject employee has been granted a cryptographic clearance under the ation 90-500. Clearance is effective 8 June 1962 provisions of CTs

- 2. Subject has been informed of the granting of clearance, has been briefed concerning cryptographic and related communications security matters, and has signed a Briefing Statement acknowledging responsibility for the protection of cryptographic information.
- 3. When Subject employee no longer requires the clearance in order to perform his assigned duties, it is requested that the Communications Security Staff (2411 "I" Blig., Ext. 3021) be notified by Director of Security that the clearance may be revoked.

FOR THE CHIEF, COMMUNICATIONS:

Chief, Protective Branch

Distribution:

1 - Director of Security 1 - Security Office (Briefing Statement attached)

1 - Personnel Office

1 - OC-S/FROT File

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COMP IDENTIFIED

SECURITY APPROVAL

Chief, Personnel Division TO:

14-00000

Your Reference:

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FROM: CHIEFONDERUNTENCHIANEN

Case Number: 66483

Date: 10 December 1951

Chief, Special Security Division SUBJECT: O'CONNELL, James P.

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

Security approval is granted the subject person for access to classified information.

Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.

The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H-of-Regulation.... 10-9.

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

3. Subject is an applicant for a position in I'S.

SECRE'

CONFIDENTIALLY

FORM NO. 38-101 JUL 1951

RECORD OF

PREVIOUS GOVERNMENT

SERVICE RETURNED TO

FEDERAL RECORDS CENTER IN

ST. LOUIS, MO.

DATE 1 AUG 1974 RK

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FILE TITLE/NUMBER/VOLUME: TARASOFF, ANNA

CFFICIAL PRESENTE FILE

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NO EUCUMENTS MAY BE COPTED OF REMOVED FROM THIS FILE.

26 March 1971

MEMORANDUM FOR : Office of Finance/C&TD

SUBJECT

: Verification of Contract Service for

Sandra B. CAZAZZUS (P). Terminated Contract Employee

1. During period 8 April 1957 through 8 September 1953, subject served as an Agency Staff Employee. During this period, subject was a participating member of the Civil Service Retirement System.

- 2. During period 15 July 1964 through 19 October 1970, subject served as a part-time contract employee on a prearranged regular scheduled tour of duty. With respect to this period of service:
 - (a) Period 15 July 1964 through 7 September 1967 is creditable for purposes of Civil Service Retirement. Since subject was covered by Social Security during this period, Civil Service Retirement deductions were not withheld.
 - (b) During period 8 September 1967 through 19 October 1970, subject was a participating member of the Civil Service Retirement System.
 - 3. Action Required:
 - (a) Office of Finance: Please post the above information to subject's retirement records.
 - (b) DDP/WH/Contracts: For your information.

/c/ Day ill Live Chief
Chief
Contract Personnel Division

Distribution:

Orig - O/F/CLTD

1 - WH/Contracts

1 - CPD subject file

1 - CPD chrono

Explosion Explosion of this Completed of the Color officer MEMORANDUM FOR: Chief, Contract Personnel Division

SUBJECT

14-00000

: Civil Service Retirement Credit

l. It is requested that information be provided as to the creditable service for the Civil Service Retirement program for the following individuals.

Kurt B. CANEPA Sandra B. CAZAZZUS Ralph M. SAMOSKA Jesse D. WITCHARD

- 2. Although the named individuals are no longer employed by the Organization, the creditable service can be of particular significance to each.
 - 3. Your early attention to the request will be appreciated.

liam V. Broe

Western Hemisphere Division

23 March 1971

MEMORANDUM FOR: Contract Personnel Division

SUBJECT

14-00000

: Sandra B. CAZAZZUS

Following are the total number of hours for each year

worked by Sandra B. CAZAZZUS under contract. The informa-

tion was provided this office by Payroll. Pariod WEEKLD FROM 551 hours + Dow: 1964 15 JUZ 64 Dec This gal had two contracts. The first one included a leave benefit. This first 789 Dec : 1965 JAU 65 K ended and was immediated replaced by a 2nd K, which included Civil Service Retire-Dec 16 1966 1091 Jan LL From the number of hours worked I feel Dec 67 1967 we can make a determination that & during 1092 Jan 47 the full period she worked && & in a part-time basis on a prearranged reg. sch. 1486 1968 Jan 68 tour of duty. If you concur, I will write a std. type memo to C/Finance. 1414 1969 Jun 69 Subject is now terminated, but in WH field with her husband. Bill Renchan has a 1217 1970 dispatch in asking that Matra, verify her 234 30 19 oct total K service.

> Paul. 23 Mar 71

OK-DK

Contract Service — Sandra B. CAZATO (P)

Action — Comparation Gardinal

CIA Staff Employee service

15	Jul	.6h	Contract	Employee with Social Security.	\$2.59	n h
	Aug Oct		Pay incre	498	2.72	· ·
3	Jul	66			3.45	
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ð	Oct	67	LPI		3.03	
14	Jul	68	LPI .		3.12	GS-05 /5
13	Jul	69	LPI	,	3.37.	GS-05/5
28	Dec	69	LPI		3.57	65-05/5
19	Oct '	70	Contract t	erminated	3.57	n
				the state of the s		

8 Apr 57 8 Sep 63

NOTE: On 24 Mar 1971, subject's official Staff Employee file was roviewed. It reflected; (a) staff employee service from 8 Apr 57 to 8 Sep 63; (b) during entire period was a participating member of the Civil Service Retirement System; (c) she was on 1MOP during p riod 12 Jun-8 Sep 63; and her SF-144 dated 8 Apr 57 reflect no prior Federal Service.

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Contract terminated 10/19	770		- 1	Subject to Sec. 203(d): 1931 Leave Act. Years Month Yes No No Coased to be subject to Sec. 203(d)	Na Doy
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6 Current leave year accrual through 10/17	275	25	-∤''	Date crival abroad for ML purposes Current balance as of	SCD 7/15/6
7. Total 8. Reduction in credits, if any (current year)	89 364		١,,	12-month occusor rate Dates leave used prior 24 months	
9 Total leave taken 10. Balance	0	0	18.	Monthly accrual date	
1. Total hours paid in lump sum 360hrs 2 ha	. 364 . 14day	312	20	Date basic service period completed MILITARY LEAVE	
2. Solony rose(s) \$3.57 p/h 3. Lump turn leave down. Nov. USOO. 10/17 to 1700 12/2			21. 22	Dates during current colendar yr. to ABSENCE WITHOUT PAY	
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THE THAT CONTROL SECRECY DATES

- I, Sandra B. CAZAZZUS , an about to terminate my association with the Organization. I recline that, by whother of my duties with the Organization, I have been the recipient of information and intelligence which openeous the present and future security of our country. I am aware that the unauthorized disclosure of such information is prohibited by the espicinage laws of our government which specifically requires the protection of intelligence sources and methods from unauthorized disclosure. Accordingly, I SOLFINIA SHIRR, WITHOUT THIMAL RESERVATION OR PURPOSE OF EVASION, AND IN THE ABSENCE OF DURESS, AS FOLLOWS:
- 1. I will never divulge, publish, or reveal by writing, word, conduct, or otherwise any information relating to the national defence and socurity and particularly information of this nature relating to intelligence sources, methods, personnel, fiscal data, or security measures to anyone, including, but not limited to, any future governmental or private employer, private citizen, or government employee or official without the express written consent of the Chief of the Organization or his authorized representative.
- 2. I have been invited to subsit in writing any monetary claims I may have against the Organization or our government which may in any way necessitate the disclosure of information described herein. I have been advised that any such claims will receive full legal consideration. In the event, however, that I am not satisfied with the decisions of the Organization concerning any present or future claims I may subsit, I will not take any other action to obtain satisfaction without prior written notice to the Organization, and then only in accordance with such legal and security advice as the Organization will promptly furnish re.
- 3. I do not have any documents or materials in my possession, classified or unclassified, which are the property of, or in custodial responsibility of the Organization, having come into my possession as a result of my duties with the Organization or otherwise.
- 4. During my exit processing and during my period of employment with the Organization I have been given an opportunity to report all information about the Organization, its personnel, and its operations which I consider should receive official cognizance. Hence, I am not aware of any information which it is my duty, in the national interest, to disclose to the Organization, nor am I aware of any violations or breaches of security which I have not officially reported, except as set forth on the reverse side of this sheet or on other attachments.

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ng OS/ID

SECRET

- 5. I have been advised that, in the event I am called upon by the properly constituted authorities to testify or provide information which I am pledged hereby not to disalose, I will nitify the Organization invediately; I will also advise said authorities of my seepest carditrents to our government and will request that my right or need to testify be established before I am required to do so.
- 6. I am aware of the provisions and penalties of the esploinge laws of our government and an fully aware that any violation on my part of certain matters sworn to by me under this outh may subject me to presecution under the terms of these laws, and that violation of other portions of this outh are subject to appropriate action, including such dissemination of the violation as the circumstances agreent.

I have read and understand the contents of this cath and voluntarily affix by signature hereto with the full knowledge that this outh was executed for the mutual benefit of myself and our government, and that it will be retained in the files of the Organization for its future use or for reference by we at any time in the future that I may be requested or ordered to testify or disclose any of the matters included within the scope of this cath.

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Witnessed by me that Mexico City, 1		day of October	19_70	•
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14-00000

Miss Eandra B. CAZAZZUS

Dear Miss CAZAZZUS

You are hereby notified that your services under a contract with the United States Government, effective 8 September 1967, are to be terminated at the convenience of the United States Government pursuant to paragraph of said contract, and that the 30 days' notice required by the contract begins 19 September 1970

You are reminded of the contents of paragraph 4 of said contract which read as follows:

"_____. Secrecy. You will be required to keep forever secret this contract and all information which you may obtain by reason hereof (unless released in writing by the United States Covernment from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under applicable laws and regulations."

Your signature in the space provided below is acknowledgement of the contents hereto.

UNITED STATES GOVERNMENT

Field Contracting Officer

Acknowledged:

Eugen B. Canagas

Witness:

Face H Farm lant

Reviewed:

Contract Approving Officer

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	1. PLEASE ADVISE DOUGLAS J. FEINGLASS AND SANDRA B. CAZAZZUS THA	ľ
	THE FLAT RATE TAX HAS INCREASED TO 18.4 PER CENT EFFECTIVE WITH PAY	
2	PERIOD ENDING 20 SEPTEMBER 1970.	
	2. STATION SHOULD START WITHHOLDING TAX AT HIGHER RATE IMME-	
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REPRODUCTION BY OTHER THAN THE ISSUING OFFICE IS PROHIBITED.

14-00000

SECRET

Miss Sandra B. CAZAZYUS	•
Dear Miss CAMAZZUS	•
Reference is made to your con	tract with the United States
8 Sept. 1967 as amended,	Contracting Officer, effective which expires 8 Cept. 1970
	_, said contract, as amended,
is extended foronc (1) year	•
All other terms and condition	s of said contract, as amended,
remain in full force and effect.	
	UNITED STATES GOVERNMENT
	For Long Officer
- · · .	
Witness:	Concur: Stille. Date: DDR gost
Approved	
•	

/s/ How H. Luetscher
Special Centracting Officer

Chief of Station, Mexico City

Chief, WH Division
ADMIN/CONTRACTS
Sandra B. CAZAZZUS, Contract Provisions

Reference: HMMT-9892

1. Reference indicated Sandra B. CAZAZZUS is a Contract Employee who is required to perform her duties during various hours of the day as well as a varying number of hours in order to meet operational deadlines.

Reference asked that the contract for CAZAZZUS be amended to provide reimbursement of six hours per day when in a leave status and for paid holidays retroactively to 8 September 1967.

2. The request is answered by the Station's explanation—unless and until there has been established in advance a regular tour of duty, an individual is not eligible for leave or holiday pay (see FHB 20-1 and FR 20-13).

In the event the basic criteria is met (FHB 20-1), the effective date could not be retroactive.

Hugh E. WESTBY

Distribution: 2-COS, Mexico City

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PROCESSING ACTION DISPATCH SECRET MARKED FOR BIDEXING NO DESCRIPTION SECURITOR Chief, Wif Division CARA CITATALIO DEZE CAN JUDGE INDEXING Chief of Station, Mexico City SUBJECT ADMIN/CONTRACTS Sandra B. CAEACZUS (C A. Book Dispatch - 6496 References: Book Dispatch - 6144 1. Subject is a contract employee who is required to perform her duties during various hours of the day (including a varying number of hours) in order to meet operational deadlines. 2. Even though CAZAZZUS' contract allows her annual and alex leave benefits, she has not been reimbursed for any leave during the period 8 September 1967 to the present. In addition, the Station has not reimbursed her for any holidays, WOLADY or local, while other contract employees whose contracts call for a regularly scheduled four of duty, have received compensation. 3. Since subject has worked an average of 30 hours per week, with Headquarters concurrence, it is recommended that she he reimonraed six hours per day when in a leave status and for paid holidays retroactively to 8 September 1967, the effective date of her present contract. for wohn A. HABERT . Distribution: G/WHD

DISPATCH SYMBOL AND NUMBER

HMMT - 9892

CLASSIFICATION

SECRET

CROSS REFERENCE TO

DATE

HOS FILE NUMBER

3 September 1969

14-00000

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SECRET

FROM : Centract Personnel Division	
Contract Extension for. Contract Extension for. B. Casaa Sand	
1. Effective stopiomber 1969 the contract as a	imended)
for the subject individual, effective 8 Toutomber 1967	
2. All other terms and conditions of the contract (as ame	ndedj
romain in full force and effect.	i ,
UNITED STATES GOVERNM	ENT
BY Contracting Officer	
	ON O/
SECRET	-5-21

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MEMORANDUM FOR: Chief, Contract Personnel Division

SUBJECT : Contract Extension

It is requested that the contract for the following named individual(s) be amended to extend the term as indicated.

Paramet Chara Co CAZAZZUS, Sandra B.

Through 7 September 1970

William V. Broe

Western Hemisphere Division

SECRET

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		•	DATE:		
			CTC No.		
					
EMORANDUM FOR:	Director of Fi				
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Chief of Station, Mexico City

Chief, FOGARE
Douglas J. FEINGLASS (p)
ADM/JBCENT - Sandra B. CAZAZZUS (p) - Revision of Tax Assessment Sate

REFERENCE: Letter of Tax Instruction, HAMS-5711, 14 Dec 1967

- 1. Please advise FEIKGLASS that his flat rate percentage tax assessment has been revised by the Tax Staff from thirteen and nine-tenths (13.9) per cent, established by reference, to twenty and eight-tenths (20.8) per cent, effective 29 June 1969, T/Y 1969. This revision is necessary as his income and tax position have changed to such a degree as to make the previous tax assessment rate unrealistic. A computation of the revised tax rate is attached.
- 2. This assessment revision is incorporated by reference as an assendment to FEINGLASS' Letter of Tax Instruction.
- 3. From the information submitted to the Tax Staff, it appears that YEINGLASS' daughter qualifies as a dependent. The new tax computations are based on five exemptions. Also, YEINGLASS should list five exemptions on his 1969 tax return.

VICTOR D. UNITSKY

Attachment: As Noted

Distribution:

Orig. & 1 - COS (w/att)

i - C/CPD (wo/att)

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Learners and August 1969

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H2025-6524

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NOTE FOR FILE:

CAZAZZUS' husband's (FEINGLASS) retirement date extended to Nov. 70.

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Chief, SB Division		xx	X212 CHRIADD VIRO
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2. I CERTIFY THAT, EXCEPT FOR NESS REPORT HAVE BEEN COM	ITEMS OMITTED UNDER THE ABOVE PLETED UNDER PROVISIONS OF CUR	INSTRUCTIONS, ALL ITEMS APPEARING ON THE ATTACHED FIT- RENT INSTRUCTIONS OR REGULATIONS
DATE 28 January 1969		OIGNS TRANSCEN CONTRACTOR
DATE 28 January 1969	TYPED OR PRINTED NAME AND SIG	
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FORM AS USE PREVIOUS EDITIONS

SECRET

SECTION C

SECTION D

NARRATIVE COMMENTS

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

This employee continues to assist and compliment her husband, a Staff Agent, in an unusually efficient team. She pre-edits transcribed materials and puts usable material into a form roady for filing, thus saving analytical and clerical time in the Station. Her knowledge of Russian and Spanish, analytical ability, overall efficiency and interest in her work all contribute to a fine performance.

1,	BY EMPLOYEE	
	I CERTIFY THAT I HAVE SEEN SECTIONS A, B, A	IND C OF THIS REPORT
DATE	SIGNATURE OF EMPLOYEE	
28 January 1969		in pseudo on Field Transmittal)
2	BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO	EMPLOYEE, GIVE EXPLANATION
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
28 Jameary 1969		(signed in pseudo on Field Paul L. Dillon Transmittal)
3.	BY REVIEWING OFFICIAL	,
and her husbar	ing officer concurs with the nd continue to form an efficient	cient and valuable team.
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DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 January 1969	Chief of Station	(signed in pacydo on Field

CERTIFICATION AND COMMENTS

Transmitts

PROCESSING ACTION CLASSIFICATION DIJFATCH SECRET MARKED FOR INDEXING XX Chief, WOMOLD NO INDEXING REQUIRED ONLY QUALIFIED DESK INFO. Contact CAN JUDGE INDEXING Chief, WH Division Chief of Station, Mexico City ADMINISTRATIVE/TRAINING Language Training ACTION REQUIRED REFERENCES ACTION REQUIRED: Information Only

As of 1 March 1968 the below listed personnel were receiving voluntary Spanish language training paid for by the organization

or LRGOLD:

Sandra B. CAZAZZUS

Francis J. COIGNE

Humphrey K. FRADSHIP

Douglas J. PEINGLASS

Henry N. LANGDON

Keith R. LEVENDERIS

Wanda G. PANKPINTO

Clarice F. PARDECK

Cora B. RAUSKIND

Joseph F. TRECANTI

and the wives of Walter W. CORNBURY and Gerald D. FAHLANGER.

for/Willard C. CURTIS

DISTRIBUTION:

2 - Chief, WOMOLD 2 - Chief, WH Division

CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE
	нынт-8919	9 April 1968
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ELECTION, DECLINATION, OR WAIVER OF LIFE INSURANCE COVERAGE EXPERIM EMPLOYEES GROUP LIFE INSURANCE PROGRAM

14-00000

IMPORTANT AGENCY INSTRUCTIONS ON BACK OF ORIGINAL

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14-00000

George R. Thompson

SELECTOR STANCE 1 STANGE

OFFICE SYMBOL

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FORM 45 USE PREVIOUS EDITIONS

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ECTION (
	NARRATIVE COMMENT

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on fareign language competence if required for more imposition. Applify to exhibit ratings river in Section B to privide keet basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on it applicable. It extra space is needed to complete Section C, attach a separate sheet of paper.

This employee continues to assist and compliment her husband, a Staff Agent, in an unusually efficient team. She pre-edits transcribed materials and puts usable material into a form ready for filing, thus saving analytical and clerical time in the Station. Her knowledge of Russian and Spanish, analytical ability, overall efficiency and interest in her work all contribute to a fine performance.

SECTION D	CERTIFICATIO	N AND COMM	ENTS	-
1,	BY EN	PLOYEE		
	CERTIFY THAT I HAVE SEEN SE	CTIONS A, B, AN	D C OF THIS REPORT	
DATE	SIGNATURE OF EMPLOYEE	•		
28 Jameary 1969	Sandra B. CAZAZZUS	3 (signed 1	n pseudo on Field 7	Transmittal)
2.		PERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BE	EEN SHOWN TO E	MPLOYEE, GIVE EXPLANATI	ON
28 Jamary 1969	OFFICIAL TITLE OF SUPERV	ISOR	(signed in pseudo Paul L. Dillon	on Field
3.	BY REVIEW	NG OFFICIAL		•
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DATE .	OFFICIAL TITLE OF REVIEWS		TYPED OR PRINTED NAME A	
28 January 1969	Chief of Sta	tion	(signed in pseudo Winston M. Scott	Transmittal.)

	JI CR	, <u> </u>
	FIELD TRANSMITTAL	- FITNESS KEPURT
	INSTRUC	TIONS
SECTION A, items 1, 6, and		field personnol preparing the report for transmitted to Headquarters:
I. I CENTIFT THAT I HAVE SEEN THIS FITNESS REPORT	28 January 1969	Sandra B. CAZAZZUS
2. I CERTIFY THAT, EXCEPT FOR NESS REPORT HAVE BEEN COMI	TEMS ONIT TED UNDER THE ATION!	INSTRUCTIONS, ALL ITEMS APPEARING ON THE ATTACHEU PIT- HENT INSTRUCTIONS OR REGULATIONS
DATE 28 January 1969	TYPED OR PRINTED NAME AND SIG	OIGNE (Cycco Con Control Con Control C
^{0ATE} 28 January 1969	TYPED OR PRINTED NAME AND SIG	SHATURE OF REVIEWING OFFICIAL (St. passudonym)
	SPECIAL	NOTE

Fitness Reports must be prepared with due regard for security considerations. For example, in the case of administrative and support personnel and others whose duties do not in themselves reveal sources of information and methods of operation, it is normally espected that a complete and realistic statement of specific duties may be reported in Section B. However, the nature, source, purpose or disposition of information or operations will not be included. On the other hand, the position titles and description of specific duties of certain other employees may jeopardize security and should not be fully reported on this form. In these cases, general statements of specific duties will be included in Section B indicating the level of responsibility.

450 OBSOLETE PREVIOUS EDITIONS.	SECRET	1984 - 12 Oct - 1
DISDATE.	CLASSIFICATION	PROCESSING ACTION
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ROM Chief, NOGAME		MICRGFILM
AUTOJECETE - FEIEGLA	SS/CAZAZZUS - Tax Administrati	on
ACTION REQUIRED - REFERENCES	·	

REF: HEST-8732, 15 December 1967

- 1. Forwarded under separate cover is the name and address of the notional organization for FKHWHASS to use on his tax return. Also forwarded under separate cover is a brief outline of the nature of the notional.
- 2. As previously discussed in a Hendquarters tax briefing, this notional would not issue any tax documentation and was not to be used for any purpose other than their tax return. This return was to be kept in a safe place, since the return would indicate a different cover than what they are using in Mexico.
- 3. In the event FERGLASS ever indicates that the use of the nutional is necessary for purposes other than the tax return, this requirement should be cleared by Headquarters prior to actual use.

VICTOR D. UNITERY

Distribution:
Orig. & 1 - COS (w/SCA)
1 - WI/Contracts (wo/att)

Attachment (USC)

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Subject continues to complement her husband as a part of an efficient team. Her expeditious processing of transcript materials (so that they come to the Station ready for filing) saves the Station a great deal of work and time. Her language and analytical abilities are utilized to pre-edit material and cut out the superflous. She continues to show interest in her work at which she is very

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DATE22 November 1967

MEMORANDUM FOR: Chief, Insurance Branch/BSD/OP Benefits and Services Division

This is to advise you that Anna A. Tarasoff
has been employed under an Agency personal services contract
effective 8 September 1967. The Contract authorizes
participation in Civil Service Retirement, FEGLI and Federal
Health Insurance.

Subject's contract is the administrative responsibility of DDP/WH____.

Dow H. Luetscher
Chief
Contract Personnel Division

SECRET

Group 1 - Excluded from automatic downgrading and declassification

Chief of Station, Mexico City

Chief, Bustorn Hemisphere Division

Sandra B. CAZAZYUS, Contract

Action Required: As Noted

Beferences

: A. BD-6144 B. MEXICO CITY 2718

1. In view of Reference B and inasmuch as Sandra B. CAZAZZUS was in the Headquarters area, a new contract was prepared granting her the benefits of Reference A. The contract was signed by CARAZZUS and has been forwarded for related processing.

2. Attached is a copy of the contract effective 8 September 1967 for CAZAZZUS. She elected FEGL1 but declined the health insurance as she is included under her husband's policy. CA2A22US was thoroughly briefed on the provisions of the contract as well as the provisions of her previous contract.

STATION ACTION:

As CAZAZZUS is payrolled by the Station, related deductions for the new benefits (Civil Service Retirement and FEGLI) are to be made by the Station. Social Security deductions will, of course, cease as there is no cover requirement for mandatory Social Security coverage.

3. During the briefing, CATALZUS inquired about the use of sick leave. She was informed sick leave can be used in the same menner and per the same regulations as when she was formerly a

(continued)

Attachment: As stated

Distribution: 2-COS, Mexico City, w/att, h/w

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staffer. The point involved was whether she had been granted sick leave during her "maternity leave" in 1965. She was advised that possibly she did receive payment covering the period which her accrued sick leave represented; and, possibly at that time she had only a minimal balance accrued.

STATION ACTION:

It is suggested the Station review her leave/pay account for the above cited period and advise her of the details involved.

Should the records reflect she had a balance but was not provided the leave, a pay adjustment may be made up to the balance at that time with an appropriate reduction of her current sick leave balance. NOTE: She was advised she could not have sick leave accrued since that time applied retroactively.

It is further suggested the Station Admin or Finance Officer conduct the briefing due to the necessity for the briefer to have a rather technical knowledge of leave.

Hugh E. VESTEY

8 Sep 57

Miss Sandra B. Cazazzus

Dear Miss Cazazzus:

The United States Government, as represented by the Contracting Officer of this organization, hereby contracts with you, as a contract employee under the terms and conditions set forth below:

- 1. Now Benefits. By wirtue of your employment relationship under this agreement you are:
 - (a) Covered under the Civil Service Retirement Act in conformance with rules and regulations applicable to appointed employees of this organization. From the basic compensation paid you hereunder there shall be deducted the appropriate rate percentage (presently 6-1/2%) for deposit and eventual crediting to the Civil Service Retirement Fund. Social Security deductions required by virtue of your cover activities will not be reimbursed you by this organization.
 - (b) Covered under the Federal Employees Group Life Insurance Act in conformance with rules and regulations applicable to appointed employees of this organization unless you execute a written waiver of such coverage. The Government is presently nuthorized to bear a portion of the premium cost, you will bear the remainder.
 - (c) Eligible for coverage under the Federal Employees Health Benefits Act in conformance with rules and regulations applicable to appointed employees of this organization. The Government is presently authorized to bear a portion of the premium cost, you will bear the remainder. Because of your eligibility under this Act (whether or not you choose to enroll), your coverage under the contract employees health program shall cease thirty-one (31) days after the effective date of this agreement.
- 2. Your previous contract with the United States Government, effective 15 July 1964, is herein terminated by mutual consent of the parties thereto.
- 3. All provisions of said previous contract not in conflict with this agreement are incorporated by reference into and made a part of this agreement.

4. This agreement is effective as of the state of the sta

UNITED STATES GOVERNMENT

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Chief of Ftellos, Resciou City

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VICTOR D. GRITTAN

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Letter of Tax Instruction for FEINGLASS/CAZAZZIS

- 1. Based on discussions held with tax representatives of the Organization, an assessment of your Organizational income has been approved to satisfy your Federal tax obligation.
- 2. The assessment computation is based on an estimate of your taxable compensation from the Organization and your estimate of other income from outside sources. The assessment computation results in a percentage of your salary being withheld each pay period to completely satisfy your tax obligation. For tax year 1967 thirteen and nine-tenths (13.9) per cent will be withheld, effective 28 August 1967. The computation is attached.
- 3. In computing your assessment rate, you have been granted a basic tax credit of \$250.00. This credit is not guaranteed, but is granted to give reasonable assurance that you will not pay a higher tax than you would under ordinary reporting procedures.
- 4. Future changes in your income or tax status may justify a revision of the assessment rate. In this event this agreement would be amended accordingly.
- 5. It is important that you file a tax return directly with Internal Revenue that is consistent with your cover status. Care and accuracy in preparing this return are necessary. Any tax liability resulting from the tax computation on this return will be satisfied by your own funds. A certified true copy of this tax return must be forwarded to us upon your submission of the original to Internal Revenue. Provided below are specific criteria to assist you in the preparation of the tax return:
 - A. You will be provided with the name of a notional organization to be used on your 1967 tax return. The only income you will report will be income shown on your (FEINGLASS) earning statement. You will not report your wife's income or tax withholding nor will you report any withholding that was made from your salary.
 - B. The income that is about (using the notional as a source) will be reported on the Form 2555 (Statement to Support Exemption of Income Farned Abroad) and will be exempted from tax, due to your residence overseas. You will base your exemption on physical presence abroad. For tax year 1967 you will report your income as being earned prior to how leave and therefore fully excludable because the qualifying period, which ended on the date you left Mexico for home leave, included an eighteen-month period abroad.
 - C. Other income must also be reported on this tax return, including interest from the Credit Union, which will be indicated without identifying the Credit Union by name.

- 6. You may request an advance of funds for payment of foreign income or related (income) taxes assessed against income received from or guaranteed by the Organization. Accounting for these funds will be made in the form of copies of the receipted tax bills (or other acceptable tax documents) which will be forwarded to the home office for approval and write-off of expense.
- 7. Please acknowledged the original of this letter and return to Headquarters, attention: Covert Tax Committee.
 - 8. We appreciate your cooperation in arranging these details.

VICTOR D. UNITSKY Secretary Covert Tax Committee

Acknowledged:	•			•	
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FORM 450 ODSOLETE PREVIOUS	SECR	E T	(4)

SYCHIA

Miss Anna A. Tarasoff

Dear Miss Tarasell

Reference is made to your current contract with the United States Government, as represented by the Contracting Officer.

Effective 23 August 1966 seld contract is amended by deleting all reterence to income taxes therefrom, and by adding thereto the following paragraph:

must satisfy your federal tax hability on taxable income part to you under para caph one (1) shove. Such income nay be paid you by or through a cover facility. Because of cover, operational and security considerations the Tax Committee of this organization is authorized to make certain determinations and establish procedures which will result in the full satisfaction of your Federal income tax liability on said income. It is specifically understood and agreed that such determinations and procedures, whether oral or written, constitute an integral part of this contract and are legally incorporated herein by reference.

All other terms and conditions of sold contract remain in full force and curect.

UNITED STATES JOYERNMENT

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