

**SECRET**  
(When Filled In)

NAME CHECK, DOCUMENT SERVICE, AND PARTIAL CONSOLIDATION REQUEST			
RID CONTROL NO. (Filled in by RID)		DATE (Submitted by requester)	
		FEB 20 9 42 AM '61	
FROM: (Requester's name)	BRANCH	ROOM	EXTENSION
T. McHale ① 03	FI/D	2512 "L"	3661

TO	ROOM	DATE	INITIALS	CHECKING INSTRUCTIONS
RID/INDEX	001-L	2/20/61	CD	<p align="center"><i>The Calf</i></p> <hr/> <p align="center"><i>When ready</i></p>
REQUESTER	FI/D	2512-L	②	
RID/FILES				
REQUESTER			③	
RID/DRS				
RID/201				
RID/ANALYSIS				
RID/MIS				
RID/INDEX				

SUBJECT TO BE CHECKED	
SURNAME	GIVEN NAMES
N LABE (or LABEX)	N Export-Import firm located in Milan, Italy
SPELLING VARIATIONS	
AXA, ALIASES	OTHER IDENTIFYING DATA (Occupation, sex, CP membership, I. S. affiliations, etc.)
DATE AND PLACE OF BIRTH	<p align="center"><b>RETURN TO CIA</b> Background Use Only Do Not Reproduce</p>
CITIZENSHIP	

RID/INDEX TO REQUESTER	COMMENTS
<input checked="" type="checkbox"/> NO PERTINENT IDENTIFIABLE INFORMATION	RID/archive rev phone - NP//
<input type="checkbox"/> CARD REFERENCES ATTACHED	

BE SURE ALL SUBJECT INFORMATION IS CORRECT

- ① Type or print all entries.
- ② On receipt of index card reproductions: draw a green diagonal line across items you don't want RID to obtain for you.
- ③ Edit (use green) the Copyflo listing to reflect: (a) Cards to be destroyed (green D). Examples: referenced document has been destroyed; less informative than a retained card leading to the same information; referenced information not significant. (b) Corrections and additions, including ∞ when card reflects all facts in document. (c) OK all cards that are correct as typed.

Could this trace be consolidated into an existing or new 201 file?  yes  no. (If yes, complete the following - no other form required.)

201 PARTIAL CONSOLIDATION			
201 -	(201 number will be supplied by RID. If new 201 number has been obtained by desk, note it in this space.)		
OTHER INTERESTED DESKS OR STATIONS			
CRYPTONYM ASSIGNED	FILE TO BE KEPT	ACCESS RESTRICTED	RESTRICTION (If any)
YES <input type="checkbox"/> NO <input type="checkbox"/>	RID <input type="checkbox"/> DESK <input type="checkbox"/>	NO <input type="checkbox"/> YES <input type="checkbox"/>	

ALWAYS RETURN THIS FORM WITH COPYFLO OF CARD REPRODUCTIONS. IF YOU HAVE REQUESTED A 201 PARTIAL CONSOLIDATION, ALSO RETURN PERTINENT DOCUMENTS.

DATE

SIGNATURE OF RECORDS OFFICER