

MAILED 2 REVIEWED AT CIA HEADQUARTERS  
 HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

SECRET

FILE TITLE/NUMBER/VOLUME: Goodpasture, Ann L.

INCLUSIVE DATES: 10 Feb 1944 - 28 June 1973

CUSTODIAL UNIT/LOCATION: Office of Personnel

ROOM: 5E13

DELETIONS, IF ANY:

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL
6/26/78	6/28/78	DAN HARDWAY	Dan Hardway

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SECRET

GOODPASTURE, ANN L. TERMINATED 57303 D

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 057303				28 June 1973	
2. NAME (Last-First-Middle) GOODPASTURE, Ann L.				3. NATURE OF PERSONNEL ACTION Under CIA Retirement & Disability System (F.W.A. ESL)	
4. EFFECTIVE DATE REQUESTED MONTH 06 DAY 30 YEAR 73				5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X V TO V CF TO V		7. FAN AND NSCA 3227-0183 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel) Public Law 88-643 Section 231	
9. ORGANIZATIONAL DESIGNATIONS DDO/CI Staff Development Complement				10. LOCATION OF OFFICIAL STATION Washington, D.C.	
11. POSITION TITLE Ops Officer		12. POSITION NUMBER 9997	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 7	17. SALARY OR RATE \$ 23,642		
18. REMARKS  Subject has been on Extended sick leave & Disability retirement since 14 June 1972  cc: Finance and Security  [Signature] [Signature] DDO/CI [Signature]					
19A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED 6/28/73	19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 6-29-73
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE AS 40	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTEGREE CODE
24. HQTBS CODE 1	25. DATE OF BIRTH MO DA YR 11 23 18	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR	28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE
30. RETIREMENT DATA 1-CCC 2-ORGN 3-VLA 4-NONE	31. SEPARATION DATA CODE D, HE, O, O, O	32. CORRECTION/CANCELLATION DATA MO DA YR	33. SECURITY REQ. NO.	34. SEX	35. VET PREFERENCE CODE 0-NONE 1-5 PT. 2-10 PT.
36. SERV. COMP DATE MO DA YR	37. LONG. COMP DATE MO DA YR	38. CAREER CATEGORY CAR/RESV PROV/TEMP	39. FEGLI/HEALTH INSURANCE CODE CODE 0-MAINT 1-REG/PROV 2-INTLG-BLE	40. SOCIAL SECURITY NO.	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)
42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS	44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS	45. POSITION CONTROL CERTIFICATION 7-5-73	46. OP APPROVAL [Signature] 7/5/73	DATE APPROVED 7/5/73

FORM 8-72 1152

USE PREV

SECRET

CLASSIFIED BY: 01-3332

EX-2  
APOIR

(4)

4 September 1973

Miss Ann L. Goodpasture  
4200 Cathedral Avenue, N. W.  
Washington, D. C. 20016

Dear Miss Goodpasture:

As you bring to a close your active career of service to your country, I join your friends and colleagues in wishing you well in your retirement.

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

May I extend to you my sincere appreciation for the important work you have done.

Sincerely,

/s/ W. E. Colby

W. E. Colby  
Director

Distribution:  
0 - Addressee  
1 - D/Ters  
1 - OPF  
1 - ROB  
1 - ROB Reader

Originator: /s/ John F. Blake  
Director of Personnel

OP/RAD/ROB/NFM/lks

OPF

6-30-73

6 September 1973

MEMORANDUM FOR: Chief, CI/OPS

THROUGH : Deputy Director for Operations

SUBJECT : Career Intelligence Medal  
for Miss Ann L. Goodpasture.

The Honor and Merit Awards Board is pleased to notify you that the Career Intelligence Medal has been approved for Miss Ann L. Goodpasture. You are requested to inform her of the award and of the security considerations contained in the attached memorandum from the Office of Security. Arrangements for presentation may be made with the Executive Secretary, Honor and Merit Awards Board, extension 3645, room 412, Magazine Building.

/s/ R. L. Austin, Jr.  
R. L. Austin, Jr.  
Recorder  
Honor and Merit Awards Board

Att

- Distribution:
- 0 & 1 - Addressee
  - 1 - OPF w/forms 382 & 600
  - 1 - Exec Sec/HMAB
  - 1 - Recorder/MMAB

23-3474  
CPF

REPORT OF HONOR AND MERIT AWARDS BOARD						DATE
						14 August 1973
The Honor and Merit Awards Board having considered a recommendation that:						
SERIAL OR ID NO. 057303	NAME (Last, First-Middle) GOODPASTURE, Ann L.	BIRTHYEAR 1918	SEX F	TYPE EMPLOYEE Staff		
OFFICE OF ASSIGNMENT DO/CI	SO D	SCHEDULE GS	GRADE 13	STATION		
TO BE AWARDED						
Career Intelligence Medal						
<input type="checkbox"/> FOR HEROIC ACTION ON						
<input checked="" type="checkbox"/> FOR MERITORIOUS SERVICE OR ACHIEVEMENT DURING THE PERIOD September 1947 - June 1973						
<input checked="" type="checkbox"/> RECOMMENDS APPROVAL <input type="checkbox"/> DOES NOT RECOMMEND APPROVAL						
<input type="checkbox"/> RECOMMENDS AWARD OF						
UNCLASSIFIED CITATION						
<p>Miss Ann L. Goodpasture is hereby awarded the Career Intelligence Medal in recognition of her exceptional achievement for more than 25 years. A charter member of the Central Intelligence Agency, Miss Goodpasture has excelled as an operations officer both overseas and in headquarters. Her performance throughout her career has been outstanding and marked by a high degree of competence and unusual dedication to duty. Miss Goodpasture has contributed substantially to the mission of the Agency, reflecting credit on her and the Federal service.</p>						
REMARKS						
(Recommendation approved by ADD/O on 2 August 1973)						
APPROVED			SIGNATURE			
/s/ W. E. Colby DIRECTOR OF CENTRAL INTELLIGENCE 4 SEP 1973 DATE			/s/ John F. Blake			
			TYPED NAME OF CHAIRMAN, HONOR AND MERIT AWARDS BOARD John F. Blake			
			SIGNATURE			
			/s/ R. L. Austin, Jr.			
			TYPED NAME OF RECOMMENDING OFFICER			
			R. L. Austin, Jr.			

**SECRET**  
(When Filled In)

OFF

RECOMMENDATION FOR HONOR OR MERIT AWARD (Submit in triplicate - see HR 20-37)				
<b>SECTION A PERSONAL DATA</b>				
1. EMP. SER. NO. 057303	2. NAME OF PERSON RECOMMENDED (Last, First, Middle) Goodpasture, Ann Lorene		3. POSITION TITLE Ops Officer	4. GRADE GS-13
5. OFFICE OF ASSIGNMENT DDO/CI Staff	7. OFFICE EXT. (If any)	8. STATION <input checked="" type="checkbox"/> HEADQUARTERS <input type="checkbox"/> FIELD (Specify location)		
9. HOME ADDRESS (No., St., City, State, ZIP Code) 4200 Cathedral Ave., Wash., D.C.		10. HOME PHONE 244-1657	11. CITIZENSHIP AND HOW ACQUIRED U.S. Birth	
12. RECOMMENDED AWARD Career Intelligence Medal		13. IF RETIRING, DATE OF RETIREMENT 23 October 1973	14. POSTNUMOUS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15. NAME OF NEXT OF KIN C. H. Goodpasture	16. RELATIONSHIP Father	17. HOME ADDRESS (No., St., City, State, ZIP Code) Livingston, Tenn.	18. HOME PHONE	
<b>SECTION B RECOMMENDATION FOR AWARD FOR HEROIC ACTION OR ACCEPTANCE OF HAZARD</b>				
19. WERE YOU AN EYEWITNESS TO THE ACT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
PERSONNEL IN IMMEDIATE VICINITY OR WHO ASSISTED IN ACT OR SHARED IN SAME HAZARD:				
20. FULL NAME	21. ORGN. TITLE	22. GRADE	23. OFFICE OF ASSIGNMENT	
LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN ACT:				
24. FULL NAME	25. AWARD RECOMMENDED			
CONDITIONS UNDER WHICH ACT WAS PERFORMED:				
26. LOCATION	27. INCLUSIVE DATES	28. TIME OF DAY		
29. PREVAILING GEOGRAPHIC CONDITIONS AND OBSTACLES ENCOUNTERED				
30. DATES FOR WHICH AWARD RECOMMENDED		31. ASSIGNMENT COMPLETED		32. NOW IN SAME OR RELATED ASSIGNMENT
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>SECTION C RECOMMENDATION FOR AWARD FOR ACHIEVEMENT, SERVICE, OR PERFORMANCE</b>				
33. DO YOU HAVE PERSONAL KNOWLEDGE OF THE SERVICE OR PERFORMANCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
34. OFFICIAL ASSIGNMENT OF PERSON RECOMMENDED AT TIME OF SERVICE OR PERFORMANCE Headquarters				
35. COMPONENT OR STATION (Designation and location) DDO/WH				
36. DUTIES AND RESPONSIBILITIES OF ASSIGNED POSITION Operations officer completing 30 years of service in the Agency and its predecessor organizations.				
37. INCLUSIVE DATES FOR WHICH RECOMMENDED 1947 - 1973		38. ASSIGNMENT COMPLETED		39. NOW IN SAME OR RELATED ASSIGNMENT
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
PERSONNEL WHO ASSISTED OR CONTRIBUTED SUBSTANTIALLY TO THE SERVICE OR PERFORMANCE:				
40. FULL NAME Mr. Winfield Scott	41. ORGN. TITLE	42. GRADE GS-18	43. OFFICE OF ASSIGNMENT Mexico City	
LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN THE PERFORMANCE				
44. FULL NAME Mr. Winfield Scott	45. TYPE OF AWARD			

**SECRET**  
(When Filled In)

*off*

**SECTION D NARRATIVE DESCRIPTION**

**Award for Heroic Action or Acceptance of Honor:** Was act voluntary? Describe why act was outstanding, and if it was more than normally expected. Explain, why, and how. If an aerial or marine operation, describe type and position of craft, crew position of individual, and all unusual circumstances. Indicate results of the act. Enclose unclassified citation.

**Award for Achievement, Service, or Performance:** State character of service during period for which recommended. (Give complete description of administrative, technical, or professional duties and responsibilities if not covered in Section C, include dates of assignment and relief.) What did the individual do that merits the award? Why was this outstanding when compared to others of like grade and experience in similar positions or circumstances? If appropriate, include production records and assistance rendered by other persons or units. What obstacles were encountered or overcome? Indicate results of achievement, service, or performance. Include reference to Fitness Reports, Letters of Commendation, or other documentation already on file which supports this recommendation. Enclose unclassified citation.

Miss Goodpasture has been on sick leave since July 1972 awaiting medical retirement in October 1973. She is a charter member of the Agency, having entered on duty from OSS and its successor organizations. Her career is highly distinguished by virtue of consistently strong to outstanding performance, all of which is fully documented.

In addition to several staff and desk assignments, Miss Goodpasture served in support of the successful coup against the communist government in Guatemala in 1954 and completed tours of duty in Monterrey and Mexico City. Undoubtedly, the high point of her career occurred during her service in Mexico City from 1957 through 1970, where she served as a "trouble-shooting" case officer for the incomparable Winfield Scott (deceased), who was then the Chief of Station. Mr. Scott, a stern taskmaster, described Miss Goodpasture over these years as "intelligent, hard-working, conscientious, versatile, valuable and unquestionably one of the most competent CI/CE officers he ever had the privilege of working with." Miss Goodpasture's fitness reports were totally consistent with this appraisal, and were characterized by outstanding ratings. In her final assignment prior to acute medical problems, she worked for the CI Staff (October 1970-October 1971), earning the following remarks from her supervisor: "...I venture to rate her overall performance, thirty years of it, as Outstanding. Ann is one of the tough warp-threads on which this organization is woven, and when she retires the fabric of this organization will be weakened." The reviewing official agreed with the above and recorded his hope that Miss Goodpasture get the official Agency recognition she so richly deserves for the many years she has made substantive

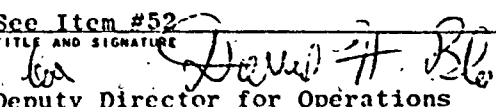
CONTINUED ON ATTACHED SHEET

46. ENCLOSURES (List individually) IF ORIGINATOR IS NOT AN EYEWITNESS OR DOES NOT HAVE PERSONAL KNOWLEDGE OF THE ACT OR PERFORMANCE. ATTACH AFFIDAVITS OF EYEWITNESS OR INDIVIDUALS HAVING PERSONAL KNOWLEDGE OF THE FACTS.

1. PROPOSED CITATION
- 2.
- 3.

47. RECOMMENDATION INITIATED BY  David A. Phillips	48. TITLE AND SIGNATURE OF EMPLOYEE MAKING RECOMMENDATION Chief, WH Division	49. DATE 21 JUN 1973
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**SECTION E RECOMMENDATION FORWARDED THROUGH OFFICIALS CONCERNED FOR THEIR INFORMATION**

50. HEAD OF <u>D</u> CAREER SERVICE (Career service of nominee)	TITLE AND SIGNATURE See Item #52	DATE
51. DEPUTY DIRECTOR OF CAREER SERVICE	TITLE AND SIGNATURE See Item #52	DATE
52. DEPUTY DIRECTOR OF OPERATING COMPONENT	TITLE AND SIGNATURE  Deputy Director for Operations	DATE 2 JUN 1973

**SECRET**

11/11/72 C-Nor Money

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED			
1. SERIAL NUMBER 057303				NAME (Last-First-Middle) GOODPASTURE, Ann L.					
3. NATURE OF PERSONNEL ACTION Extended Sick Leave Disability Retirement				4. EFFECTIVE DATE REQUESTED MONTH: 10 DAY: 23 YEAR: 72		5. CATEGORY OF EMPLOYMENT Regular			
6. FUNDS V TO V CP TO V		V TO CP CP TO CP		7. FINANCIAL ANALYSIS NO. CHARGEABLE 5227-0183-0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/CI Staff Development Complement				10. LOCATION OF OFFICIAL STATION Washington, D.C.					
11. POSITION TITLE Ops Officer				12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 7		17. SALARY OR RATE \$ 22,487			
18. REMARKS  X Other  NTE: 10-23-73									
19. SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED 10/10/72		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>David M. ...</i>		DATE SIGNED 10/17/72		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 31	20. EMPLOY CODE 40	21. OFFICE CODING NUMERIC: 51997 ALPHABETIC: CI		22. STATION CODE 75013	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH MO. DA. YR. 11 28 18	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. NTE EXPIRES MO. DA. YR. 10 23 73	29. SPECIAL REFERENCE SL	30. RETIREMENT DATA 1-OSC 2-ORCH 3-FICA 4-NONE		31. SEPARATION DATA CODE	32. CORRECTION-CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REG. NO.		34. SEX
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. SERV COMP. DATE MO. DA. YR.	37. LONG. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CAR/RESY PROV. TEMP	39. FEGLI/HEALTH INSURANCE CODE CODE 0-WAIVER 1-REG 2-REG/OPT 3-IRRELENTIBLE		40. SOCIAL SECURITY NO.		HEALTH INS. CODE
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE EXEMP.		1-YES 2-NO
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i>				46. O P APPROVAL <i>[Signature]</i>		DATE APPROVED 10/17/72			

FORM 1152 USE PREVIOUS EDITION

SECRET  
19 OCT 1972

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

(4)



SECRET

(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE \_\_\_\_\_ FOR THE FOLLOWING REASON:  
(Date)

05-16 10:57 AM '72

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

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

INSTRUCTIONS

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

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

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

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

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

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

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

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

SECRET

SECRET

(When Filled In)

7/25/72 <b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED 12 July 1972	
1. SERIAL NUMBER 057303		2. NAME (Last-First-Middle) GOODPASTURE, Ann L.			
3. NATURE OF PERSONNEL ACTION Reassignment ← TRANSFER TO X-TRANSFER (FUND)			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 23 72		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS XX V TO V CP TO V		7. FINANCIAL ANALYSIS NO. CHARGEABLE 3227-0183		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/CI Staff Development Complement			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Ops Officer		12. POSITION NUMBER 9997	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 87	17. SALARY OR RATE 22,187 <del>\$ 21,862</del>	
18. REMARKS FROM: Pos. No. 0073 NOTE: Subject will be on CIARDS Disability Retirement until 23 October 1973 cc: Finance CIA W/P ccs/ops/s					
DATE SIGNED 7/12/72		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Jay R. Newman		DATE SIGNED 13 July 1972	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 16	20. EMPLOY CODE 18	21. OFFICE CODING NUMERIC ALPHABETIC 316971E		22. STATION CODE 75013	23. INTEGRAL CODE
24. MOVEMENT CODE 1		25. DATE OF BIRTH MO. DA. YR. 11 28 18		26. DATE OF GRADE MO. DA. YR.	
27. DATE OF LEI MO. DA. YR.		28. NTE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE	30. RETIREMENT DATA
31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REQ. NO.	
34. VET PREFERENCE CODE 0-NO PREFERENCE 1-5 PF 2-10 PF		35. SERV COMP DATE MO. DA. YR.	36. LONG. COMP DATE MO. DA. YR.	37. CAREER CATEGORY CAR/RESY PROV/TIMP	
38. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		39. FEGLI HEALTH INSURANCE CODE CODE HEALTH INS. CODE 0-WAIVER 1-REG 2-REG/OPT 3-UNRELIABLE		40. SOCIAL SECURITY NO.	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT CODE	43. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44. STATE CODE
45. POSITION CONTROL CERTIFICATION DR			46. OP APPROVAL 07-20-72		DATE APPROVED 7/20/72

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET  
(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE \_\_\_\_\_ FOR THE FOLLOWING REASON:

(Date)

JUL 26 JUL 14 9 33 AM '72

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

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

INSTRUCTIONS

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

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

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

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

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

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

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

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

SECRET

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF		DATE	FILE NO.
TO: (Check)	CHIEF, CONTROL DIVISION	SS NUMBER	
	CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER	
	CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER	
ATTN:		<input type="checkbox"/>	ESTABLISHED
REF:		<input type="checkbox"/>	DISCONTINUED
SUBJECT		UNIT	

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

ESTABLISHMENT OF	BLOCK RECORDS	CANCELLATION OF EFFECTIVE DATE:	UNBLOCK RECORDS
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE		SUBMIT FORM 3254 _____ W-2 TO BE ISSUED. (HNB 20-11)	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TOY _____ OTHER (Specify)		SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)	
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)		EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>	
SUBMIT FORM 3254 _____ W-2 TO BE ISSUED. (HNB 20-11)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
SUBMIT FORM 1323 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-2*)		SUBMIT FORM 2688 FOR HOSPITALIZATION CARD	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-2*)		DO NOT WRITE IN THIS BLOCK	
EAA. CATEGORY I <input type="checkbox"/>	CATEGORY II <input type="checkbox"/>		
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY			
<p>1. [Illegible text]</p> <p>2. [Illegible text]</p> <p>3. [Illegible text]</p> <p>4. [Illegible text]</p> <p>5. [Illegible text]</p> <p>6. [Illegible text]</p>			
DISTRIBUTION: COPY 1 - CD			
COPY 2 - OPERATING COMPONENT			
COPY 3 - O/OS			
COPY 4 - OL/TELEVC			
COPY 5 - OF			
COPY 6 - CCS - FILE			

USE PREVIOUS EDITION

SECRET

(13-20-43)

EXPERIENCE

Employed by Central Intelligence Agency and World War II predecessor agencies from 1942 - 1972. Served as clerk, administrative assistant, photo technician, research analyst, and intelligence officer. Assignments were in Washington, D.C., the Far East, and Latin America.

SECRET  
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE

Name (Last-First-Middle)

GOODPASTURE, ANN

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

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

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

Signature of Employee

Ann L. Goodpasture

Date Signed

7 June 72

Address (Street, City, State, Zip Code)

4200 CATHEDRAL AVENUE #412A

Correspondence

Open

Covert

WASH. D.C. 20016

SECRET

ADMINISTRATIVE  
INTERNAL USE ONLY

12 JUN 1972

MEMORANDUM FOR : Miss Ann L. Goodpasture  
THROUGH : Head of CS Career Service  
SUBJECT : Notification of Approval of Disability Retirement

1. This is to inform you that the Director of Personnel has approved your request for disability retirement under the CIA Retirement and Disability System. On the basis of medical evidence, the Director of Personnel has determined that your disability is of a permanent nature; therefore, no further medical review of your case will be required.

2. Your retirement will become effective 23 October 1973, the expiration date of your accrued sick leave and excess annual leave. You may be assured that every effort will be made to expedite delivery of your first check following completion of the administrative details required to effect your retirement.

/s/ B. DeFelice  
B. DeFelice  
Deputy Director of Personnel  
for Special Programs

Distribution:

- 0 - Addressee
- 1 - OMS
- 1 - CS Career Service
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB

ADMINISTRATIVE  
at/3257 (10 JUN 1972)  
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CONFIDENTIAL

5 JUN 1972

**MEMORANDUM FOR THE RECORD**

**SUBJECT : Request for Disability Retirement Under the Provisions of the CIA Retirement and Disability System - Miss Ann L. Goodpasture**

Based upon my review and evaluation of the evidence listed below, I hereby approve the request of Miss Ann L. Goodpasture for disability retirement under the provisions of the CIA Retirement and Disability System and, on the basis of the medical evidence submitted in this case, I have determined that the disability of Miss Goodpasture is permanent:

- a. Supervisor's statement dated 14 March 1972 submitted in accordance with the provisions of paragraph h. (3) of HR 20-50.
- b. Written report of the Board of Medical Examiners dated 25 May 1972 as submitted by the Chairman of that Board in accordance with the provisions of paragraph h. (4)(c) of HR 20-50.

/s/Harry B. Fisher

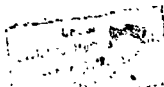
**Harry B. Fisher**  
Director of Personnel

**Distribution:**

- 0 - Return to ROB
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/ [ ] jat/3257 (31 May 1972)

CONFIDENTIAL





SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED		
1 SERIAL NUMBER <b>057303</b>		2 NAME (Last-First-Middle) <b>GOODPASTURE, ANN L.</b>								23 June 1970		
3 NATURE OF PERSONNEL ACTION <b>Reassignment</b>					4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>10 15 70</b>			5 CATEGORY OF EMPLOYMENT <b>Regular</b>				
6 FUNCS <input checked="" type="checkbox"/> V TO V <input checked="" type="checkbox"/> O TO V		<input type="checkbox"/> V TO CF <input type="checkbox"/> O TO CF		7 FINANCIAL ANALYSIS NO CHARGEABLE <b>12-1-70-0170</b> <del>003-0170</del>		8 LEGAL AUTHORITY (Completed by Office of Personnel)						
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/CI Staff Operations Group WE Branch</b>					10 LOCATION OF OFFICIAL STATION <b>Washington, D.C.</b>							
11 POSITION TITLE <b>Ops Officer</b>			12 POSITION NUMBER <b>0073</b>		13 CAREER SERVICE DESIGNATION <b>D</b>							
14 CLASSIFICATION SCHEDULE (GS, E.B., etc.) <b>GS</b>			15 OCCUPATIONAL SERIES <b>0136.01</b>		16 GRADE AND STEP <b>13 6</b>		17 SALARY OR RATE <b>\$ 19,555</b>					
18 REMARKS <b>FROM: DDP/NH/Dev. Comp/Pos. No. 9997</b>  <b>Coordination: <u>Henry L. Berthold</u> C/NH/Personnel</b>  <b>CC: Finance and Security</b> <b>Home Base: WH</b>  <b>Security Approval Granted by Pers. SO/OS/30 DB 10/21</b>												
19A SIGNATURE OF REQUESTING OFFICER <b>CI STAFF</b>				DATE SIGNED <b>6-23-70</b>		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>			DATE SIGNED <b>7/1/70</b>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19 ACTION CODE <b>37</b>	20 EMPLOY CODE <b>10</b>	21 OFFICE CODING NUMERIC ALPHABETIC <b>31400 CI</b>		22 STATION CODE <b>15013</b>	23 INTEGREE CODE	24 HQ/RTS CODE <b>1</b>	25 DATE OF BIRTH MO. DA. YR. <b>11/28/14</b>		26 DATE OF GRADE MO. DA. YR.		27 DATE OF LEI MO. DA. YR.	
28 WTE EXPIRES MO. DA. YR.		29 SPECIAL REFERENCE 1-ESC 2-OPRA 3-FICA 4-REUSE		30 RETIREMENT DATA CODE		31 SEPARATION DATA CODE		32 CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.		33 SECURITY REQ NO		34 SEX
35 VET PREFERENCE CODE 0-None 1-5 PT 2-10 PT		36 SERV COMP DATE MO. DA. YR.		37 LONG COMP DATE MO. DA. YR.		38 CAREER CATEGORY CAR/RESV PROV. TEMP		39 FEGLI HEALTH INSURANCE CODE CODE 0-WAIVER 1-YES HEALTH INS. CODE		40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42 LEAVE CAT. CODE		43 FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NO			44 STATE TAX DATA FORM EXECUTED CODE NO. TAX STATE CODE 1-YES 2-NO			
45. POSITION CONTROL CERTIFICATION <b>1A-14-70 AH</b>					46 OP APPROVAL <b>FROM: WH</b> <i>[Signature]</i>			DATE APPROVED <b>10-20-70</b>				

51 MAR 1972

**MEMORANDUM FOR : Chairman, Board of Medical Examiners**

**SUBJECT : Request for Medical Evaluation -  
Miss Ann L. Goodpasture**

1. Miss Ann L. Goodpasture, a participant in the CIA Retirement and Disability System, has applied for disability retirement under the provisions of Section 231 of Public Law 88-643, Central Intelligence Agency Retirement Act of 1964 for Certain Employees. It is requested that a medical examination be arranged for Miss Goodpasture and that a written report of the Board of Medical Examiners as prescribed in paragraph h (4) of HR 20-50 be submitted to this office.

2. Miss Goodpasture plans to remain on duty pending a decision on her application for retirement.

3. Attached is a copy of the Supervisor's Statement, a copy of the Application for Disability Retirement, and a private physician's statement.

**Harry B. Fisher  
Director of Personnel**

**Attachments:**

- a. Supervisor's Statement
- b. Application
- c. Private Physician's Statement

**Distribution:**

- 0 & 1 - Addressee
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/ [ ] :jat/3257 (28 March 19...)

ADMINISTRATIVE  
INTERNAL USE ONLY

8 MAR 1972

MEMORANDUM FOR : Miss Ann L. Goodpasture  
THROUGH : Administrative Officer, CI Staff  
SUBJECT : Application to Purchase Service Credit

1. This is to advise you that your application to purchase service credit under the CIA Retirement and Disability System has been processed. The period of your service which is not covered by retirement deductions and the amount due to cover this period are as follows:

<u>Redeposit Period</u>	<u>Total Amount Due</u>
11 Mar 1942 - 8 Sep 1943	\$241.00

2. Postponing payment will cause the amount due to increase because of additional interest at the rate of 3 per cent compounded annually. However, so long as the amount is not paid, you have the use of this money for other purposes. You may postpone payment until you retire.

3. If the redeposit is not made you will receive no credit in the computation of annuity for the period of service covered by the refund. This usually results in a sharp reduction in the amount of your annuity.

4. If you wish to make payment for the redeposit period, please make your check payable to the Treasurer of the United States and forward it to the Chief, Retirement Operations Branch, 205 Magazine Building. If you prefer, you may make installment payments or arrange for bi-weekly payroll allotments of \$25.00 or multiples thereof. A receipt showing a statement of your account will be sent to you acknowledging each installment payment.

FOR THE DIRECTOR OF PERSONNEL

RONALD GAGE

Ronald Gage  
Acting Chief, Retirement Affairs Division

Distribution:

0 - Addressee  
1 - D/Pers  
1 - OPF  
1 - ROB Soft File  
1 - ROB Reader

ADMINISTRATIVE  
INTERNAL USE ONLY

OP/RAD/ROB/[ ]:jat/3257. (7 March 1972)

SECRET

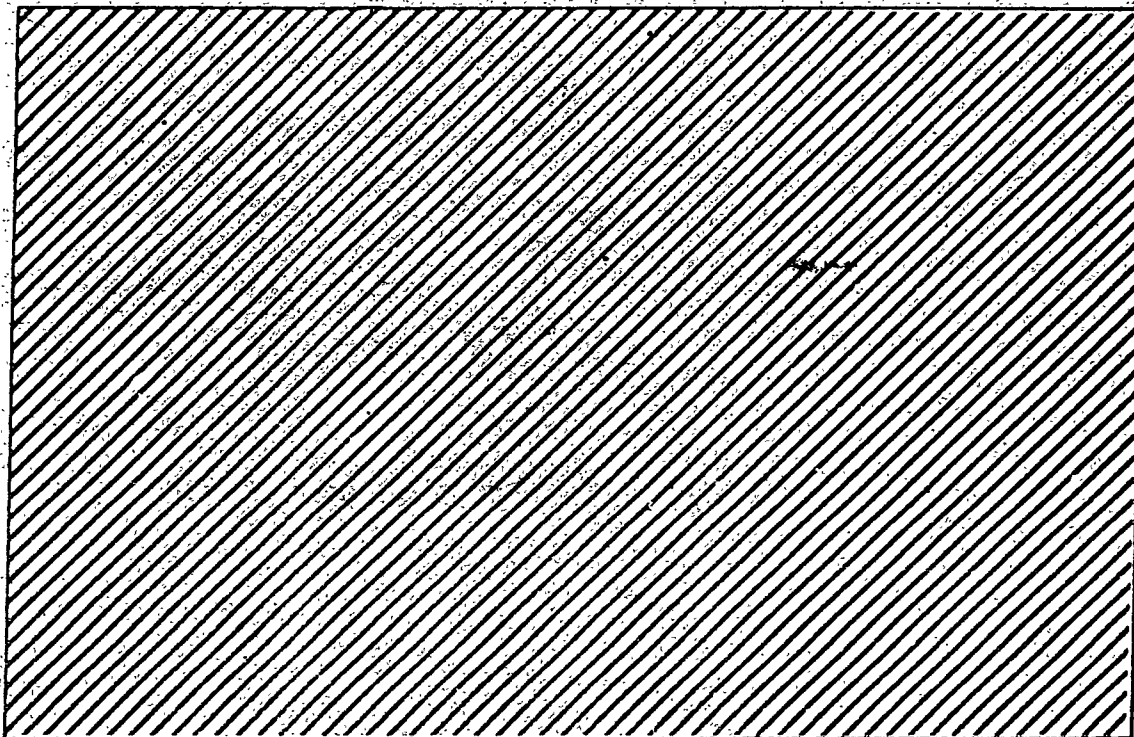
307107  
Park 4/5/68

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1 SERIAL NUMBER						18 NOVEMBER 1968	
2 NAME (Last-First-Middle)							
057303 GOODPASTURE, ANN L.							
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT	
REASSIGNMENT				MONTHS DAY YEAR		REGULAR	
				12 01 68			
6 FUNDS			7 FINANCIAL ANALYSIS NO. CHARGEABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel)		
V TO V			9135 0623				
CF TO V			XXX		CF TO CF		
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION			
DDP/WH DEVELOPMENT COMPLEMENT				WASHINGTON, D. C.			
11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION	
OPS OFFICER				9997		D	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE	
GS		0136.01		13 6		\$ 16809	
18 REMARKS							
FROM: DDP/WH/FOREIGN FIELD/BRANCH 1/MEXICO CITY/POS.# 0418							
1 - Finance							
<p><i>Posting Retired 12 NOV 1968</i></p> <p><i>Benjamin 1965. ... has been granted for request.</i></p> <p><i>ST/SPS 31 NOV 68</i></p>							
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
Henry L. Berthold				14 Nov 68			
C/WH/Personnel							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING		22 STATION CODE	
157 18		51227		LDH		25013	
23 INTEGRITY CODE		24 POSTS CODE		25 DATE OF BIRTH		26 DATE OF GRADE	
1		1		11 28 18			
27 DATE OF LEI		28 SPECIAL REFERENCE		29 RETIREMENT DATA		30 SEPARATION DATA CODE	
31 VET PREFERENCE		32 SERV COMP DATE		33 LONG COMP DATE		34 EARLIER CATEGORY	
35 FEEL HEALTH INSURANCE		36 SOCIAL SECURITY NO		37 FEDERAL TAX DATA		38 STATE TAX DATA	
39 PREVIOUS CIVILIAN GOVERNMENT SERVICE		40 LEAVE CAT CODE		41 FORM EXECUTED		42 STATE TAX DATA	
43 POSITION CONTROL CERTIFICATION		44 OP APPROVAL		45 DATE APPROVED			
		11-21-68		11-25-68			

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET  
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
Goodpasture, Ann	Self	69-0577

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on 13 September 1968

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF BSD REPRESENTATIVE
24 January 1969	[Signature]

**NOTICE OF OFFICIAL DISABILITY CLAIM FILE**

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item 5-1)	NAME OF SUPERVISOR (true)	DATE (from item 5-2)	
Ann L. Goodpasture	4/24/67	Winston Scott	4/24/67	
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:		
5/4/67	HMMT-7821			
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
28 Nov 1918		GS-13 Ops Officer	Mexico City	LNGOLD
6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
5 May 1957	1 Sept 1967	10 Sept 1967	31 October 1967	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
None				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
None				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)				
Case Officer for operational support and liaison projects sponsored by high-level contacts of COS.				
Liaison with other agencies on CE cases.				
Special projects assigned by COS				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
None				

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

CE/CI Officer for Mexico Station

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

- EXTEND TOUR \_\_\_\_\_ MONTHS AT CURRENT STATION TO \_\_\_\_\_ (DATE)
- BE ASSIGNED TO HQQTRS FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_
- BE ASSIGNED TO ANOTHER FIELD STATION; INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_
- RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Chief of Station, Mexico City strongly recommends that this officer be allowed to return to Mexico City for another tour after home leave.

This officer is a very important and essential member of the Mexico City Station Staff; and this officer's services are need very much by this Station.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

WH Division recommends that Miss Goodpasture be approved for another tour in Mexico City.

DATE 5/17 TITLE C/WH/Pers SIGNATURE Robert D. Cashman

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

Returned second tour

15. EMPLOYEE NOTIFIED BY DISPATCH NO. HQ/WH/2250 DATED: 29 May 67

CABLE NO. \_\_\_\_\_ DATED: \_\_\_\_\_

CAREER SERVICE REPRESENTATIVE: \_\_\_\_\_ (SIGNATURE)

DATE 29 May 1967

SECRET

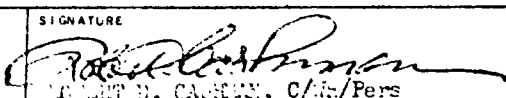
SECRET

Received in CSNO 28 Aug 63

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY			
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true) Ann L. GIBASTO	DATE (from item-1) 18 June 1963	NAME OF SUPERVISOR (true) Clinton H. Scott	DATE (from item-2) 18 June 1963
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES, AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW: R. Farina, WH/Personnel			DATE 28 August 1963
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH 28 November 1918	2. GRADE GS-13	3. CURRENT POSITION TITLE Operations Officer - CE	
4. SERVICE DESIGNATION (if known) [REDACTED]	5. CURRENT STATION OR FIELD BASE Mexico City	7A. EXPECTED RATE OF DEPARTURE FROM FIELD	
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR None		7B. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS	
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<ol style="list-style-type: none"> <li>Liaison with the Legal Attache. (requests for traces and investigations).</li> <li>Case Officer for miscellaneous CE operations such as short term physical or technical surveillances.</li> <li>Alternate contact with [REDACTED] Inside officer responsible for processing take from three anti-Soviet photo surveillance bases.</li> <li>Alternate for station photographer, flaps and seals.</li> <li>Prepares briefing papers and other materials used by COS for special briefing of representatives from Headquarters or other U.S. Government and private agencies.</li> <li>Case Officer handling [REDACTED] who supervises the intercept center for a semi-official telephone tap operation covering 30 lines simultaneously.</li> </ol>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
8. (continued)			
<ol style="list-style-type: none"> <li>Alternate contact for [REDACTED] who supervises a semi-official support project.</li> <li>Pending assignment additional SR ops officer, case officer for [REDACTED] unilateral outside translator.</li> </ol>			
9. For next assignment, have no particular preference.			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
To be determined by Headquarters or Chief of Station, based on next assignment.			



57703

FORM 1451 RECORD OF OVERSEAS SERVICE	NAME OF EMPLOYEE	EMPLOYEE SERIAL NO.	COMPLETED BY EMPLOYEE		TELEPHONE EXT.	<b>SECRET</b> (WHEN FILLED IN)				
			YES	NO						
	DO NOT FOLD, STAPLE, SPINDLE, OR MUTILATE									
INSTRUCTIONS  THIS FORM MUST BE RETURNED WHETHER YOU HAVE HAD OVERSEAS SERVICE OR NOT.  PLEASE READ CAREFULLY INSTRUCTIONS ON ACCOMPANYING CARD, THEN FILL OUT THIS FORM AS ACCURATELY AS POSSIBLE.	DO NOT WRITE IN COLUMN	WHERE SERVICE WAS PERFORMED	PERIOD OF SERVICE	DATES		SERVICE AS MILITARY - 1 MILITARY - 2 CIVILIAN - 3 OTHER - 4	RESPONSIBLE U.S. GOVT. DEPT. OR AGENCY	DO NOT WRITE IN COLUMN		
	YES		ENTER NO.	FROM	TO			YES		
				MO. YR.	MO. YR.					
				32 34 36 38 40 42 44 46 48 50 52 54 56 58 60	32 34 36 38 40 42 44 46 48 50 52 54 56 58 60					
		330 India/Ceylon	1	08	47	08	45	1	CIA	100
		145 China	1	08	46	03	46	1	"	100
		330	1	02	47	12	48	1	"	100
		450 Mexico	1	07	51	10	53	1	"	100
		300 Guatemala	2	04	54	05	54	1	"	100
		450 Mexico	1	05	57	07	58	1	"	100
IF ADDITIONAL SPACE IS NEEDED, CHECK HERE <input type="checkbox"/> AND ASK YOUR ADMINISTRATIVE OFFICER FOR SUPPLEMENTAL CARDS										
<b>SECRET</b>										
TO BE COMPLETED BY SUPERVISOR AT FIELD STATION										
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:										
14. SIGNATURE: COMPLETE ITEM NO. 9-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.										
TO BE COMPLETED BY APPROPRIATE PERSONNEL OFFICER AT HEADQUARTERS:										
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:										
WH Division recommends that Subject return to Mexico City for another tour of duty.										
16. NAME OF PERSONNEL OFFICER					SIGNATURE					
ROBERT D. Cashman										
DATE 26 August 1963					ROBERT D. CASHMAN, C/As/Pers					
FOR USE OF CAREER SERVICE										
17. EMPLOYEE REASSIGNMENT <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED					18. REFERENCE DISPATCH NO. _____ CABLE NO. _____					
19. TYPED OR PRINTED NAME					20. SIGNATURE					
21. TITLE					22. DATE					
Personnel Officer/CSPO					20 Sep 63					
23. COMMENTS										
CS Personnel Management Committee approved retention of Miss Goodpasture at Mexico City through January 1965, followed by return to Hq, PCS.										

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1)	NAME OF SUPERVISOR (true)	DATE (from item 2)
GOODPASTURE, Ann L.	24 Jan 61	Winston M. Scott	24 Jan 61
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
A. Washinko, W/Pers Ofcr			3 Feb 61
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
28 November 1918	GS-12	Intelligence Officer	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		7A. EXPECTED DATE OF DEPARTURE FROM FIELD
KUTUBE	Mexico City		August 1961
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7B. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>Case Officer - CE Operations. Operational support for five anti-soviet, CE, support-type and technical projects. Flaps and seals, and photo for special projects when other techs not available. Other duties assigned by OOS.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
Continuation of above.			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
Believe no additional training needed unless decided change in duties.			

SECRET

SECRET

**D. PREFERENCE FOR NEXT ASSIGNMENT (continued)**

**C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:**

RETURN TO MY CURRENT STATION.

BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:  
 1ST. CHOICE WH 2ND. CHOICE \_\_\_\_\_ 3RD. CHOICE \_\_\_\_\_

BE ASSIGNED TO ANOTHER FIELD STATION. WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:  
 1ST. CHOICE WH 2ND. CHOICE WH 3RD. CHOICE WH

---

**10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?** INDICATE NUMBER OF WORK DAYS 45

---

**11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:**  
 None

---

**12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.**  
 TO BE COMPLETED BY SUPERVISOR AT FIELD STATION

---

**13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:**

It is strongly urged by COS that this extremely valuable and all-round officer be returned to the Mexico City Station.

RIGGS would be one of the most difficult persons to replace in the Mexico City Station because of the variety of types of work he does (and all well and efficiently) and because of his detailed knowledge of CE operations, Soviet personalities and targets, and general capabilities.

---

**14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.**  
 TO BE COMPLETED BY APPROPRIATE PERSONNEL OFFICER AT HEADQUARTERS

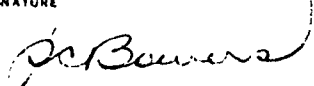
---

**15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:**

Concur in COS recommendation

*Ann L. Hynes - 1755* 28 FEB 1961

---

<b>16. NAME OF PERSONNEL OFFICER</b>  P.C. BOWERS, DATE 3 Feb 61	<b>SIGNATURE</b>  
<b>FOR USE OF CAREER SERVICE</b>	
<b>17. EMPLOYEE</b> <input type="checkbox"/> <b>HAS</b> <input type="checkbox"/> <b>HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT</b>	<b>18. REFERENCE</b> DISPATCH NO. _____ CABLE NO. _____
<b>19. TYPED OR PRINTED NAME</b>	<b>20. SIGNATURE</b>
<b>21. TITLE</b>	<b>22. DATE</b>
<b>23. COMMENTS</b>	

SECRET

**DISPATCH**

CLASSIFICATION

**S E C R E T / R Y B A T**

PROCESSING ACTION

Chief, WH Division

XX

MARKED FOR INDEXING

NO INDEXING REQUIRED

ONLY QUALIFIED DESK  
CAN JUDGE INDEXING

TO

FROM

Chief of Station, Mexico City

MICROFILM

SUBJECT

Recommendation for Promotion -- ~~██████████~~

*Ann. Goodpasture*  
*Not approved*  
*ck*  
*25 1967*

ACTION REQUIRED - REFERENCES

Reference: A. HMMT-7514  
B. HMMT-6090

Action : See paragraph 1.

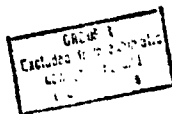
1. It is strongly recommended that ~~██████████~~ be promoted to GS-14.

2. This officer has performed outstandingly at this Station for many years; he is a dedicated hard-working employee who is conscientious about and careful with WOFAC funds. This officer has for years been involved in managerial capacities in some of the most sensitive and highly successful operations run by this Station -- one of which has been cited by Headquarters as a model of its type and the most successfully productive (technical) operation in WOFAC.

3. ~~██████████~~ is an officer of outstanding capabilities of a wide range and variety.

4. All these attributes, performance, time in grade, and service time with WOFAC should combine to cause the promotion of this deserving officer.

*Willard C. Curtis*  
Willard C. CURTIS



Distribution:  
✓ 3 - WH

REFERENCE TO

DISPATCH SYMBOL AND NUMBER

DATE

HMMT-7559

8 February 1967

CLASSIFICATION

FILE NUMBER

**S E C R E T / R Y B A T**

<b>DISPATCH</b>		CLASSIFICATION <b>SECRET/RYBAT</b>	PROCESSING ACTION
TO	Chief, WH Division	<b>XX</b>	MARKED FOR INDEXING
INFO			NO INDEXING REQUIRED
FROM	Chief of Station, Mexico City		ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT	Recommendations for Promotion		
ACTION REQUIRED - REFERENCES			
<p>Reference: A. WH Field Memorandum No. 2072, 28 January 1966          B. CSI-F-20-18, 5 May 1961          C. HMMT-7514, 24 January 1967          D. HMMT-7558, 8 February 1967</p> <p>1. COS, Mexico City, has recommended that both <del>_____</del> <i>Ann Goodpasture</i> and <del>_____</del> of this Station be considered for promotion from GS-13 to GS-14 (references C and D).</p> <p>2. These two officers are ranked in the following order in the Station's recommendations for promotion:</p> <p>a. <del>_____</del> <i>ANN Goodpasture</i>          b. <del>_____</del> <i>Benjamin Peppen</i></p> <p style="text-align: right;"><i>Willard C. Curtis</i>          WILLARD C. CURTIS</p>			
Distribution: 3 - WH			
REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE	
	HMMT-7617	27 February 1967	
CLASSIFICATION		FILE NUMBER	
<b>SECRET/RYBAT</b>			

**SECRET**  
(When Filled In)

23 February 1966

*Mr. L. Goodpasture*

MEMORANDUM FOR: ~~████████████████████~~

THROUGH : Chief of Station, Mexico City

SUBJECT : Notification of Designation as a Participant in the Organization Retirement and Disability System

REFERENCE : Book Dispatch 5096, dated 12 August 1965

Recent correspondence on the above subject informed you that I had determined that you met the criteria specified in the applicable regulation for designation as a participant in the Organization Retirement and Disability System. On the basis of this determination and your recently executed election to remain in the System, your designation as a participant was made effective 13 February 1966.



**SECRET**

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

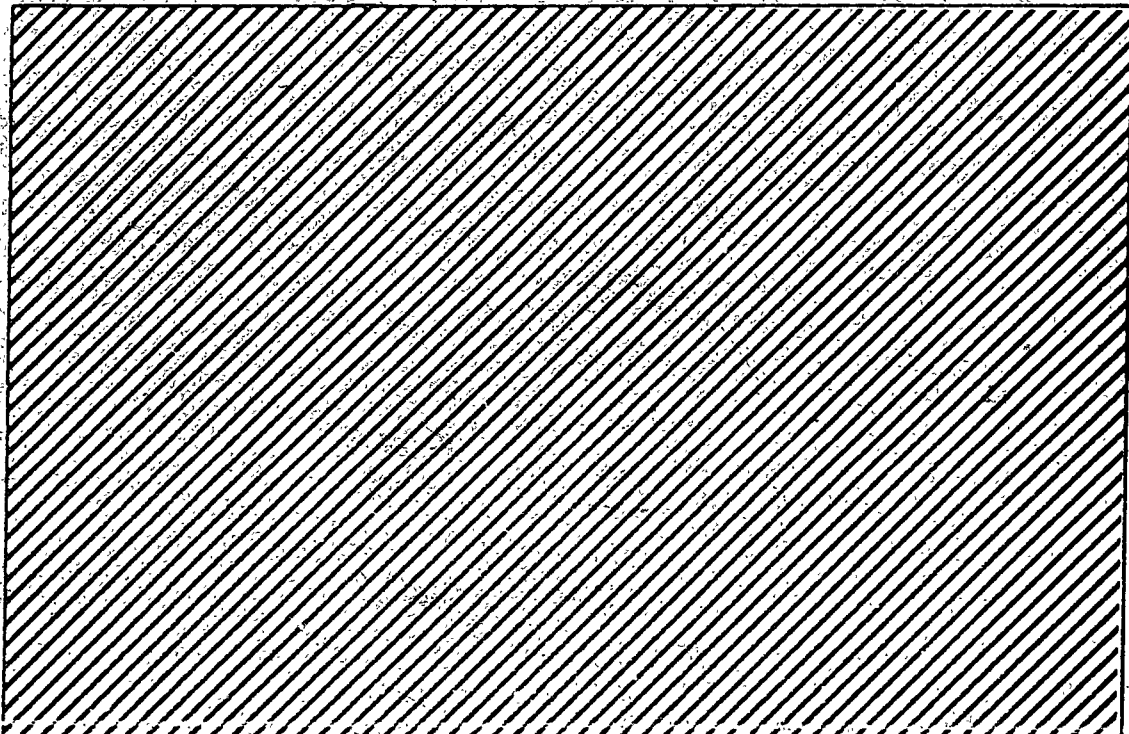
SECRET

G 42

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 057303						2. NAME (Last-First-Middle) GOONPASTURE, ANN L.	
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				4. EFFECTIVE DATE REQUESTED MONTH: 02 DAY: 13 YEAR: 66		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS		7. COST CENTER-NO CHARGE 6135-0990		8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203			
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH I MEXICO CITY, MEXICO STATION				10. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0418		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, I.B, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 4		17. SALARY OR RATE \$13,815	
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION <del>AND BE ADVISED BY THE DIRECTOR OF PERSONNEL</del>							
18A. SIGNATURE OF REQUESTING OFFICIAL <i>Philip C. Bowser</i>				DATE SIGNED 1/18/66		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
DATE SIGNED							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING NUMERIC: 51120 ALPHABETIC: WH		22. STATION CODE 45703	
23. INTEGREE CODE		24. MOOTHS CODE 3		25. DATE OF BIRTH MO: 11 DA: 28 YR: 18		26. DATE OF GRADE MO: 11 DA: 11 YR: 62	
27. DATE OF LEI MO: 11 DA: 08 YR: 64		28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1-CSC 2-FICA 3-NONE	
31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA TYPE: MO: DA: YR:		33. SECURITY REQ NO		34. SEX	
35. VET PREFERENCE CODE: 0-NONE 1-5 PT 2-10 PT		36. SERV COMP DATE MO: DA: YR:		37. LONG COMP DATE MO: DA: YR:		38. CAREER CATEGORY CAR/RESV PROV TEMP	
39. FEGLI, HEALTH INSURANCE CODE: 0-WAIVER 1-YES HEALTH INS CODE:		40. SOCIAL SECURITY NO		41. PREVIOUS GOVERNMENT SERVICE DATA CODE: 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	
43. FEDERAL TAX DATA FORM EXECUTED: 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED: 1-YES 2-NO		45. POSITION CONTROL CERTIFICATION 01-21-66 H		46. OP APPROVAL <i>Bob Bowser Jr</i>	
46. OP APPROVAL		DATE APPROVED 20 Jan 66					

SECRET  
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) Goodpasture, Ann L.	NAME AND RELATIONSHIP OF DEPENDENT Self	CLAIM NUMBER 66-691
---	--	------------------------

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on 29 December 1965.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE 14 FEB 1966
-------------------------------

SIGNATURE OF GPO REPRESENTATIVE <i>B. J. Rice</i>
--

**NOTICE OF OFFICIAL DISABILITY CLAIM FILE**



**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>31 OCTOBER 1962</b>	
1. SERIAL NUMBER <b>057303</b>		2. NAME (Last-First-Middle) <b>GOODPASTURE, ANN L.</b>					
3. NATURE OF PERSONNEL ACTION <b>PROMOTION</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>11 11 62</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE <b>3135 5700 1000</b>	
		CF TO V		CF TO CF		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP WH BRANCH 3 MEXICO CITY, MEXICO STATION</b>				10. LOCATION OF OFFICIAL STATION <b>MEXICO CITY, MEXICO</b>			
11. POSITION TITLE <b>OPS OFFICER</b> <del>TRAINING OFFICER (C/WH)</del>				12. POSITION NUMBER <b>852</b> <del>100</del>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0134.01</b> <del>0135.01</del>		16. GRADE AND STEP <b>13 2</b>		17. SALARY OR RATE <b>\$ 11,515</b>	
18. REMARKS <b>FROM: SAME</b>							
18a. SIGNATURE OF REQUESTING OFFICIAL <i>P.C. Bowers</i> <b>P.C. BOWERS C/WH/Personnel</b>				DATE SIGNED <b>10/31/62</b>		18b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	
						DATE SIGNED <b>11/9/62</b>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL.							
19. ACTION CODE <b>22</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODING NUMERIC ALPHABETIC <b>64900 WH</b>		22. STATION CODE <b>45075</b>	23. INTEGRAL CODE <b>3</b>	24. MONTHS <b>3</b>	
25. DATE OF BIRTH MO. DA. YR. <b>11 28 15</b>		26. DATE OF GRADE MO. DA. YR.		27. DATE OF LET MO. DA. YR.			
28. WTE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1 - CSC 3 - FICA 5 - NONE CODE		31. SEPARATION DATA CODE TYPE MO. DA. YR.	
32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REQ. NO.		34. SEA		<b>EOD DATA</b> →	
35. VET. PREFERENCE CODE 0 - NO. F 1 - 5 PT. 2 - 10 PT.		36. SERV. COMP. DATE MO. DA. YR.		37. ONG. COMP. DATE MO. DA. YR.		38. CAREER CATEGORY CAR/RESV CODE PROV/TEMP	
39. FEGLI / HEALTH INSURANCE CODE CODE 0 - WAIVED 1 - YES		40. SOCIAL SECURITY NO.					
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO	
44. STATE TAX DATA CODE NO. TAX STATE CODE 1 - YES 2 - NO				45. O.P. APPROVAL <i>[Signature]</i>		DATE APPR <b>11/9</b>	

SECRET

MEMORANDUM FOR: Secretary, CS/CS Panel (Section A)  
SUBJECT: Recommendation for Promotion to Grade GS-13  
Miss Ann L. Goodpasture

1. Miss Ann L. Goodpasture has been in Mexico City for five years and during this period has functioned as a Case Officer supporting operations against Soviet and Satellite targets. She was recommended for promotion in February 1961 and September 1961.

2. Miss Goodpasture is a seasoned and able employee who excels in the field of CE analysis. Her diligence, imagination, and experience have made her indispensable to the Station, which processes a great mass of information on Soviet and Satellite CE targets. Her knowledge of this field is encyclopedic, and the profundity of her analyses is equal to any occasion. She is a steady, cheerful worker who has the respect and affection of all her colleagues. She does her job without assistance and she is always willing to help with special Station projects.

3. It is recommended that Miss Goodpasture be promoted to GS-13.

*R. W. Heybert*  
J. C. KING  
Chief

Western Hemisphere Division

SECRET

SECRET

15 September 1961

MEMORANDUM FOR: Secretary, CS/CS Panel (Section B)

SUBJECT: Recommendation for Promotion to Grade GS-13 -  
Miss Ann L. Goodpasture

1. Miss Ann L. Goodpasture has been assigned to the Mexico City Station since early 1957 as a Case Officer in support of CI/CE operations directed against Soviet targets in Mexico. The Chief of Station recommended Miss Goodpasture for promotion in February of 1961.

2. Miss Goodpasture is a highly competent employee who has shown great strength in performing operational tasks which require a high degree of analytical ability, patience, and initiative. She is particularly strong in the CI/CE field and has made an invaluable contribution to the Mexico City Station's program directed against personnel of the Soviet Embassy and other individuals believed to be engaged in Soviet Bloc espionage activities. Miss Goodpasture is highly motivated, performs all her assignments with great dispatch in a most professional manner, and does have the qualifications found in more senior Case Officers.

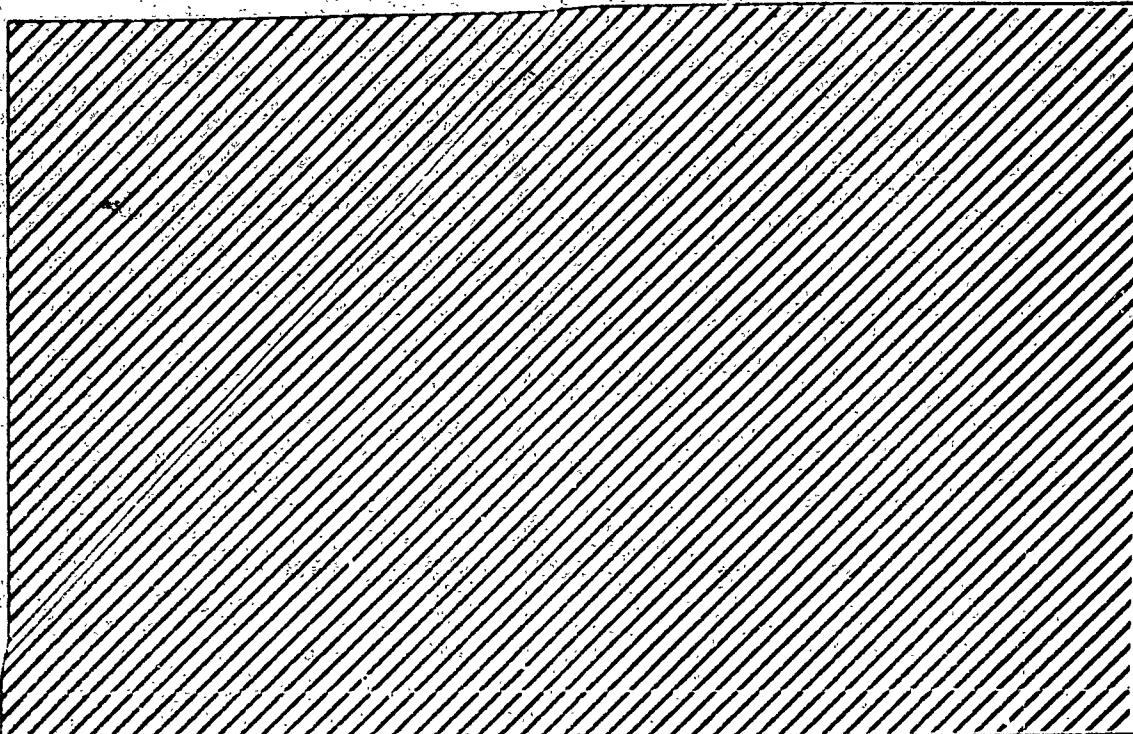
3. It is recommended that Miss Goodpasture be promoted to grade GS-13.

J. C. KING  
Chief,  
Western Hemisphere Division

*Approved  
Nov 1962*

SECRET

SECRET  
(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE) COFFASURE, Ann	DATE OF BIRTH Unk	CASE OR CLAIM NUMBER 58-1100
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There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on 12 May 58.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE 24 Sep 58	SIGNATURE OF BCO REPRESENTATIVE <i>B. D. Felice</i>
-----------------------------	--

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

15 February 1957

Baskin and Company, Real Estate  
724 - 9th Street, N. W.  
Washington, D. C.

Gentlemen:

At the request of Miss Ann Goodpasture, we are writing to confirm the fact that on or about 1 March 1957, Miss Goodpasture will be transferred to a location away from the Washington, D. C., area for the convenience of the Government.

Any consideration you may give Miss Goodpasture with regard to the termination of the lease she holds with your company will be appreciated.

Very truly yours,

G. H. Stewart  
Director of Personnel

OP/CS/dav(Counseling)

SECRET

STANDARD FORM 52 FORM BATED BY THE U. S. CIVIL SERVICE COMMISSION JANUARY 1953 - PREVIOUS EDITIONS REMOVED COMPLETELY	VOUCHERED TO UNVOUCHERED
<b>REQUEST FOR PERSONNEL ACTION</b>	

REQUESTING OFFICE: Fill in items 1 through 12 and A through D, except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) <b>Miss Ann L. GOCCEPASTURE</b>	2. DATE OF BIRTH <b>28 Nov 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>30 Jan 57</b>
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <i>JSMac 57</i>	

FROM- I.O. (FI) <b>BE-571</b> GS-0136.51-12 \$7570.00 p.a. DDP/NEA FI Staff Washington, D. C.	9. POSITION TITLE AND NUMBER	TO- I.O. (FI) <b>BAF-400</b> GS-0136.51-12 \$7570.00 p.a. DDP/MI Branch III Mexico City, Mexico Station Mexico City, Mexico
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	10. SERVICE GRADE AND SALARY	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL <b>(DI)</b>
11. ORGANIZATIONAL DESIGNATIONS		12. FIELD OR DEPARTMENTAL
11. HEADQUARTERS		

A. REMARKS (Use reverse if necessary)  
**Transfer TO Unvouchered Funds FROM Vouchered Funds**  
**2 copies to Security**

CONCUR:  
*Thomas J. [Signature]*

B. REQUESTED BY (Name and title) <i>Philip C. Bowers</i>	D. REQUEST APPROVED BY Signature: _____ Title: <i>AS/140</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>J. KOHLMEYER 18242</b>	

13. VETERAN PREFERENCE NONE WWII OTHER 5 PT. 10 POINT DISAB OTHER <input checked="" type="checkbox"/> NONE	14. POSITION CLASSIFICATION ACTION NEW VICE 1 A. REAL <b>SD-DI</b>
---	--

15. SEX F	16. APPROPRIATION FROM <b>7-3300-20</b> TO <b>7-3570-55-060</b>	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
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20. STANDARD FORM 50 REMARKS

*[Handwritten notes and stamps, including "RECEIVED" and "APPROVED" stamps]*

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS. CONTROL	<i>to</i>	<i>1/25/57</i>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>OCB</i>	<i>2/14/57</i>	
E.			

*[Handwritten signature: Daniel C. Quinn 2/21/57]*

10-6487-2

STANDARD FORM 52  
 PREPARED BY THE  
 U. S. CIVIL SERVICE COMMISSION  
 JANUARY 1950 - PERSONNEL PERSONNEL  
 MANUAL CHAPTER 11

**REQUEST FOR PERSONNEL ACTION**

**VOUCHERED**

**REQUESTING OFFICE:** Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. REQUEST NO.	4. DATE OF REQ. <b>24 Oct. 56</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>			6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)			B. APPROVED:	

FROM - <b>IO (FI) BE 27-12</b> <b>GS-0136.51-12 \$7570.00 p.a.</b> <b>DDP/NEA</b> <b>FI Staff</b> <b>Washington, D.C.</b>	6. POSITION TITLE AND NUMBER	TO - <b>IO (FI) BE 571</b> <b>GS-0136.51-12 \$7570.00 p.a.</b> <b>DDP/NEA</b> <b>FI Staff</b> <b>Washington, D.C.</b>
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	8. SERVICE GRADE AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title) <b>T. J. Hester, NEA/ADM/PERSONNEL</b>	D. REQUEST AFF. Signature: _____ Title: <b>FEICMO</b>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Shirley Matthews ext. 8671</b>	

13. VETERAN PREFERENCE NONE: WWII OTHER: 5 PT. 10 POINT <input checked="" type="checkbox"/> DISAB. OTHER	14. POSITION CLASSIFICATION ACTION NEW VICE L.A. REAL <b>SD-DI</b>
--	--

15. SEX <b>F</b>	16. APPROPRIATION FROM <b>7-3300-20</b> TO: <b>BASE</b>	17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	19. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
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20. STANDARD FORM 50 REMARKS

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS CONTROL	<i>Ann L. Goodpasture</i>		
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.		<b>11/2/56</b>	
E.			

F. APPROVED BY \_\_\_\_\_ **11/2/56**

STANDARD FORM 52  
FORM 52 OF THE  
U. S. CIVIL SERVICE COMMISSION  
AND SERVICE PERSONNEL  
MANUAL (CHAPTER 5)

SECRET VOUCHERED

### REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initials, and surname) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>21 Aug 56</b>
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Promotion</b>		6. EFFECTIVE DATE A. PROPOSED:		7. C. S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:		

8. POSITION TITLE AND NUMBER <b>10 (FI) BE-28</b>	9. POSITION TITLE AND NUMBER <b>10 (FI) BE-27-12</b>
10. SERVICE, GRADE, AND SALARY <b>GS-0136.51-11 \$6605.00 per annum</b>	10. SERVICE, GRADE, AND SALARY <b>GS-0136.51-12 \$7570.00 per annum</b>
11. ORGANIZATIONAL DESIGNATIONS <b>DDP/NEA* FI Staff</b>	11. ORGANIZATIONAL DESIGNATIONS <b>DDP/NEA FI Staff</b>
12. HEADQUARTERS <b>Washington, D. C.</b>	12. HEADQUARTERS <b>Washington, D. C.</b>
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <b>(DI)</b>

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title) <b>T. J. HESTER, NEA/ADM/PERSONNEL</b>	D. REQUEST APPROVED BY <i>(Signature)</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Ext 8671</b>	E. TITLE <b>C/FI</b>

13. VETERAN PREFERENCE NONE WWII OTHER S PPT 10 POINT <input checked="" type="checkbox"/> DISAB OTHER	14. POSITION CLASSIFICATION ACTION NEW VICE I A FEEL
---	---

15. SEX <b>F</b>	16. CHANGING PRIOR INVESTIGATIONS CIVIL NO. <b>6-3300-20</b> CRIMINAL NO. <b>7-3300-20</b>	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	19. LEGAL RESIDENCE STATE <b>SD-DI</b> <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
---------------------	--	--	---	---

20. STANDARD OFFICE REMARKS  
*16605 program only newly established of particular*  
APPROVED BY NEA PROMOTION AND POSITION CHG. *(Signature)*

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS CONTROL	<i>(Signature)</i>	<b>12/1/56</b>	
C. CLASSIFICATION	<i>(Signature)</i>	<b>9/7/56</b>	
D. PLACEMENT OR EMPL.			
E.			

RET 22 FEB 11 10 28 AM '56  
C. O. DEPT. OF DEF.  
9/7/56



SECRET

17 July 1956.

MEMORANDUM FOR: NEA/AEM

SUBJECT : Ann L. Goodpasture

1. It is requested that subject employee be promoted from GS-11 to GS-12.

2. Miss Goodpasture was recently assigned to the NEA Division to act as Case Officer on Project PACT, a world-wide project of interest to high ranking officials in the Agency, State and Defense Departments. In addition to all material handled by Miss Goodpasture being slugged RFEAT, there is a further indicator assigned which allows distribution only to DCI, DDCI, DD/P and CREA, together with the undersigned.

3. Information received under Project PACT is disseminated by the Case Officer to officials mentioned above in addition to DDI, Chief, CI, CFP, and CFI, and other interested Division Chiefs. Material received is reproduced by subject and disseminated as above. In addition to the above duties, Miss Goodpasture analyzes information for dissemination, handles her own carding and writing of operational reviews.

4. Subject employee has been in grade since 4 July 1954 and her performance on her present assignment has been excellent. It is therefore recommended that this request for promotion be considered at the next NEA Promotion Board meeting.

NEA/CFI

NEA/CFI/FSH:ms

Distribution:

Addressee - orig. and 1

NEA/CFI - 1

NEA/FSRS - 1

NEA/CADM - 1

STANDARD FORM 52  
 PREPARED BY THE  
 U. S. CIVIL SERVICE COMMISSION  
 ANALYST FOR FEDERAL PERSONNEL  
 MANUAL CHAPTER II

**REQUEST FOR PERSONNEL ACTION** **SECRET**

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>23 May 56</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED:		7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED: <b>17 JUN 1956</b>		

FROM— <b>Operations Off. (CE) BB 574-11</b> <b>GS-0132.52-11 \$6605.00 per annum</b> <b>DDP/WE</b> <b>FI Staff</b> <b>Counter Espionage Section, Wash, D.C.</b>	10. POSITION TITLE AND NUMBER <b>IO (FI) BE-28</b>	TO— <b>GS-0136.51-11 \$6605.00 per annum</b>
11. SERVICE GRADE AND SALARY	12. ORGANIZATIONAL DESIGNATIONS <b>DDP/NEA</b> <b>FI Staff</b> <b>Reports &amp; Requirements Section</b> <b>Washington, D.C.</b>	
13. HEADQUARTERS	14. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)  
*Two Copies to see 3/13/56*  
*See clearance WE/PT*

B. REQUESTED BY (Name and title) <b>T. J. HESTER, NEA/ADM/PERSONNEL</b>	D. REQUEST Signature: _____ Title: <b>Acms</b> <i>4 June '56</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Ext 3671</b>	

13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. OTHER	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>SD-DI</b>
15. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>YES</b>	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
16. APPROPRIATION <b>6-3600-20</b> <b>6-3300-20</b>	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Oklahoma</b>

20. STANDARD FORM 50 REMARKS  
*Paradeau Smith*  
*26 May 56*  
*7/13/56*

21 CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

22. APPROVED BY: \_\_\_\_\_ DATE: **6/5/56**

SECRET

STANDARD FORM 52  
FORMULATED BY THE  
U. S. CIVIL SERVICE COMMISSION  
GENERAL USE - FEDERAL PERSONNEL  
MANUAL, CHAPTER II

REQUEST FOR PERSONNEL ACTION

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
Miss Ann L. GOODPASTURE	28 Nov 1918		29 Sept 55

5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment	6. EFFECTIVE DATE A. PROPOSED: ASAP	7. C S OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)	B. APPROVED:	

FROM— Para-Mil. Off. BB 101-11 GS-0136.11-11 \$6390.00 p.a. DDP/WE French Branch, FI, PP, FM Washington, D. C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	8. POSITION TITLE AND NUMBER 9. SERVICE GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL	TO— Operations Officer (CS) BB 574-11 GS-0132.52-11 \$6390.00 p.a. DDP/WE FI Staff <i>Supervisory Section</i> Washington, D. C. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL FI
--	--	---

8. REMARKS (Use reverse if necessary)  
*No change of duties or supervision.*  
*Recently funds available.*  
*Charge Act No. 6-3600-20*

9. REQUESTED BY (Name and grade) A. M. GREGG, Personnel Officer, WE #12	10. REQUEST APPROVED BY (Name and grade) Signature: <i>James C. [unclear]</i> Title: <i>FCM 7 Oct 55</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) H. E. ETSSNER, x 3124	

13. VETERAN PREFERENCE NONE WWII OTHER 5 PT. 10 POINT DISAB. OTHER <input checked="" type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW VICE I A REAL SD-DI 5
---	--

15. SEX W	16. RACE W	17. APPROPRIATION FROM: 6-3600-20 TO: same	18. SUBJECT TO C S RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: O:la.
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21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS CONTROL		3 OCT 1955	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY  
*SECRET*  
*Gene L. Byrd 10 Oct 55*

SECRET

REQUEST FOR PERSONNEL ACTION

UNVOUCHERED TO VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) <b>Miss Ann L. GOODPASTURE</b>	2. DATE OF BIRTH <b>29 Nov. 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>10 Feb 55</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED: <b>ASAP</b>	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <i>[Signature]</i>	

FROM - <b>Area Ops. Off. BRF 387 GS-0136.01-11 \$5940.00 p.a. DDP/NEA India, Pakistan, Afghanistan Br.</b>	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS <b>Washington, D. C.</b>	TO - <b>Para-Mil. Off. BB 101-11 GS-0136.11-11 \$5940.00 p.a. DDP/WE French Branch, FI, PP, PM Washington, D. C.</b>
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)  
**Transfer TO Vouchered Funds FROM Unvouchered Funds. W-4 following  
Subject recently returned from the field, and has been assigned various temporary positions, pending permanent reassignment, therefore, no fitness report has been prepared on her, as it was felt she could not be properly evaluated.**

B. REQUESTED BY (Name and title) <b>A. M. GREGG, Personnel Officer, WE</b>	D. REQUEST APPROVED BY <i>[Signature]</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>H. E. EISSNER, X 3422</b>	E. CONCUR FOR NEA: <i>[Signature]</i>

13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PF. <input type="checkbox"/> 10 PF. <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>
---	---

15. SEX <b>M</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>5-3340-55-013</b> TO: <b>5-3600-20</b>	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) <b>Yes</b>	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Okla</b>
---------------------	----------------------	---	---	---	---

21. STANDARD FORM 50 REMARKS  
*See Coment  
8/18/54  
Drove*  
*copy sent to [unclear]  
[unclear]  
[unclear]*  
**Approved Concurs:  
FEB 15 1955  
[Signature]  
PP/Career Service**

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<b>CPB</b>	<b>11/2/55</b>	
C. CLASSIFICATION		<b>[Signature]</b>	
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY  
*[Signature]* **25 Feb 1955**

CONFIDENTIAL

## Office Memorandum • UNITED STATES GOVERNMENT

TO : Chief, WH  
THRU : WH/Admin.

DATE: AUG 27 1954

FROM : Acting Chief, Security Control Staff/SO

SUBJECT: Clearance, Private Foreign Travel—GOODPASTURE, Ann L.

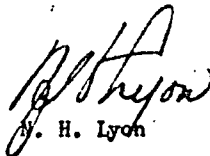
Reference: Memo dtd 19 Aug 54 to Chief, SCS from Miss Goodpasture

1. This Office interposes no objection to the proposed tour by Miss Goodpasture to Ireland, France, Italy and Portugal between the dates 8 October and 5 November 1954.

2. It is suggested that Miss Goodpasture review the provisions of Agency Regulation 10-10, dated 1 April 1951, and that she contact Miss [redacted] extension 692, to make an appointment for a security briefing prior to her departure.

3. If feasible, it is requested that Miss Goodpasture submit to this Office a detailed itinerary of her prospective trip (in triplicate) prior to her departure.

4. Immediately upon return from private foreign travel, Miss Goodpasture will again contact the Security Control Staff and have her passport in her possession when she reports for a security de-briefing.



W. H. Lyon

SO/CDS:mkr

## Distribution:

- Orig. & 1 - Addressee
- 1 - SO File
- 1 - SCS File
- 1 - Chrono., SCS

CONFIDENTIAL

SECURITY INFORMATION

HMYA-187  
5 October 1953

TO : Chief, WHD  
FOR : Chief, FD  
FROM : Chief of Substation,  
Monterrey, Mexico.  
SUBJ : Administrative  
Settlement Sheet ~~XXXXXXXXXX~~  
REF : HMYA-114 dated 21 September 1953

*Goodpasture, Ann L.*

Subject is returning to headquarters on PCS and will settle the reference differential overpayment on his arrival there which should be on or before 20 October 1953.



RBR:rbr

Distr:  
3-Hqtrs  
2-Mexico City  
2-Monterrey

HMYA-187  
5 Oct 53

SECRET

SECURITY INFORMATION

VIA AIR  
(Specify Air or Sea Pouch)

DISPATCH NO. NY-114

**SECRET**  
Security CLASSIFICATION

TO : Chief of Station, Monterrey

DATE SEP 21 1953

FROM : Finance Division

SUBJECT **GENERAL** Administrative  
**SPECIFIC** Settlement Sheet ~~██████████~~

REFERENCE: NYIA-135 and Attachment

1. Receipt is acknowledged of above reference dispatch and attachment.
2. Headquarters finds that there is no adjustment due on the quarters allowance for the periods covered.
3. Due to the information in item #7 of PSI from #5079 to #5259 effective 7 June 1953, there has been an overpayment made to subject for the period 7 June thru 15 August 1953 in the net amount of \$30.74 as evidenced by attached payroll change notice #271 for the period 16 August-12 September 1953.
4. Since the difference between the  is less than 100.00 per annum and settlement is to be made only once a year, it is suggested that a personal check for \$30.74 made payable to  be forwarded to Headquarters to liquidate this overpayment.

10 September 1953  
Attachment: PC# (1)  
Distribution:  
3 Monterrey

*Answered in NYIA-187  
5 Oct 1953*

RECEIVED OCT 5 1953

**SECRET**  
Security CLASSIFICATION

SECRET

SECURITY INFORMATION

MEMA-135  
20 July 1953

TO : Chief, WMD  
FOR : Chief, FD  
FROM : Chief of Substation,  
Monterrey, Mexico  
SUBJECT : Administrative  
Settlement Sheet - Robert B. RIGGS  
REF : Fiscal, Fld Reg 20-8 dated 19 August 1951

Attached is settlement sheet for the undersigned.

RBR:rbr

Robert B. Riggs

Attachment: 1

Distribution:

3-Hqtrs  
2-Mexico City (w/o attachments)  
2-Monterrey

MEMA-135  
20 July 53

SECRET  
SECURITY INFORMATION



SECRET

SECURITY INFORMATION

SETTLEMENT SHEET

(Submit so as to arrive at Headquarters no later than 15 Aug.)

I certify that during the period 1 July 1952 to 30 June 1953, I received the following compensation, salary and allowances from ODACID.

1. Quarters Allowances \$200 p.a.
2. Post Allowances 0
3. Additional Dependency Allowances 0
4. Actual cost of quarters, including utilities 906 pa
5. Traveled outside my country of assignment on official business or annual leave during the period or periods indicated:  
Annual leave in excess of 5 days:  
19 May 1953 to June 2, 1953 (11 days)
6. Promotion from \$ 0 p.a. to \$ 0 p.a.
7. Periodic pay increase from \$5079 p.a. to \$5259 p.a. effective 7 June 1953.
8. Took one day of sick leave.
9. Worked no overtime for which compensation was claimed.
10. On no leave without pay.

30 June 1953

Robert E. Riggs

SECURITY INFORMATION

14-00000

HMVA-105  
3 June 1953

TO : Chief, WHD  
FROM : Chief of Substation,  
Monterey, Mexico  
SUBJECT : Administrative  
~~XXXXXXXXXX~~

Robert B. RIGGS returned to Monterrey on 2 June.  
Please advise the appropriate KUCLUB individual.

DEK:rbr

Distribution:  
3-Wash  
2-Mexico City  
2-Monterrey

HMVA-105  
4 June 1953

CONFIDENTIAL

SECURITY INFORMATION

Dispatch No: HMYA-7  
30 October 1952

TO : Chief, WHD  
FROM : Chief of Substation,  
Monterrey, Mexico  
SUBJECT : Administrative  
Personnel - [REDACTED]

1. [REDACTED] has asked that I state my preference with regard to home leave and reassignment. I will be eligible for home leave in July 1953 but it is not urgent that my leave be scheduled exactly when due. I would like, however, to know what opportunities exist with headquarters and whether I should be looking elsewhere for employment after July 1953.

2. With regard to another two year tour of duty in Monterrey, I would prefer a more responsible job than is foreseeable here. Now that the station files are set-up and the administrative routine is established, my job, while termed Administrative Assistant, is mainly that of a clerk-typist. The practice in typing has been good for me but I would like to look forward to a more responsible job for the next tour of duty. For instance, as a GS-9 I am performing the same type job which I did in 1945 at a CAF-4 and a considerably less responsible job than the one performed at headquarters as a P-2. While I have been taking Spanish lessons, I know that I am not proficient enough in the language for an assignment in Latin America, and feel that I would be better off in another area.

3. For the benefit of the case officer in assigning a replacement, [REDACTED] has suggested that I outline the duties which my replacement should be trained to perform. The routine can be learned in the field within two or three weeks.

- a) Copy typing. About 75% of the time will be taken up with routine typing.
- b) Index carding. About 600 index cards a week are now being typed for the card files and for the visa section files.
- c) Preparation of courier mail. Couriers usually go to the border approximately every two weeks but there is no regular schedule, and pouches are sometimes prepared on a few hours notice.
- d) Communications. The incumbent should have complete training for our codes for he will not have much practice in the field as only two or three messages are transmitted monthly.

CONFIDENTIAL

VIA: Air  
(SECURITY AIR OR SEA POUCH)

DISPATCH NO. HMY-W-20

~~SECRET~~  
SECURITY CLASSIFICATION

DATE 31 DEC 1952

TO : Chief of Station, Monterrey, Mexico

FROM : Chief, Western Hemisphere

SUBJECT: GENERAL- Personnel

SPECIFIC- ~~████████████████████~~

Ref: HMY-A-7

1. At the present time, it is headquarters' plan to replace RIGGS with a young officer who is expected to arrive in May 1953. Biographic data will be provided in a subsequent pouch.

2. With regard to RIGGS' future assignment, he may be assigned to a headquarters position, which will offer more responsibility than his present assignment, if he so desires.

*Oliver G. Galbond*  
OLIVER G. GALBOND

*File  
GPD*

FORM NO. 51-28  
MAR 1949

~~SECRET~~  
SECURITY CLASSIFICATION

RECEIVED JAN 7 1953

16-52327-1 GPO

CONFIDENTIAL

SECURITY INFORMATION

e) **Photography.** At the present time, considerable operational use is being made of a darkroom at my residence. In addition to my own photographic equipment, the station photographic equipment is used there. My replacement should be trained in the use of the duo-printer and in 35mm copy work. If he has no personal photographic equipment, headquarters may wish to issue him a camera as there is only one camera at the station. Most of the copy work has been done with my personal reflex and enlarger.

f) **Administrative Reports.**

(1) **Station Funds.** He will be responsible for dispensing funds, keeping records and preparation of the monthly accounting reports.

(2) **Property.** He will be responsible for keeping records of government property and preparation of periodic reports and inventories.

(3) **Exchange commodities.** He will be responsible for keeping records and preparing periodic reports and inventories.

g) **Maintenance of Files.** The station files are set-up along the lines recommended by headquarters, and should require little time for upkeep.

h) **Information Reports.** Dependent upon the clerical workload, he may assist  in the preparation of information reports.

i) **Cover Job.** None. If there are only two people at the station, the replacement for my job would not have time to perform a cover job and consequently, would have no regular working relationship with the DYNAMACOM employees.

4. A resourceful person can find Monterrey a very enjoyable post. From a social point of view, the city is not a dull place and either a single girl or man can find plenty of things to do. There are a limited number of single persons here, but one can always find somewhere to go and something to do. The American colony, as a whole, is the friendliest group that I have known at any post and they are very gracious with invitations to their homes. If headquarters has someone in mind for this post and would like elaboration on living conditions in Monterrey, I shall be glad to forward them on request.

RBR:rbr

Distribution:

2-Mexico City

3-Hqtrs

2-Monterrey

Robert B. Riggs

CONFIDENTIAL

VIA: air  
(SPECIFY AIR OR SEA FOUCH)

DISPATCH NO. 111-5

**SECRET**  
CLASSIFICATION

DATE SEP 7-1951

TO : Chief Sub-station, Monterrey  
FROM : Acting Chief, Western Hemisphere Division  
SUBJECT: GENERAL- Administrative  
SPECIFIC- XXXXXXXXXX

1. You are hereby notified that approval has been granted for subject to take Spanish lessons at Government expense abroad.
2. The following conditions govern this authorization:
  - a. That the employee should receive this training under secure circumstances for reasons of immediate operational necessity;
  - b. That the cost to the Government will not exceed \$250.00 during any fiscal year for subject; and
  - c. That such language lessons will directly benefit the Government.
3. You may reference this dispatch as authority for payment when recording the disbursements in your monthly accounting reports.

*Dennis K. Copeland*  
DENNIS K. COPELAND

*W.F.*

**SECRET**  
CLASSIFICATION

10 July 1951

Department of State  
Division of Foreign Service Personnel Records  
Room-A, SA-12  
Washington 25, D. C.

GODPASTURE, Ann Lorane

Reference Clerk CAF-5 \$2770.00 Oct. 20, 1946 to Apr. 17, 1947.  
Administrative Asst. CAF-7 \$3397.20 Apr. 17, 1947 to Dec. 14, 1947.  
Administrative Asst. CAF-9 \$4479.60 Dec. 14, 1947 to Dec. 6, 1948.  
Administrative Asst. CAF-7 Dec. 7, 1948 to 3 Febr. 1951.  
Administrative Asst. GS-9 4 Febr. 1951 to 7 June 1951.

ADDRESS OFFICIAL COMMUNICATIONS TO  
THE SECRETARY OF STATE  
WASHINGTON 25, D. C.



DEPARTMENT OF STATE  
WASHINGTON

June 20, 1951

Central Intelligence Agency,  
Washington 25, D.C.

Gentlemen:

In accordance with the provisions of Chapter RI-35 of the Federal Personnel Manual, it is requested that the official personnel file and leave record of Ann Lorene Goodpasture Administrative Assistant who e.o.d. June 8, 1951 with this agency, date of birth Nov. 28, 1918, employed by CIA from December 1948 to March 1951 at Washington, D.C. be forwarded to the following address at the earliest practicable date:

Department of State,  
Division of Foreign Service Personnel Records,  
Room-A, SA-12,  
Washington 25, D. C.

Very truly yours,

*Wm. E. Woodruff*  
Chief, Field Operations Branch  
Division of Foreign Service Personnel





Form FS-349

*File in N*  
June 7, 1951

Goodpasture

Ann

Lorene

11-28-1918

PL-724-79th

FSS

Indefinite appointment

(E. O. 10180)

6-8-51

6-8-51

Administrative Assistant

Monterrey

FSS-9 \$4470

1a 2 992 110

MY-10

Indef

X

X

X

Female

Single

Items: A, b, c, d, i (61a)

SF 84 and 87 executed 6-8-51

No military reserve status

	Previously employed by another

Government agency as GS-9 \$4600

*Ann L. P. 6-11-51*

PERSONNEL ACTION REQUEST				REGISTER NO.	
NAME <b>GOODPASTURE, Ann L.</b>			REQUESTED EFFECTIVE DATE <i>COA 26 May 1951</i>		
NATURE OF ACTION <b>Resignation *</b>			WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE: <i>Ann L. Goodpasture</i>		
FROM			TO		
TITLE <b>Intelligence Officer (Ops) GS-9</b>					
GRADE AND SALARY <b>GS-9 \$1600.00</b> <i>je.</i>					
OFFICE <b>OSO</b>					
DIVISION					
W/DZ/SEA					
BRANCH AND SECTION <b>Branch I</b>					
OFFICIAL STATION <b>Washington, D. C.</b>					
DEPARTMENTAL <input checked="" type="checkbox"/>		FIELD <input type="checkbox"/>		DEPARTMENTAL <input type="checkbox"/>	
FIELD <input type="checkbox"/>		FIELD <input type="checkbox"/>		FIELD <input type="checkbox"/>	
REMARKS: <i>* To accept other employment. TRANSFER LEAVE TO UV FUNDS</i>					
<i># 6655</i>					
RECOMMENDED: <u>23 April 1951</u> (DATE) <i>[Signature]</i> (SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR AUP. OFFICER)					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED <i>[Signature]</i> <i>4/24/51</i>			APPROPRIATION: <i>2115900</i>		
CLEARANCE REQUESTED			ALLOTMENT: <i>957-108</i>		
CLEARANCE APPROVED			C. S. C. AUTHORITY:		
DATE	TYPE	DATE	TYPE	DATE SIGNATURE	SIGNATURE
				<i>6-26-51</i>	<i>A. G. Quinn</i>
DATE	SIGNATURE		PERSONNEL RELATIONS		
			DATE	SIGNATURE	
				<i>JK M</i>	
CLASSIFICATION			APPROVALS		
BUREAU NO.	C. S. C. NO.	DATE APPROVED	<input type="checkbox"/> SUBJECT TO SECURITY CLEARANCE		
<i>1801</i>	<i>1241</i>	<i>12-19-47</i>	<i>JK M</i>		
NEW	VICE	L. A.	DATE	SIGNATURE OF EXECUTIVE	
		<i>X</i>			
DATE	SIGNATURE		DATE	SIGNATURE OF DIVISION CHIEF	
EFFECTIVE DATE					

SECRET

APR 12 1954

MEMORANDUM FOR THE SECRETARY OF STATE

ATTENTION: Mr. F. Park Armstrong, Jr.

Subject: Request for Appointment in the Foreign Service as Administrative Assistant at Monterrey for Miss Ann Lorene Goodpasture.

Enclosure: a. Forms SF-50-N  
b. Standard Form 88 and 89  
c. Proposed Biography

1. It is requested that Miss Ann Lorene Goodpasture be appointed in the Foreign Service with the title of Administrative Assistant, GS-9, \$14,870.00, for duty in [redacted] at Monterrey, Mexico.

2. Miss Goodpasture received her B.S. Degree from the University of Oklahoma. She has had approximately seven years of administrative and secretarial experience in Government service and also served for one year and eight months as Administrative Assistant in the [redacted]. It is believed that Miss Goodpasture is fully qualified to serve as Administrative Assistant in the [redacted]. She will receive from GSA a basic salary of \$14,800.00 per annum.

3. Miss Goodpasture will perform the administrative duties for the CIA station to be opened in Monterrey.

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE

[redacted]

SECRET

PERSONNEL ACTION REQUEST				REGISTER NO. 3019	
NAME GOODPASTURE, Ann L.			REQUESTED EFFECTIVE DATE 4/7/51		
NATURE OF ACTION Promotion			WHEN LEAVING (VOUCHERED) LAST WORKING DAY: 4/6/56 EMPLOYEE'S SIGNATURE: [Signature]		
TITLE Intelligence Officer (Ops) GS-7			Intelligence Officer (Ops) GS-9		
GRADE AND SALARY GS-7 \$4325.00			GS-9 \$4600.00		
OFFICE OSO			OSO		
DIVISION FDZ/SEA			FDZ/SEA		
BRANCH AND SECTION Branch 1			Branch 1		
OFFICIAL STATION Washington, D. C.			Washington, D. C.		
DEPARTMENTAL <input checked="" type="checkbox"/>		FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/>	
REMARKS: S-7 Employee has been in grade since 17 April 1947.					
RECOMMENDED: 20 January 1951 (DATE) [Signature: B.M. Underwood] (SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR AT-LARGE OFFICER)					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED 2/3/51 F. G. Jensen			APPROPRIATION: 2115950		
CLEARANCE REQUESTED			ALLOTMENT: 954-108		
CLEARANCE APPROVED			C. S. C. AUTHORITY: [Signature]		
DATE	TYPE	DATE	TYPE	DATE SIGNATURE	SIGNATURE
				2-5-57	[Signature]
DATE	SIGNATURE		PERSONNEL RELATIONS		
			DATE	SIGNATURE	
				[Signature]	
CLASSIFICATION			APPROVALS		
BUREAU NO. 1801	C. S. C. NO. 1741	DATE APPROVED 12/9/47	<input type="checkbox"/> SUBJECT TO SECURITY CLEARANCE		
NEW	VICE	L. A.	DATE	SIGNATURE OF EXECUTIVE	
		/			
DATE	SIGNATURE		DATE	SIGNATURE OF DIVISION CHIEF	
2/24/51	[Signature]		2/24/51	[Signature]	
EFFECTIVE DATE					

PERSONNEL ACTION REQUEST				REGISTER NO.
NAME CONRADSTEIN, Ann E.		REQUESTED EFFECTIVE DATE 27 Dec 50		
NATURE OF ACTION Reassignment		WHEN LEAVING (VOLUNTARY) LAST WORKING DAY: # 4025 EMPLOYEE'S SIGNATURE:		
TITLE FROM Intell. Officer GS-7		TO Intell. Off. (Ops) GS-7		
GRADE AND SALARY GS-7 \$4325.00 p.a.		GS-7 \$4325.00 p.a.		
OFFICE OSO		OSO		
DIVISION FDZ/SEA		FDZ/SPA		
BRANCH AND SECTION Branch I		Branch I		
OFFICIAL STATION Washington, D.C.		Washington, D.C.		
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS:  S-7				
RECOMMENDED:  13 December 1950 (DATE) <i>B. J. Anderson</i> (SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR APM OFFICER)				
FOR USE OF PERSONNEL ONLY				
PLACEMENT		TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED 12/21/50 FG Jarman		APPROPRIATION: 2115 970		
CLEARANCE REQUESTED		ALLOTMENT: 957-108		
DATE	TYPE	DATE	TYPE	C. S. C. AUTHORITY: Shea G. 1168
DATE	SIGNATURE		DATE SIGNATURE	SIGNATURE
DATE	SIGNATURE		DATE SIGNATURE	SIGNATURE
CLASSIFICATION		PERSONNEL RELATIONS		
BUREAU NO. 1803	C. S. C. NO. 1740	DATE APPROVED 12/19/47	DATE	SIGNATURE
NEW	VICE	L. A.	APPROVALS	SUBJECT TO SECURITY CLEARANCE
DATE 20 Dec 50	SIGNATURE <i>(Austin J. Thomas) put of</i>		DATE	SIGNATURE OF EXECUTIVE
EFFECTIVE DATE			DATE 21 Dec	SIGNATURE OF DIVISION CHIEF

**CONFIDENTIAL**  
PERSONNEL ACTION REQUEST

*2-9-49*

NAME:  COOPERATURE, Ann L.	CLASSIFICATION	INITIAL	DATE
	VICE	<i>AW # 1499</i>	<i>2-9-49</i>
NATURE OF ACTION: <i>Excepted Appointment</i>	IA	<i>CSC # 1445</i>	
	VV		
EFFECTIVE DATE: <i>21 March 1949</i>	NEW	<i>10-18-47</i>	<i>MM</i>
	QUALIFICATION & REVIEW	INITIAL	DATE
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:		<i>2195900</i>	<i>3-8-49</i>
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:	APPROVED:	<i>959-108</i>	
	SIGNATURE (EXECUTIVE DIRECTOR)	<i>Scha-45 Bag 3-10-49</i>	
	SIGNATURE (EXECUTIVE FOR ARMY)		

FROM		<i>George E. Miller</i>
TITLE		<i>Intelligence Officer - P-2</i>
GRADE AND SALARY	P-2 \$3978.00	<i>pa.</i>
OFFICE	OSG	
BRANCH	COPS - FBZ	
DIVISION	SEA	
SECTION	Division #1	
OFFICIAL STATION	Washington, D.C.	
DEPT. OR FIELD	Departmental	<i>130</i>

REMARKS: *charge against P-40 reports officer*

This action cancels CONTROL #1234. Security concurrence requested Slot 48 7 February 1949. Please transfer accrued leave from unvouchered funds. From the only records available at this office, it appears subject EOD in February 1944 as a Stone, CAP-4. She went to the field thereafter as a CAP-5. She received her first periodic pay increase as a CAP-5 on 10 March 1946 and returned from the field on 30 March 1946. She returned to departmental rolls on 5 June 1946. She returned to unvouchered funds for duty in the field on 1 December 1946. She received a p.p.i. on 6 April 1947; and a promotion to Ad. Assistant, CAP-7, on 17 April 1947.

RECOMMENDED: OFFICE CHIEF, BRANCH CHIEF, OR ADMINISTRATIVE OFFICER (OVER) DATE

*7 February 1949*

*Searched 10/24/49*

**CONFIDENTIAL**

*file*

28 April 1949

TO : Personnel Officer  
 Attention:

FROM : Covert Personnel Branch

SUBJECT : Ann L. Goodpasture

This is to certify that subject's "Transfer and Change to Lower Grade" has been amended as follows:

<u>From</u>	<u>To</u>	<u>Effective Date</u>
CAF-9, \$4479.60	CAF-7, \$3852.60	7 December 1948.

Subject's last periodic pay increase has been amended as follows:

<u>From</u>	<u>To</u>	<u>Effective Date</u>
CAF-7, \$3852.60	CAF-7, \$3978.00	26 December 1948.

**CONFIDENTIAL**

*Good pasture*

**Office Memorandum • UNITED STATES GOVERNMENT**

**TO :** George E. Malcom

**FROM :** Transactions & Records Division

**SUBJECT:**

**DATE:** 23 March 1949

The unvouchered records of the following employees appointed on vouchered funds effective 21 March 1949, have revealed an error in computing periodic pay increases. In order to determine their last salary increase to establish a date they will be eligible for a periodic on vouchered funds the following information is furnished for action you deem necessary.

Goodpasture, Ann L.

(Temporary) Promotion effective 14 December 47, from CAF-7, \$3397.20 per annum to CAF-9, \$4149.60 per annum.

Return and Change to Lower Grade effective 7 December 1948, to CAF-7, \$3727.20 per annum.

Pay Increase (Periodic) effective 8 December 1948, from \$3727.20 to \$3978 per annum. (This is a jump of 2 steps)

The employee was not eligible for the above periodic until the first pay period following 14 December 1948, at which time she would have completed the one year waiting period since her last salary increase. Then the increase should have been from \$3727.20 to \$3852.60.

[Redacted]

(Temporary) Promotion effective 16 November 1947 from CAF-5, \$2770.20 per annum to CAF-6, \$3146.40 per annum.

Return and Change to lower grade effective 28 July 1948, to CAF-5, \$3100.20 per annum.

Pay Increase (Periodic) effective 29 July 1948, from \$3100.20 to \$3225.20 per annum.

This employee was not eligible for the above periodic until the pay period following 16 November 1948.

[Redacted]

(Temporary) Promotion effective 16 November 1947, from CAF-6, \$3146.40 per annum to CAF-7, \$3922.60.



Return and Change to lower grade effective 3 August 1948, to CAF-6,  
\$3601.80 per annum.

This employee was eligible for a periodic pay increase the first  
pay period following 16 November 1948, provided she met the re-  
quirements.

Rec'd 2/15  
204

~~CONFIDENTIAL~~  
PERSONNEL ACTION REQUEST

NAME: <b>GOODPASTURE, Ann L.</b>		CLASSIFICATION:	INITIAL	DATE
NATURE OF ACTION: <b>Appointment</b>		VICE		
		IA		
		VV		
EFFECTIVE DATE: <b>21 March 1949</b>		NEW		
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:		QUALIFICATION & REVIEW	INITIAL	DATE
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:		APPROVED: ✓		
		SIGNATURE (EXECUTIVE DIRECTOR)		
		SIGNATURE (EXECUTIVE FOR HR)		
		SIGNATURE (CHIEF, PERSONNEL BRANCH)		
FROM:		TO:		
TITLE		Intelligence Officer (Rpts.)		
GRADE AND SALARY		P-2	\$3978.00	
OFFICE		OSO		
BRANCH		COPS - FBI		
DIVISION		SEA		
SECTION		Division #1		
OFFICIAL STATION		Washington, D.C.		
DEPT. OR FIELD		Departmental		
REMARKS: This action cancels CONTROL #1434. Security concurrence requested Slot 48 7 February 1949. Please transfer accrued leave from unvouchered funds. From the only records available at this office, it appears subject EOD in February 1944 as a Steno., CAF-4. She went to the field thereafter as a CAF-5. She received her first periodic pay increase as a CAF-5 on 10 March 1946 and returned from the field on 30 March 1946. She returned to departmental rolls on 5 June 1946. She returned to unvouchered funds for duty in the field on 1 December 1946. She received a p.p.i. on 6 April 1947; and a promotion to Ad. Assistant, CAF-7, on 17 April 1947.				
RECOMMENDED BY OFFICE CHIEF, BRANCH CHIEF		DATE		(OVER)
Rec'd		7 February 1949		

She received temporary promotion to CAF-9 on December 1947. She returned from the field on 7 December 1948 and reverted to her CAF-7. She received a periodic pay increase on 8 December 1948 to \$3978.00 per annum.

PERSONNEL PERSONNEL

24 February 1949

Comair for the Chief of Inspection and Security.

1949 MAR 29 AM 11 16

O.S.C.

EMMEL P. GEISS

Chief, Personnel Security Division

PERSONNEL  
FEB 15 2 35 PM '49

FEB 16 4 01 PM '49  
I & S

SECRET

*my file*  
6  
DEC 21 1948

MEMORANDUM FOR [REDACTED]

ATTENTION: [REDACTED]

Subject : Cancellation of [REDACTED]  
of Administrative Assistant at [REDACTED]  
for Miss Ann Lorens Goodpasture

1. This is to advise you that Miss Ann Lorens Goodpasture, CIA representative who has been serving at [REDACTED] with the [REDACTED] of Administrative Assistant, has been transferred to Washington for a permanent change of station. It is requested, therefore, that the [REDACTED] for Miss Goodpasture be cancelled.

[REDACTED]

Assistant Director

Attachment: [REDACTED]

HP:jla

SECRET

COPY

(2)

To: George E. Melton

From: Transactions & Records Division

The unvouchered records of the following employees appointed on Vouchered funds effective 21 March 1949, have revealed an error in computing periodic pay increases. In order to determine their last salary increase to establish a date they will be eligible for a periodic on vouchered funds the following information is furnished for action you deem necessary,

✓ Goodpasture, Ann L.

(Temporary) Promotion effective 14 December 47, from CAF-7, \$3397.20 per annum to CAF-9, \$4149.60 per annum

Return and Change to Lower Grade effective 7 December 1948, to CAF-7, \$3727.20 per annum.

Pay Increase (Periodic) effective 8 December 1948, from \$3727.20 to \$3973 per annum. (This is a jump of 2 steps)

The employee was not eligible for the above periodic until the first pay period following 14 December 1948, at which time she would have completed the one year waiting period since her last salary increase. Then the increase should have been from \$3727.20 to \$3852.60.

[Redacted]  
(Temporary) Promotion effective 16 November 1947 from CAF-5 \$2770.20 per annum to CAF-6, \$3146.40 per annum.

Return and Change to lower grade effective 28 July 1948, to CAF-5 \$3100.20 per annum.

Pay Increase (Periodic) effective 29 July 1948, from \$3100.20 to \$3225.20 per annum.

This employee was not eligible for the above periodic until the pay period following 16 November 1948.

[Redacted]  
(Temporary) Promotion effective 16 November 1947, from CAF-6 \$3146.40 per annum to CAF-7, \$3522.60.

COPY

Return and Change to lower grade effective 4 August 1948,  
to CAF-6, \$3601.80 per annum.

This employee was eligible for a periodic pay increase the  
first pay period following 16 November 1948, provided she met  
the requirements.

SECRET

CENTRAL INTELLIGENCE AGENCY  
COMMUNICATIONS DIVISION  
SIGNAL SECURITY AND CONTROL SECTION

COMMUNICATIONS CLEARING

I, Ann L. Goodpasture, DO SOLEMNLY SWEAR (OR AFFIRM) NOT TO DIVULGE ANY CLASSIFIED INFORMATION CONCERNING THE COMMUNICATIONS OF THE CENTRAL INTELLIGENCE AGENCY AS TO ORGANIZATION, PERSONNEL, LOCATION, METHODS OF OPERATION, CRYPTOGRAPHIC SYSTEMS, COMMUNICATIONS CHANNELS AND FACILITIES USED.

I DO FURTHER SOLEMNLY SWEAR (OR AFFIRM) THAT I SHALL NOT DISCLOSE, DIVULGE, PUBLISH OR CAUSE TO BE PUBLISHED ANY INFORMATION CONCERNING THE CRYPTOGRAPHIC FACILITIES, SYSTEMS, OR PROCEDURES EMPLOYED BY OTHER UNITED STATES GOVERNMENT DEPARTMENTS OR AGENCIES OF WHICH I AM COGNIZANT BY VIRTUE OF MY COMMUNICATIONS DUTIES WITH C.I.A.

I DO FURTHER SWEAR (OR AFFIRM) THAT I SHALL NOT DISCLOSE, DIVULGE, PUBLISH OR CAUSE TO BE PUBLISHED ANY CLASSIFIED INFORMATION OR INTELLIGENCE OF WHICH I AM COGNIZANT BY VIRTUE OF MY COMMUNICATIONS DUTIES WITH C.I.A. UNLESS SPECIFICALLY AUTHORIZED IN WRITING IN EACH CASE BY THE DIRECTOR OF CENTRAL INTELLIGENCE.

I HAVE READ THE PROVISIONS OF THE ESPIONAGE ACT AND UNDERSTAND THAT AFTER SEVERING MY RELATIONS WITH THE COMMUNICATIONS DIVISION, C.I.A., I AM STILL BOUND BY THAT ACT AND IF IT IS VIOLATED, I AM SUBJECT TO ITS PENALTIES.

I DO FURTHER SOLEMNLY SWEAR (OR AFFIRM) THAT NO CLASSIFIED PAPERS, BOOKLETS, MATERIAL, OR EQUIPMENT REMAIN IN MY POSSESSION AND THAT ALL COMMUNICATIONS PROPERTIES, CLASSIFIED AND UNCLASSIFIED, HAVE BEEN RETURNED TO THE PROPER AUTHORITIES OF COMMUNICATIONS DIVISION, C.I.A.

I TAKE THIS OBLIGATION FREELY, WITHOUT ANY MENTAL RESERVATION OR PURPOSE OF EVASION.

SIGNED: Ann L. Goodpasture  
DATE: 9 Dec 48

WITNESS: Albert P. Colman

POSITION: \_\_\_\_\_

DATE: 9/10/48

SECRET

3

SECRET

MEMORANDUM FOR THE RECORD

SUBJECT: ANNIE COOGLISTURE

The subject entered on duty with the predecessor organization in February 1944. She served in India and in China from November 1944 to March, 1946. She arrived at her present overseas post on 17 April 1947 under an 18 month overseas agreement. She is being returned P&S to the United States upon completion of her present tour of duty for reassignment, which will be determined upon her arrival in Washington. No per diem will be paid the subject while on duty in the United States.

*JER*  
*AW*  
*knh*  
*TJB*  
*WYS*

SECRET



SECRET

*2100*

*2 TBU-136*

Air

Chief of Station

29 March 1948

Chief, Administration and Services

Administrative

~~XXXXXXXXXX~~ ANN GOOD PASTURE ✓

APR 6

1. In reference to ZISA-85 and enclosure, you may inform Robert E. Biggs that he will be returned to the United States at the completion of his 18-month tour of duty. However, because of the fact that this tour of duty will not be completed until October, 1948, authorization for return will be pouched at a future date. In the meantime, efforts will be made to recruit a replacement for the slot which Biggs is now occupying.

E. M. TERRELL

020

1948 APR 6 8 53 AM

SECRET R.S.W.

W. Lloyd George

SECRET

OFFICIAL DISPATCH

VIA: AIF  
SPECIFY AIR OR SEA POUCH

DISPATCH NO: ZIRA-85

SECRET  
CLASSIFICATION

TO : Chief, Foreign Branch Z

DATE: 8 March 1948

FROM : Chief of Station; [redacted]

SUBJECT: GENERAL: Administrative  
SPECIFIC: [redacted]

APR 6

1. The enclosed memorandum was given to me by [redacted] this date and its contents are self explanatory. I want to emphasize the fact that Riggs has definitely made up his mind and intends to comply with the plan as stated in the enclosure.

2. I desire to convey my unqualified commendation for the attitude and performance of duties offered by [redacted] during the past 11 months. In every instance he has been 100% cooperative with never a display of selfishness. All members of the Consulate are very fond of [redacted] as are the people of [redacted]

[redacted]  
[redacted]

0 2 0  
123 45 6 7 8 9  
10 11 12 13 14 15

REGISTRY COPY

SECRET  
CLASSIFICATION

MEMORANDUM

8 March 1948

TO :

FROM: [REDACTED]

SUBJ: Return to US within 7½ months.

1. It is my desire to be returned to the United States upon completion of 18 months' overseas duty for the purpose of resignation after my arrival at headquarters.

2. This notice is given so that the organization will have ample time to replace me prior to October '48 should they desire to do so. Should they replace me immediately, all expenses incurred by the organization in connection with my return transportation will be reimbursed. APR 6

3. I desire to depart for the United States immediately upon completion of 18 months' overseas which will be October 18, 1948. Travel at that time will be at the expense of the organization in accordance with an agreement prior to my departure for overseas duty.

[REDACTED]

RECEIVED U.S. 32

600

ENCLOSURE #1

SECRET

*File*

17 December 1947

(2)

MEMORANDUM FOR THE ASSISTANT DIRECTOR, SPECIAL OPERATIONS

THROUGH: Chief, Administration and Services

DEC 22

SUBJECT: Temporary Promotion of Anne L. Goodpasture

1. Forwarded herewith is a memorandum and attachments from the Chief, FBZ, to Chief, Personnel Division, recommending a temporary promotion from CAF-7 to CAF-9 of Anne L. Goodpasture.
2. The memorandum from the Branch and the attachments, an excerpt from the [redacted] dispatch to the [redacted] indicate that the cost of living at her station has reached a most burdensome point.
3. This office concurs in the recommendation that such temporary promotion be made.

*Robert S. Wattles*

ROBERT S. WATTLES  
Acting Chief, Personnel Division, OSO

RECOMMEND APPROVAL:

[redacted]

Chief, Administration and Services

APPROVED: *subject to concurrence Personnel Div Com.*

*Howard B. Hallway*  
Assistant Director, Special Operations

*Recommend Approval  
WSJ.*

36  
1.2

SECRET

**SECRET**

②

**Office Memorandum • UNITED STATES GOVERNMENT**

TO : CPD

FROM : Chief, FEZ

SUBJECT: Ann L. Goodpasture  
Temporary Promotion

DATE: 12 December, 1947

1. Subject is administrative assistant at our installation in [redacted]. Due to the increased cost of living in [redacted] request is made that she be given a temporary promotion from a CAF-7 to a CAF-9. The increase in salary, plus the additional cost-of-living and quarters allowances, will be sufficient to permit Miss Goodpasture to meet the highly inflated cost of living in [redacted] an impossibility for the past several months.

2. A review of subject's reports on living conditions in [redacted] reveals that since her arrival in April, she has had to live in temporary quarters on a day-to-day or week-to-week basis. The rooms occupied by subject have been shared with at least one other girl and sometimes two or three. Bathroom facilities are also shared with the other occupants of the hotel. During a period of several months, subject and her roommate occupied a nine by twelve room on the fifth floor of a "walk-up" and shared a bath with four men. This room cost them \$150 a month each. At the present time subject and her roommate are living in a single room, without private bath, and for the privilege are paying \$ Rs. 200 a week each (approximately \$60.).

3. In a dispatch dated 28 November, subject stated that "I am now spending more than my combined salary and allowances to maintain only a moderate standard of living. It appears at present that it is unlikely that any permanent quarters will be found for unmarried members of the staff. . . since four officers' families are en route to [redacted] and three such families presently in [redacted] are without places to live. Any accommodations secured through the [redacted] will of course be made available first to the highest ranking officer in need of housing. Any accommodations found through other channels have so far been prohibitive in price. . . ."

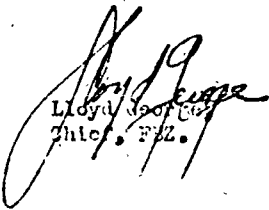
4. In support of subject's statement of conditions she attached, at the [redacted] suggestion, a copy of his report to the [redacted] dated November 7, 1947. Pertinent portions of the [redacted] dispatch have been

**SECRET**

SECRET

excerpted and are appended to this memorandum.

5. Subject's present salary, minus retirement and income tax, is \$105.12 per two-week pay period; her present living and quarters allowance amounts to \$78.45. The proposed increase to a CAF-9 would bring her net salary to \$127.43 per two-week pay period and her living allowance to \$103.07 - a difference of \$46.92 every two weeks. A promotion to a CAF-8 would be insufficient, since her allowances would remain the same and the salary increase would amount only to \$10.75 per pay period.

  
Lloyd George  
Chief, P&Z.

ORIGINATOR :                      P

DEPUTY CHIEF FOR SEA: Don S. Garden DS

- 2 -

SECRET

[Redacted]

[Redacted]

[Redacted] November 7, 1947

[Redacted]

[Redacted]

WASHINGTON

SIR:

I have the honor to refer to my [Redacted] and LSC dated April 3, June 19 and September 15, 1947 respectively, and to report that the housing situation in [Redacted] is getting more critical daily.

\*\*\*\*\*

Not only is living at hotels, unsatisfactory in this climate, but it is far more expensive than any member of this staff can afford. So far the staff has accepted the unsatisfactory and expensive living conditions without undue complaints but this situation cannot continue without seriously affecting morale and forcing resignations, or requests for transfers which I cannot conscientiously disapprove. The local authorities have been requested on numerous occasions to assist this office in obtaining living quarters and, although they have been making vague promises ever since my arrival last February, no houses or apartments have materialized. It is not likely that anything will be obtained through the Government unless a substantial bribe, known locally as [Redacted] is paid. It is generally recognized now that only persons and firms paying [Redacted] get living accommodations.

An endeavor is being made to find a suitable residence for the [Redacted] and staff quarters that can be purchased, but the demand for all types of dwellings has resulted in fantastically high prices and it is doubtful that anything will be obtained.

This office had an opportunity of leasing a floor of a building that could have been made into three apartments as reported in my telegram No. 356 dated October 18, 1947. This request was disapproved by the [Redacted] and it is most unlikely that another opportunity of this sort will arise. It must be pointed out that if any places do become available, the landlord will demand a lease on behalf of the [Redacted] before he will even consider renting the place. Landlords with whom I have talked informed me that if any of their places do become available they will not lease them to members of the staff but will lease them to [Redacted]

I cannot stress sufficiently the seriousness of the present situation particularly, from the financial standpoint and request that the [Redacted] increase the rent allowance for members of the staff who are

14-00000

forced to live in temporary quarters. If this is not done, it will be impossible for them to live within their income if they remain at this

[Redacted]

Respectfully yours,

[Redacted]



SECRET

30 April 1947

Special Funds

Acting Chief, FBZ

Ann L. Goodpasture

1. Above subject arrived in  17 April 1947 according to a letter received from her last week.

2. Subject's promotion to CAF-7 becomes effective upon arrival.

*H. W. Little, Jr.*  
Harry W. Little, Jr.  
Acting Chief, FBZ

ORIGINATOR:

ACTING CHIEF, DIV. 1, FBZ: Don S. Gardan *DSG*

cc:

SECRET

SECRET

6 February 1947

MEMORANDUM FOR THE ACTING CHIEF, PBZ  
Through: ACOPS

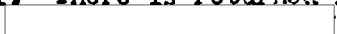
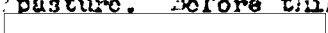
Subject: Request for Designation of Ann Lorene Goodpasture

Reference:

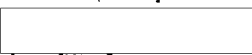


Enclosure: Memorandum for Control via COPS from PBZ, subject, "Request for Designation of Ann Lorene Goodpasture", dated 30 January 1947 (triplicate)

1598

1. There is returned herewith the branch request for a  for Miss Ann Lorene Goodpasture. Before this title can be requested from the  complete information must be furnished.

2. EDUCATION is not to be combined with EXPERIENCE, but is to be set up as in sample personal history statement furnished on 13 September, and is to include names and locations of schools and colleges, dates attended and degrees conferred. The sample statement also specified that language qualifications are to be indicated by speaking, reading and writing abilities.



Control

SECRET

SECRET

30 January 1947

MEMORANDUM

TO : Control

VIA :  *mt*

FROM : Acting Chief, FBZ

SUBJECT : Request for Designation of Ann Lorene Goodpasture

1. Will you please request the  Ann Lorene Goodpasture as administrative assistant to the

(1) This station is not, and has never been, in operation by CIG. However, an intelligence officer has completed his training and will depart from the United States in February to implement the station.

(2) An intelligence officer will depart in February for assignment to the  No CIG personnel are on duty there now.

(3) Miss Goodpasture has been an employee of OSS, SSU, and CIG since February 1944.

(4) Miss Goodpasture is now residing in Washington, D. C. She will complete her CIG training course on 7 February 1947, and will then be ready for entry in the

(5) There has been no previous request for a designation for Miss Goodpasture.

(6) Miss Goodpasture will serve CIG in the capacity of administrative assistant to the senior intelligence officer.

(7) Miss Goodpasture will be the second employee to be assigned to the

(8) Miss Goodpasture's previous experience with OSS in  qualify her for the position of administrative assistant.

(9) For the present it is contemplated that Miss Goodpasture and the senior intelligence officer will be sufficient CIG representation in

*Interviewed by Mr. Jay*

SECRET

100-1637  
1373

SECRET

- 2 -

(10) Miss Goodpasture's present salary is \$2644.80 base, per annum, CAF-5. Upon her arrival in  her base salary per annum will be \$3397.20, CAF-7.

(11) Miss Goodpasture's personal history statement is attached.

SECRET

1637

<b>REQ. ST FOR OVERSEAS TRANSPORTATION</b>		<b>SECRET</b>
<b>SEC. TO:</b>	Assistant Executive for Personnel	8 January 1947
YOUR APPROVAL IS REQUESTED FOR THE OVERSEAS TRANSPORTATION OF		<u>ANN LORELL GOODPASTURE</u> <small>NAME OF TRAVELER</small>
JUSTIFICATION FOR THE TRIP IS:		
Miss Goodpasture is being transferred from Washington, D. C. to <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>		
where she will be assigned as Administrative Assistant at the <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>		
<span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span>		
Designation has not been requested.		
<i>E. January 1947</i> <small>DATE</small>		<span style="border: 1px solid black; display: inline-block; width: 150px; height: 40px;"></span> <small>OFFICER</small>
THE FOLLOWING ACTIONS CONCERNING THE ABOVE TRAVELER WERE COMPLETED ON THE DATES INDICATED BELOW:		
DATE ASSESSED AND APPROVED		DATE SECURITY APPROVED
25 August 1944		19 February 1944
DATE ENTERED ON DUTY	DATE OF OVERSEAS PHYSICAL EXAMINATION	DATE IMMUNIZATION INITIATED
1 December 1946	9 December 1946	6 December 1946
10 January 19 <small>DATE</small>		<span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></span> <small>SIGNATURE (TRANSPORTATION CLEARANCE OFFICER)</small>

DATE 8 Jan 47

TRANSPORTATION ACTION SHEET

NAME Goodpasture, Anna L. BRANCH 7132

Letter of Commitment \_\_\_\_\_  
Draft Status \_\_\_\_\_  
Navy or Marine Reserve \_\_\_\_\_

FORM 36-5 Cargo No. 11575  
Completed 5 March 47  
2 copies to Strohl 5 March 47  
Pick-up date \_\_\_\_\_  
Strohl \_\_\_\_\_  
Pfeifer \_\_\_\_\_

FORM 36-3  
Sec. A.  
Justification \_\_\_\_\_  
Assessment \_\_\_\_\_  
Security \_\_\_\_\_  
EOD \_\_\_\_\_  
Overseas Physical \_\_\_\_\_  
Innaminations \_\_\_\_\_

FORM 36-5 (Auto.) Cargo No. \_\_\_\_\_  
Completed \_\_\_\_\_  
2 copies to Strohl \_\_\_\_\_  
Pick-up Date \_\_\_\_\_  
Strohl \_\_\_\_\_  
Pfeifer \_\_\_\_\_

Sec. B.  
Travel Sponsor \_\_\_\_\_  
Availability Date \_\_\_\_\_

FORM 36-4 Cargo No. 11575  
Completed 5 March 47  
Copy to Strohl 5 March 47  
Misc. \_\_\_\_\_

Sec. C.  
Completed \_\_\_\_\_

FORM 36-4 (Auto.) Cargo No. \_\_\_\_\_  
Completed \_\_\_\_\_  
Copy to Strohl \_\_\_\_\_  
Misc. \_\_\_\_\_

Transfer Letter \_\_\_\_\_  
PCS \_\_\_\_\_  
TDY \_\_\_\_\_  
Auth. For Auto \_\_\_\_\_  
To Duggan \_\_\_\_\_  
To ADSO \_\_\_\_\_  
Returned From ADFO \_\_\_\_\_  
Approved \_\_\_\_\_  
Disapproved \_\_\_\_\_  
Copy to Special Funds \_\_\_\_\_  
Copy to Strohl 7 March 47

Agreement for Auto. \_\_\_\_\_  
Completed \_\_\_\_\_  
Motorised \_\_\_\_\_

Cardex Card checked 5 March 47

Passport No. \_\_\_\_\_

Misc. \_\_\_\_\_

FORM 36-27  
Trans. for Family  
Person to be contacted \_\_\_\_\_  
Date of Movement \_\_\_\_\_  
Trans. of Household effects \_\_\_\_\_  
Person to be contacted \_\_\_\_\_  
Date of Movement \_\_\_\_\_  
Strohl \_\_\_\_\_  
Pfeifer \_\_\_\_\_  
To ALSO \_\_\_\_\_  
Returned from ADFO \_\_\_\_\_  
Copy to Special Funds \_\_\_\_\_  
Copy to Strohl \_\_\_\_\_

Filed 9 April 47

Reported 13 April 47

8 JAN 47  
(Date)

Central Intelligence Group  
New War Department Building  
21st & Virginia Avenue, N.W.  
Washington, D. C.

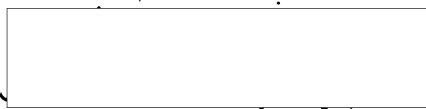
Gentlemen:

Pursuant to Section 7, Public Law 600, 79th Congress, 2nd Session, approved 2 August 1946, I hereby agree to remain in the Government service for the twelve months following my appointment, unless separated for reasons beyond my control. In case of a violation of this agreement, any moneys expended by the United States on account of my travel, expenses of transportation of my immediate family and expenses of transportation of my household goods and personal effects from any place of actual residence at time of appointment to place of employment outside the continental United States, and for such expenses on my return from such post of duty to my place of actual residence at time of assignment to duty outside the United States, shall be considered as a debt due by me to the United States.

It is further understood and agreed by me that I shall be required by Central Intelligence Group to serve a minimum period of ~~twenty-four~~ <sup>18\*</sup> months at my place of employment outside the continental United States, and, if I wish to resign or terminate my appointment or return to the United States before the expiration of ~~twenty-four~~ <sup>18\*</sup> months after the date of departure for my overseas post, the Central Intelligence Group will not pay my return travel expenses from such station outside the United States.

Ann Louise Goddard

WITNESS:



\* agreement with this individual made before  
24 mon. order was promulgated.  
[Signature]

SECRET

22 November 1945

TO : Assistant Executive Officer.

FROM : ERE. *g*

THROUGH: ADO.

SUBJECT: Request For Waiver of Assessment of Ann Loreno GOODPASTURE.

Will you please grant a Waive of Assessment for the proposed assignment of Ann Loreno GOODPASTURE as administrative assistant

Miss GOODPASTURE was previously assessed in August 1944. She has been employed by OSS, ESU and CIG continuously since February 1944. From February 1944 to November 1944, she served as secretary to the Chief, East Asia Economic Section, Far East Division, R&A Branch. From November 1944 to October 1945, she served as secretary and chief clerk to the Chief, OSS, R&A Branch, India, Burma and China Theaters, in New Delhi, India, Kandy, Ceylon and Kuming, China. From October 1945 to December 1945, she was assigned as secretary and chief clerk, IRIS, China Theater in Kuming, China and Shanghai, China. From December 1945, until the present time, she has been assigned as reference clerk, Order of Battle Section, SI, Shanghai, and to Registry, Washington.

*O/N*  
*add*

SECRET



PERSONNEL ACTION REQUEST  
(TO BE SIGNED AND SUBMITTED IN TRIPlicate)

NAME <b>ROOFPARTIRE, Ann L.</b>	CLASSIFICATION	INITIAL	DATE
	VICE		<b>12-11-46</b>
NATURE OF ACTION: <b>Termination to accept exempted appointment.</b>	IA	<b>Re. # 916 C.S.C. # 9, 7-10-42</b>	
	VV		
	NEW		
EFFECTIVE DATE: <b>17 November, 1946</b>	BUDGET		<b>12-2-46</b>
FOR SEPARATIONS, TRANSFER OUT, AND RESIGNATIONS LAST WORKING DAY <b>18 November 1946</b>			
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:			
SPECIAL INSTRUCTIONS: 1 FOR MILITARY LEAVE WITHOUT PAY - ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO-STAT OR CERTIFIED COPY. 2 EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.	EMPLOYMENT		<b>12-22-46</b>
	CHIEF, CIVILIAN PERSONNEL BRANCH		<b>12-22-46</b>
FROM		TO	

TITLE	<b>Clark</b>
GRADE AND SALARY	<b>CAS-6 \$2770.20</b>
BRANCH	<b>Director's Office, Executive Office</b>
DIVISION	<b>Registry</b>
SECTION	<b>FIELD</b> <del>Industrial Analysis</del>
OFFICIAL STATION	<b>Washington, D. C.</b>
DEPT. OR FIELD	<b>Departmental</b>

REMARKS OR PROPOSED DUTIES:

**Please transfer leave to Special Funds.**

**APPROVED**

DEC 26 1946

RECOMMENDED:

*Phillips*

DATE

**9/12/46**

OFFICE CHIEF, BRANCH CHIEF, OR ADMINISTRATIVE OFFICER

ENGAGEMENT SHEET

SECRET

- 1. To be filled out in duplicate by the Unit Administrative Officer for all prospective employees to be paid from Special Funds.
- 2. To be accompanied by detailed job description, complete biographical sketch, and a formal notice of security clearance, and Personnel Action Request if engagement is overseas.
- 3. To be approved or accepted by the officers in the order listed below.
- 4. Original to be retained by S.F.; copy to be returned to initiating Administrative Officer.

12 November 1946

- 1. NAME: Ann L. GOODPASTURE
- 2. LEGAL RESIDENCE: Oklahoma
- 3. ADDRESS OF LOCAL LIVING QUARTERS: 1514 17th St., HH Apt. 111 TEL. Da 0300, X-1112
- 4. ENTRANCE ON DUTY DATE: 1 December 1946
- 5. ANNUAL SALARY: 2644.50 2772.25 CLASSIFICATION: CAF-5
- 6. PERMANENT SECTION:
- 7. POSITION: Clerk CONTROL NO. \_\_\_\_\_
- 8. IF SUBJECT HAS BEEN TRANSFERRED, STATE BUREAU, BRANCH, OR DEPARTMENT OF THE U.S. GOVERNMENT FROM WHICH TRANSFERRED: Civil Service
- 9. GENERAL REMARKS: Please request leave balances from vouchered payroll.

APPROVAL AND ACCEPTANCE  
(in accordance with existing personnel engagement procedures)

- A. ADMINISTRATIVE OFFICER [Signature] DATE 13 Nov
- B. BRANCH CHIEF \_\_\_\_\_ DATE \_\_\_\_\_
- C. CHAIRMAN, PERSONNEL REVIEW COMMITTEE \_\_\_\_\_ DATE \_\_\_\_\_
- D. (For the) ASSISTANT DIRECTOR [Signature] DATE 15 Nov 1946
- E. CHIEF, SPECIAL FUNDS [Signature] DATE 18 Nov 46

SECRET

## Office Memorandum • UNITED STATES GOVERNMENT

SECRET

TO : ADO  
Through: Acting Chief, FEZ  
FROM : Acting Chief, Div. 1, FEZ  
SUBJECT: Ann Lorene Goodpasture

DATE: 5 November 1946

Division 1, FBZ, requests that the above subject be transferred from SSU Registry to Div. 1, FBZ. Three copies of her Form 57 are attached.

It is planned to send Miss Goodpasture to [redacted] upon completion of her CIC and [redacted] training. Her present grade is a CAF-5, but her duties in her new position entitle her to a promotion to a CAF-7 upon her arrival in [redacted]. A job description is attached.

When Miss Goodpasture first made known her desire to return to the Far East, this division contacted Registry and found that they were willing to release her for an overseas assignment. A replacement has already been obtained for her and Miss Goodpasture will be on leave from 4 November to 2 December, 1946. Registry agreed to carry her on their rolls until their personnel is terminated by SSU or until she can be picked up by CIC—which ever is sooner.

SECRET

JOB DESCRIPTION

**SECRET**

**Junior Intelligence Officer**

Clerk in [ ] establishment abroad -- CAF-7

Perform cryptographic duties for Senior Intelligence Officer; set up and maintain counter-intelligence card files and such other personality or intelligence files and records as are necessary for the use and information of the [ ] officer and the Senior CIG representative; assist in preparation of positive and counter-intelligence reports to Washington; collect and report to the Senior CIG officer such intelligence as she may be requested to obtain; perform secretarial and clerical duties as are required by Senior CIG officer.

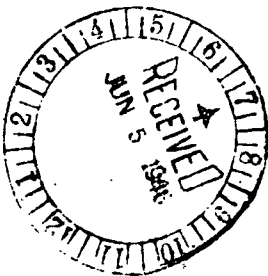
**OSS PERSONNEL ACTION REQUEST**  
(TO BE SIGNED AND SUBMITTED IN TRIPLICATE)

NAME: <u>Ann L. Goodpasture</u>	CLASSIFICATION	<u>Civil</u>	INITIAL	<u>KALD</u>	DATE	<u>5/31/46</u>
	VICE					
NATURE OF ACTION: <u>Transfer w/SSU</u>	IA	<input checked="" type="checkbox"/>	<u>cdl # 9 Bu # 4916</u>		<u>7/1/42</u>	
	VV					
EFFECTIVE DATE: <u>5 June 1946</u> <u>As soon as possible</u>	NEW					
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:	BUDGET	<u>135</u>			<u>5729</u>	
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:	EMPLOYMENT				<u>6/3</u>	
SPECIAL INSTRUCTIONS: 1. FOR MILITARY LEAVE WITHOUT PAY—ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO- STAT OR CERTIFIED COPY. 2. EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.	CHIEF, CIVILIAN PERSONNEL BRANCH			<u>Reg XVI Sec 2</u>		

FROM		TO
TITLE	<u>Clerk-Steno</u>	<u>Clerk</u>
GRADE AND SALARY	<u>CAF-5, \$2430 per annum</u>	<u>CAF-5, \$2430 per annum</u>
BRANCH	<u>SI</u>	<u>Registry</u>
DIVISION		
SECTION		<u>Field</u>
OFFICIAL STATION	<u>Washington, D. C.</u>	<u>Washington, D. C.</u>
DEPT. OR FIELD	<u>Field</u>	<u>Departmental</u>

REMARKS OR PROPOSED DUTIES:

Miss Goodpasture is on an A-1-7 which expires on 30 June. She is to be assigned to the position being vacated by



JUN 5 1946



RECOMMENDED: Louis M. Secor  
Secor

24 May 46  
DATE:

14-00000

Mr. Karlew, Secretariat  
via Mr. May  
C. J. Gilbert, Registry

22 May, 1946

Anne Goodpasture

It is requested that action be started to transfer Mrs. Anne  
Goodpasture, CAF-5, to Registry, Document Analysis Unit, to replace  
Mrs. , CAF-5, who is being transferred to Files.

OFFICE OF STRATEGIC SERVICES

Date: 2 April 1948

REQUEST FOR DOMESTIC TRAVEL ORDER

Anne L. Goodpasture CAF-8, 22320 p.c.  
(Name) (Grade and Title) (Serial No.)  
SI Washington, D. C.  
(Office or Branch) (Official Station)

1. Itinerary and justification of proposed travel (all stop overs must be specifically indicated and the need for the travel fully explained).

Embarked 1800 hrs	4 March
Left Shanghai	8 March
Arrived Seattle	20 March) Involuntarily detained by
Left Seattle	26 March) POB Emb. Officer
Arrived Chicago	29 March
Left Chicago	29 March
Arrived Washington	30 March

2. Duration of travel or authority requested: From 4 March To 30 March  
3. Mode of travel (Check "X"):

- Personally owned automobile.  Common Carrier.  Government vehicle.  
(Commercial) (Commercial)  
 Extra fare train  Airplane (Military)  Vessel (Military)

\*4. Allowance for personally owned automobile recommended on following basis (check):

- (a) \_\_\_ cents per mile, as being more economical and advantageous to the Government.  
Justify: \_\_\_\_\_  
 (b) \_\_\_ cents per mile when not practicable to use common carrier.  
 (c) \_\_\_ Actual expense.

\*5. Per diem allowance recommended: **Usual allowance**

6. Number of transportation requests required: \_\_\_ Tax exemption certificates required  
7. Estimated cost: \$ 200.  
8. Allotment Account No.: 2101  
9. Special provisions:

Approved:

Livia W. Jewman Adm. Asst. Staff I and II  
(Office or Branch Chief) (Title) SI

Leave Unit

2 April 1946

Staffs I and III, SI

Miss Ann L. Goodpasture

Miss Ann L. Goodpasture reported back to SI Washington from Shanghai on 1 April 1946. On the trip back, she developed a rather serious ear ailment, and it is feared that an operation may be necessary. Dr. Thompson of the Medical Division was going to attempt to have her admitted to a hospital Monday night for further attention and treatment. After release from the hospital she will go to her home in Tipton, Oklahoma.

In view of the above facts, we shall show Miss Goodpasture as being on sick leave (approximately one month) until her return to duty, at which time she will fill out the form 71 and any other necessary papers.

Livia M. Demian



PE25731

Mr. Chester J. Botticelli  
Payroll Section

2 April 1946

Staffs I and III, SI

Miss Ann L. Goodpasture

Miss Ann L. Goodpasture who returned from Shanghai on 1 April 1946 has informed me that she has cancelled her "Power of Attorney" in writing and that she has not been paid since 9 February.

It is requested that her case be checked and necessary steps be taken to reimburse her. Miss Goodpasture has been a Clerk-Steno, CAF-5, \$2320 with the SI office since 16 Dec. 1945. She departed from Shanghai on 5 March and arrived in Washington on 30 March.

Miss Goodpasture is being hospitalized immediately, due to a serious ear ailment which developed on the trip back, and will probably be out for approximately one month. Any payments should be mailed to her in Tipton, Oklahoma (no Street address), until further notice.

Livia M. Denian

OSS PERSONNEL ACTION REQUEST  
(BE SIGNED AND SUBMITTED IN TRIP (ATE))

NAME: <u>Goodpasture, Ann L.</u>		INITIAL	DATE
NATURE OF ACTION: <u>Transfer</u> <u>Change in official station</u>		CLASSIFICATION <u>Civil</u>	<u>JBC</u>
EFFECTIVE DATE: <u>30 March 1946</u>		VICE	
FOR REPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:		IA	<u>F-5065</u>
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:		VV	
SPECIAL INSTRUCTIONS: 1. FOR MILITARY LEAVE WITHOUT PAY - ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO- STAT OR CERTIFIED COPY 2. EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.		NEW	
		BUDGET	<u>4-3</u>
		EMPLOYMENT	<u>F-5</u>
		<u>A-1-7</u>	
		CHIEF, CIVILIAN PERSONNEL BRANCH	<u>RC. [Signature]</u>

FROM		TO
TITLE	<u>Clerk-Steno</u>	<u>Clerk-Steno</u>
GRADE AND SALARY	<u>CAF-5, \$2320 per annum</u>	<u>CAF-5, \$2320 per annum</u> <u>2420</u>
BRANCH	<u>SI</u>	<u>SI</u>
DIVISION		
SECTION		
OFFICIAL STATION	<u>Shanghai, China</u>	<u>Washington, D. C.</u>
DEPT. or FIELD	<u>Field</u>	<u>Field</u>

REMARKS OR PROPOSED DUTIES:  
\* Not to exceed 90 days within continental U.S.

APR 11 1946  
 CIVILIAN PERSONNEL  
 DIVISION OF PERSONNEL SERVICES

APPROVED  
 COPY  
 APR 8 1946

RECEIVED  
 APR 3 3 49 PM '46  
 CIVILIAN PERSONNEL  
 DIVISION OF PERSONNEL SERVICES

Livia M. [Signature]

OSS PERSONNEL ACTION REQUEST  
(TO BE SIGNED AND SUBMITTED IN TRIPLICATE)

NAME: Goodpasture, Anne		INITIAL: <i>AG</i>	DATE: 1-22-46
NATURE OF ACTION: Transfer		CLASSIFICATION: 5065	
EFFECTIVE DATE: 16 Dec 45		VICE	
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:		IA	
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:		VV	
SPECIAL INSTRUCTIONS: 1. FOR MILITARY LEAVE WITHOUT PAY—ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO- STAT OR CERTIFIED COPY 2. EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.		NEW	
		BUDGET	1-14
		EMPLOYMENT	1-24
		CHIEF, CIVILIAN PERSONNEL BRANCH	1-25

	FROM	TO
TITLE	Clerk-Steno	Clerk-Steno
GRADE AND SALARY	CAP-5, \$2320	CAP-5, \$2320
BRANCH	R&A	SI
DIVISION		
SECTION		
OFFICIAL STATION	Shanghai Field	Shanghai Field
DEPT. OR FIELD		

REMARKS OR PROPOSED DUTIES:

Information from Cable #30712, 5 Jan 46

RECEIVED  
JAN 25 1 43 PM '46  
CIVILIAN PERSONNEL  
OFFICE OF  
STRATEGIC SERVICES

APPROVE  
COPY

JAN 29 1946

RECEIVED  
JAN 19 11 51 AM '46  
CIVILIAN PERSONNEL  
OFFICE OF  
STRATEGIC SERVICES

9 Jan 46

**REQUEST FOR SERVICE RECORD**

OFFICE OF STRATEGIC SERVICES

(Department, Bureau, independent office, and branch)

March 3, 1944

(Date)

Chief, Retirement Division,

U. S. Civil Service Commission, Washington, D. C.

It is requested that the complete official service record and retirement deductions by fiscal years be furnished for the following-named employee:

1. Name in full Goodpasture, Ann L.  
(Surname, first name, and middle initial; if married woman give maiden name)
2. Date of birth November 28, 1918
3. Date last appointed to this office February 12, 1944
4. Date deductions began \_\_\_\_\_
5. Service claimed as follows: \_\_\_\_\_

DEPARTMENT, BRANCH, OR INDEPENDENT OFFICE	CURRENT AGENCY, ETC., AND LOCATION	TITLE OF POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
War Relocation Authority	Personnel Mgmt Wash. D. C.	Clk. Stone	1620	12	1	43	2	28	44

REMARKS: \_\_\_\_\_

(Signature of appointing officer) \_\_\_\_\_

(Title) Director of Personnel

DATE	SENT FORWARDED TO--	Basic earnings	Additional service

To \_\_\_\_\_

Please furnish the Commission with a certified record of service and retirement deductions on Form 2806 for the periods indicated by mark (X) on the above schedule, together with a copy of this request. Prompt compliance with this request will be appreciated.

By direction of the Commission:  
Very respectfully,

*Lewis H. Fisher*  
LEWIS H. FISHER,  
Chief, Retirement Division.

(Read carefully instructions on back)

Strategic Services

February 10, 1946

2387

XXXXXX Indefinite  
XXXXXX

for the duration of the  
emergency.

1 P Clerk-Typographer

CAF-4, \$1600

Research & Analysis  
War Post  
Manpower and Military  
Supply

REGULATION IX

The transfer of Miss Ann L. Goodpasture from War Relocation Authority, \$1650 per annum, under Regulation IX is requested. Date of birth: November 20, 1918, place of birth: Colina, Tennessee, address: 247 Delaware Avenue, S. E., Apartment 308, Washington, D. C.

Under the general supervision of the Chief, Manpower and Military Supply Section, serves as his secretary; assembles and digests information and data for use by her superior in preparing intelligence and research reports and documents; takes and transcribes difficult dictation consisting of correspondence, memoranda and reports involving foreign geographic terminology; determines priority on office work distribution; takes verbatim transcripts of important telephone calls, conferences and meetings; independently composes correspondence in reply to requests for specific strategic information; receives callers and disposes of their business personally or refers them to the proper official; answers telephone inquiries requiring an intimate knowledge of the activities of the Section; arranges appointments, meetings and conferences; maintains leave and attendance records for the Section; is responsible for the maintenance of complete office files of research documents. (OVER)

Form 57 attached.

CONF. NO. D-98  
2/21

Acting Chief, Employment and  
Sement Division

SECRET  
(When Filled In)

1. SER. SERIAL NO. 057303		BIOGRAPHIC PROFILE (PART I)			SGD: 2 Jun 1961	
2. NAME (Last-First-Middle) COOPERSTURE, Ann Loreno				3. SEX F	4. DATE OF BIRTH 28 Nov 1918	5. LONGEVITY CONC. DATE 18 Sep 1967
6. MARITAL STATUS Single	7. DEPENDENTS (Include own spouse) 0	8. NO. YEARS OF BIRTH	9. US NATURALIZATION STATUS NA			
10. CAREER STATUS MEMBERSHIP Jul 1954	11. OTHER STATUS	12. LAST HCO. APT. QUAL. FOR May 1972 Retirement	13. EVAL. FOR MedRet	14. EVAL. FOR CIA		
15. CURRENT RESERVE STATUS X	16. GRADE	17. ACTIVE DUTY WITH CIA CAT - 1	18. RELEASE TO MIL. SER. CAT. 2	19. TO BE RETIRED DEFERRED		
20. ASSESSMENT DATE None	21. PROFESSIONAL TEST DATE None	22. LANGUAGE APTITUDE TEST DATE None				
23. NON-CIA EMPLOYMENT 1941-32 Elko Photographic Finishing Co, Okla City, Okla - Photo Tech 1942-43 Office of Price Administration, DC - Clerk-Typist, Employee Services Officer 1943-44 Office of Emergency Management, DC - Clerk-Stenographer 1944-47 OSS, SSU & CIC, DC, India, Ceylon, China - Clerk, Clerk-Stenographer, Administrative Assistant						
24. NON-CIA EDUCATION 1937-41 Univ of Oklahoma - BS Education, Arts & Science 1941-42 Hills Univ, Oklahoma City, Okla - Business Administration; Typing						
25. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Spanish - R,W High; P,U Intern; S, Slight; T, None May 1962 (disclaims pro Apr 1969)				
26. AGENCY SPONSORED TRAINING 1947 State Orient 1951 Photo 1951 Comm Party Org & Ops 1955 CI Ops 1947 OSO Training 1951 CI Tech 1951 Confid Funds (tutorial) 1949 Intol Orient 1951 Secret Writing 1951 Picks & Locks 1949 Ops Famil 1951 Admin Proc 1956 Cable Writing Refresher 1951 Comm Briefing 1955 Countespionage Ops						
27. CIA EMPLOYMENT HISTORY SINCE 10 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)						
28. EFFECTIVE DATE	29. POSITION TITLE & OCCUPATIONAL CODE	30. GRADE	31. ORGANIZATION & ORG. TITLE (if any)			32. LOCATION
Sep 1947	Admin Asst 0341.02	7	CSO/FBZ			
Dec 1947	" 0341.02	9	" "			
Dec 1948	" 0341.02	7	" "			Hq
Mar 1949	Reports Off 0132.58	P-2	CSO/COPS/FBZ/SEA/Dlv #1.			"
Dec 1950	I.O. (Ops) 0132.00	GS-7	CSO/FDZ/SEA/Branch 1			"
Feb 1951	" " 0132.00	9	" " " " "			"
May 1951	" " 0132.00	9	CSO/FDT			Montorrey
Mar 1953	I.O. 0132.00	9	DDP/WI-3			"
Feb 1954	I.O. (FI) 0132.06	9	FI DDP/WI/PASUCCESS			Hq
Jul 1954	" " 0136.51	11	FI " " "			"
Dec 1954	Area Ops Off 0136.01	11	FI DDP/NEA/IndiaPakistanAfghanBr			"
Feb 1955	Paramilitary Off 0136.11	11	DE DDP/NE/French Br/FI,PP,FI			"
Oct 1955	Ops Off (CS) 0132.52	11	DE DDP/NE/FI Staff/CE Section			"
Jun 1956	I.O. (FI) 0136.51	11	DE DDP/NEA/FI Stf/Rpts&RentsSec			"
Sep 1956	" " 0136.51	12	DE DDP/NEA/FI Staff			"
May 1957	" " 0136.51	12	D DDP/WI-3/Mexico Sta			Mexico City
Nov 1962	Ops Off 0136.01	13	D " " "			"
Jan 1964	" " Nov '68 re 0136.01	13	D DDP/WI-1/Mexico Station			"
Dec 1968	" " 0136.01	13	D DDP/WI/Nov Comp (Other)			Hq
33. DATE REVIEWED 6 Mar 1973	34. PROFILE REVIEWED BY hms/cal	35. HFDST CL BY 010005	36. STAGE 1 IS REVIEWED & VERIFIED BY EMPLOYEE (Continued)			

**SECRET**  
(When Filled In)

PERS. SERIAL NO. 057303	<b>BIOGRAPHIC PROFILE (PART I - Continued)</b>
NAME (Last, First, Middle) GOODPASTURE, Ann Lorene	DATE OF BIRTH 28 Nov 1918

19. CIA EMPLOYMENT HISTORY SINCE 18 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)						
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	RD	ORGANIZATION & ORGAN. TITLE (If any)	LOCATION	
Oct 1969 - Oct 1970	Ops Officer 0135.01	13	DDP/WH	Historical Staff - Hq		
Jul 1972	" "	0136.01	D	DDP/CISstf/OpsGp/NEBranch	Hq	
			D	DDP/CISstaff/Dev Comp	"	

DATE REVIEWED 6 Mar 1973	PROFILE REVIEWED BY hmc/cal	E 2 IMPDET CL BY 010025
-----------------------------	--------------------------------	----------------------------

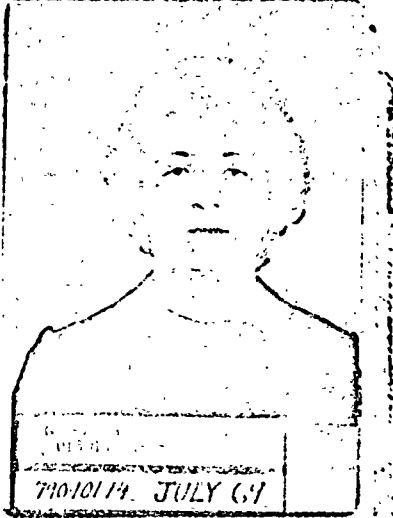
FORM 1200-1a  
7-67

**SECRET**

PROFILE

(4)

SECRET  
(When Filled In)

PERS. SERIAL NO. 057303		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) GOODPASTURE, Ann Lorene		DATE OF BIRTH 28 Nov 1918	
23. SUMMARIES OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS			
 <p>71010114 JULY 69</p>			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION Commendation 1954 from the DCI for splendid contribution to a project of special sensitivity and importance. Commendation 1959 from COS, Mexico City, for contribution to the preparation of charts for General Cassidy's visit.			
27. DATE REVIEWED 6 Mar 1973		28. PROFILE REVIEWED BY hms/cal	
		E 2 IMPDET CL BY 010006	

FORM NO. 1200 (PART 2) REPLACES FORM 1060 (PART 2) WHICH IS OBSOLETE. SECRET

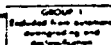
PROFILE

(4)



**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				057303			
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX		4. GRADE	5. SD
GOODPASTURE ANN L.		11/28/18		F		13	D
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR. OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/CI/OPS		Washington, D.C.	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL			
CAREER-PROVISIONAL (See instructions - Section C)				REASSIGNMENT SUPERVISOR			
SPECIAL (Specify):				REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
30 November 1971				18 October 1970 - 31 October 1971			
<b>SECTION B</b>				<b>PERFORMANCE EVALUATION</b>			
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Monitors all operational correspondence from the Far East Division Stations for counterintelligence leads and evidence of hostile espionage operations.							RATING LETTER
SPECIFIC DUTY NO. 2 Reviews field project outlines for evidence of penetrations, provocations, or foreign intelligence relationships. Advises Headquarters officers in preparation of security reviews. Represents CI Staff at DDP project review meetings when the senior officer is not available.							RATING LETTER
3 Alternate Headquarters case officer to the Chief, CIOPS/FE for sensitive Prescribed and Limited Distribution counterintelligence projects handled by CI Staff.							RATING LETTER
SPECIFIC DUTY NO. 4 Coordinates cables and dispatches from FE Division Headquarters to field stations on CI cases and agent clearances.							RATING LETTER
SPECIFIC DUTY NO. 5 Maintains background files for use in consultation with FE Division officers on CI problems.							RATING LETTER
SPECIFIC DUTY NO. 6 Prepares for Chief, CI, summaries of counterintelligence incidents which suddenly develop such as arrests, defections, and newspaper exposures.							RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

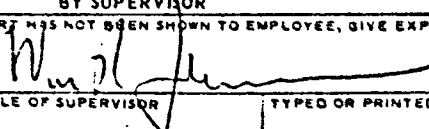
Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for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

FEB 11 2 11 '76

See memorandum in lieu of Fitness Report.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
WHY IS 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
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Ann L. GOODPASTURE  
18 October 1970 - 31 October 1971

To the immense regret of this writer Ann Goodpasture is retiring very soon. It would be silly to rate her competitively against any of her colleagues, male or female, young or merely well-preserved. Concerning her fitness be it recorded that she is very fit indeed to perform any of the tasks listed as her current ones or almost any others I can think of at almost any grade. I venture to rate her over-all performance, thirty years of it, as OUTSTANDING. Ann is one of the tough warp-threads on which this organization is woven, and when she retires the fabric of this organization will be weakened.

  
Chief, CI/OPS/FE

EMPLOYEE SIGNATURE:

*Ann L. Goodpasture*  
Ann L. Goodpasture

16 FEB 1972

Date

COMMENTS OF REVIEWING OFFICIAL:

Miss Goodpasture is indeed a fine officer who consistently turns in a Strong performance when she is not doing an outstanding job. She is an excellent office and project manager who is cost conscious and she is a careful thorough instructor and briefer. Her retirement will leave a great gap in CI/OPS and, as Mr. Johnson has said, in the organization. I hope she gets the official Agency recognition she deserves for the many years she has made substantive contribution to the CS.

*N. Scott Miler*  
N. Scott MILER  
Chief, CI Operations

SECRET

17.2.72.

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF		DATE 14 June 1972	FILE NO. 336
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION	SS NUMBER 446-14-9768	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 057303	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) CI	ID CARD NUMBER	
ATTN:	Chief Support Staff	<input type="checkbox"/>	ESTABLISHED
REF:	Retirement Debriefing	<input checked="" type="checkbox"/>	DISCONTINUED
SUBJECT:	UNIT GOODPASTURE, Ann L.		

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

ESTABLISHMENT OF <input type="checkbox"/> BLOCK RECORDS	<input checked="" type="checkbox"/> CANCELLATION OF <input type="checkbox"/> UNBLOCK RECORDS
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE	<input checked="" type="checkbox"/> EFFECTIVE DATE: EOD
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <input type="checkbox"/> TDY <input type="checkbox"/> OTHER (Specify)	<input checked="" type="checkbox"/> SUBMIT FORM 3254 - CIA - W-2 TO BE ISSUED. (HHR 20-11)
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)	<input checked="" type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)
	NA EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>
SUBMIT FORM 3254 - W-2 TO BE ISSUED. (HHR 20-11)	<input checked="" type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS
SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (NR 240-2*)	NA SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (NR 240-2*)	DO NOT WRITE IN THIS BLOCK
EAA. CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>	<b>MUST REMAIN TOP OF FILE</b>
SUBMIT FORM 2688 FOR <input type="checkbox"/> HOSPITALIZATION CARD	
REMARKS AND/OR COVER HISTORY	
Subject will be acknowledged as CIA for entire period of employment and is not to reveal specific places or locations of cover assignments.	
Forwarding address: 4200 Cathedral Avenue Washington, D.C.	
Employment address: None	
DISTRIBUTION: COPY 1 - CO COPY 2 - OPERATING COMPONENT COPY 3 - O/OS COPY 4 - DL/TELSVC COPY 5 - OF COPY 6 - GCS - FILE	<i>James H. Garfield</i> CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF _____		DATE 13 May 1971
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION	FILE NUMBER 336
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 057303
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER
ATTN:	Chief/WH Support Staff	<input type="checkbox"/> BACKSTOP ESTABLISHED
REF:	Form 1413 dated 11 May 1971	<input checked="" type="checkbox"/> DISCONTINUED
SUBJECT:	GOODPASTURE, Ann L.	UNIT: _____
<b>KEEP ON TOP OF FILE WHILE COVER IN EFFECT</b>		
<input type="checkbox"/> ESTABLISHMENT OF _____ (OPM 20-800-11)	<input type="checkbox"/> BLOCK RECORDS	<input checked="" type="checkbox"/> CANCELLATION OF _____ (OPM 20-800-11)
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE _____	B. CONTINUING AS OF _____	DATE From EOD
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)	<input checked="" type="checkbox"/> ASCERTAIN THAT _____ CIA _____ W-2 BEING ISSUED. (HNB 20-11)	<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS.
<input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR-240-2a)	DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
<input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-2a)		
<input type="checkbox"/> SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD		
REMARKS AND/OR COVER HISTORY  Subject is to indicate CIA as place of employment for entire period and not to reveal specific places or locations of cover assignments.		
DISTRIBUTION: COPY 1 - CD COPY 2 - OPERATING COMPONENT COPY 3 - D/OS COPY 4 - OL/TELSVC COPY 5 - OF COPY 6 - CCS - FILE	RF: km	<i>James A. Franklin</i> CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF

FORM 1551 USE PREVIOUS EDITION 12-70

SECRET

(13-20-43)

VIA Air (encl)

DISPATCH NO. (MVA-)

**SECRET**  
CLASSIFICATION

TO Chief, WH Division

DATE 25 June 1957

FROM Chief of Station, Mexico City

SUBJECT GENERAL - Initiative

SPECIFIC -  *ANNE GOODPASTURE*

ACTION REQUESTED: See Para 5.

1. The following is submitted for the information of C/WH/ADMIN and the additional dissemination as considered necessary.

2. On 25 May 1957 the personal automobile owned by subject was hit by a tornado, removing the hood and other parts of the body. The auto was in custody of subject's brother (in the United States) who contacted the Lawton, Oklahoma, claims adjuster for subject's car insurance (the GEICO Government Employees Insurance Company, Washington, D.C.) who authorized complete coverage. Subject was unaware of the accident until repairs had been completed. There were no personal injuries and no newspaper accounts as this loss was insignificant compared to catastrophic flood and tornado damages in the area.

3. On the insurance policy taken out in 1955, Subject's employment was shown as U.S. Government with the MEXICO address. The claim to be valid had to show the same. The policy could not be amended to reflect subject's ostensible unemployment as this type of insurance is available only to U.S. Government employees.

4. Subject brought his automobile into Mexico on 1 June 1957 and is advising the GEICO that he expects to be in Mexico indefinitely and desires that his U.S. insurance be cancelled with receipt of the letter (probably about 10 June 1957.)

5. If queried by GEICO, it is requested that HQ acknowledge subject's MEXICO employment to cover the period of the accident.

RBR  
3 June 57  
Distribution:  
3-Hqtrs  
2-Files



*Richard C. Curtis*  
**THIS INFO MUST REMAIN ON TOP OF FILE**

**SECRET**  
CLASSIFICATION

101-28 A

SECRET  
(When Filled In)

RCS: 5 JULY 73

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
057303		GOODPASTURE ANN L.									
3 NATURE OF PERSONNEL ACTION								4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT	
UNDER CIA RETIREMENT AND DISABILITY SYSTEM FROM ESL								MO 06 DA 30 YR 73		REGULAR	
6 FUNDS		V TO V		V TO CF		7 Financial Analysis No Chargeable		8 CSC OR OTHER LEGAL AUTHORITY			
X						3227 0163 0000		PL 88-643 SECT 231			
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION					
DDO/CI STAFF DEVELOPMENT COMPLEMENT						WASH., D.C.					
11 POSITION TITLE						12 POSITION NUMBER					
OPS OFFICER						9997					
14 CLASSIFICATION SCHEDULE (GS, 18, etc.)				15 OCCUPATIONAL SERIES		16 GRADE AND STEP					
GS				0136.01		13 7					
18 REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF											
19 ACTION CODE	20 Employ Code	21 OFFICE CODING		22 STATION CODE	23 INTEGREE CODE	24 Hdqtrs Code	25 DATE OF BIRTH		 <p>GOODPASTURE ANN L. 013914 1918</p> <p>71010114 JULY 69</p>		
45	40	NUMERIC	ALPHABETIC				MO 11 DA 28				
28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Correction / Cancellation						
MO DA YR		1. CMC	CODE	CHE(0000)	TYPE	MO DA					
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI - HEALTH INSURANCE		40 SOCIAL SECURITY NO.	
CODE 0 NONE 1-5 PT. 2-10 PT.		MO DA YR		MO DA YR		CAR BESV PROV. TEMP		CODE CODE 0-WAIVER 1 YES		HEALTH INS CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA			
CODE 0 NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YRS) 3-BREAK IN SERVICE (MORE THAN 3 YRS)						FORM EXECUTED 1 YES 2 NO		CODE NO TAX EXEMPTIONS		FORM EXECUTED 1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION											
											

1150  
Mfg. 11-71

Use Previous Edition

SECRET  
DIMS

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
GCDPASTURE ANN L	057303	31	997	V GS 13 7	\$23,642



SECRET  
(When Filled In)

LNL: 24 OCT 72

NOTIFICATION OF PERSONNEL ACTION							
1 SERIAL NUMBER 057303		2 NAME (LAST-FIRST MIDDLE) GOODFASTURE ANN L					
3 NATURE OF PERSONNEL ACTION EXTENDED SICK LEAVE DISABILITY RETIREMENT				4 EFFECTIVE DATE MO DA YR 10 23 72		5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS X		V TO V CF TO V		V TO CF CF TO CF		7 Financial Analysis No Chargeable 3227 0183 0000	
9 ORGANIZATIONAL DESIGNATIONS DDP/CI STAFF DEVELOPMENT COMPLEMENT				10 LOCATION OF OFFICIAL STATION WASH., D.C.			
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 9997		13 SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, LR, etc) GS		15 OCCUPATIONAL SERIES 0135.01		16 GRADE AND STEP 13 7		17 SALARY OR RATE 22457	
18 REMARKS OTHER							

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 31		20 Employ Code 40		21 OFFICE CODING NUMERIC ALPHABETIC 31997 CI		22 STATION CODE 75019		23 INTEGRITY CODE		24 Hdqtrs Code		25 DATE OF BIRTH MO DA YR 11 28 18			26 DATE OF GRADE MO DA YR			27 DATE OF LEI MO DA YR		
28 NTE EXPIRES MO DA YR 10 23 72			29 SPECIAL REFERENCE SL		30 RETIREMENT DATA 1 CSC 2 CIA 3 FICA 5 NONE		31 SEPARATION DATA CODE		32 Correction / Cancellation Data TYPE MO DA YR			33 SECURITY REQ. NO.			34 SEX					
35 VET PREFERENCE CODE 0-NONE 1-5 PT. 2-10 PT.		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY CAR BESV PROV IEMP		39 FEGLI / HEALTH INSURANCE CODE 0-WAIVER 1 YES		40 SOCIAL SECURITY NO.										
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)				42 LEAVE CAT. CODE		43 FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO		44 STATE TAX DATA NO TAX EXEMPTIONS FORM EXECUTED 1-YES 2-NO		STATE CODE										

SIGNATURE OR OTHER AUTHENTICATION

FORM 5-66 1150 Use Previous Edition Mfg 11-71

SECRET MLH

POSTED  
11-01-72  
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION (When Filled In)

U.S. GOVERNMENT PRINTING OFFICE: 1965 O - 281-100

LH: 28 JUL 72

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)									
057303		GOODPASTURE ANN L									
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT				
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS					07 23 72		REGULAR				
6 FUNDS		7 V TO V		8 V TO CF		9 Financial Analysis No. Chargeable		10 CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		3227 0183 0000		50 USC 403 J			
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION						
DDP/CI STAFF DEVELOPMENT COMPLEMENT					WASH., D.C.						
11 POSITION TITLE					12 POSITION NUMBER		13 SERVICE DESIGNATION				
OPS OFFICER					9997		D				
14 CLASSIFICATION SCHEDULE (GS, BR, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE				
GS			0136.01		13 7		22487				
18 REMARKS											
OTHER W2 INFO: CIA											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INDEGREE CODE	24 MILITARY CODE	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF LEI	
16	18	31997	CI	75013		1	11 28 18				
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Corrective Concomitant Data		33 SECURITY REG NO	34 SER
								EOD DATA			
35 VET. PREFERENCE		36 SERV. COMP. DATE		37 LONG COMP. DATE		38 CAREER CATEGORY		39 FEES / HEALTH INSURANCE		40 SOCIAL SECURITY NO	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT. CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA			
0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 2 YRS 3 BREAK IN SERVICE MORE THAN 2 YRS											
SIGNATURE OR OTHER AUTHENTICATION:											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">67-28-12</p> </div>											

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR	STEP	NEW SALARY
GOODPASTURE ANN L	057303	31	800	CF	GS 13 7	\$22,487

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
GODDPASTURE ANN L	057303	31	400	CF GS 13 7	\$21,313



FVD: 3 NOV 70

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER <b>057303</b>		2 NAME (LAST FIRST MIDDLE) <b>GOODPASTURE ANN L</b>	
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT (CORRECTION)</b>		4 EFFECTIVE DATE <b>10 18 70</b>	5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6 FUNDS	V TO V CF TO V	V TO CF CF TO CF	7 Financial Analysis No. Chargeable <b>1127 0170 0000</b>
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/CI STAFF OPERATIONS GROUP WE BRANCH</b>		10 LOCATION OF OFFICIAL STATION <b>WASH., D.C.</b>	
11 POSITION TITLE <b>OPS OFFICER</b>		12 POSITION NUMBER <b>0073</b>	13 SERIALIZED DESIGNATION <b>D</b>
14 CLASSIFICATION SCHEDULE (GS 18 401)	15 OCCUPATIONAL SERIES <b>0136.01</b>	16 GRADE AND STEP <b>13 6</b>	17 SALARY OR RATE <b>19555</b>

18 REMARKS  
**THIS ACTION CORRECTS FORM 1150 EFFECTIVE 10/18/70 AS FOLLOWS:  
 ITEM #6 FUNDS WHICH READ V TO V TO READ CF TO CF. ITEM #7 FAN  
 WHICH READ 1227 0170 0000 TO READ 1127 0170 0000.**

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING NUMBER ALPHABETIC		22 STATION CODE	23 INTEGRAL CODE	24 RESERVE CODE	25 DATE OF BIRTH MO DA YR <b>11 28 18</b>	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
28 NTE EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1. CSC 2. CIV 3. FICA 4. NONE		31 SEPARATION DATA CODE	32 Correction / Cancellation Data TYPE MO DA YR		33 SECURITY REQ NO		34 SER
35 VET PREFERENCE CODE 0 NONE 1 5 PT 2 15 PT	36 SERV COMP DATE MO DA YR	37 LONG. COMP DATE MO DA YR	38 CAREER CATEGORY CAB RESV PROV TEMP		39 FEGLI - HEALTH INSURANCE CODE 0 WAIVER 1 YES		40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO		44 STATE TAX DATA FORM EXECUTED 1 YES 2 NO		45 STATE CODE CODE NO TAX EXEMP STATE CODE		

EOD DATA →

SIGNATURE OR OTHER AUTHENTICATION

POSTED  
11-8-70  
cc

FVD: 27 OCT 70

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)								
057303		GOODPASTURE ANN L								
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
REASSIGNMENT					10 18 70		REGULAR			
6 FUNDS		V TO V		V TO CF		7 Financial Analysis No. Chargeable		8 CSC OR OTHER LEGAL AUTHORITY		
X						1227 0170 0000		50 USC 403 J		
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION					
DDP/CI STAFF OPERATIONS GROUP WE BRANCH					WASH., D.C.					
11 POSITION TITLE					12 POSITION NUMBER		13 SERVICE DESIGNATION			
OPS OFFICER					0073		0			
14 CLASSIFICATION SCHEDULE (GS 45, 56)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
GS			0136.01		13 6		19555			
18 REMARKS										
HOME BASE: WH										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGREE CODE	24 MILITARY CODE	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF LEI
37	10	31400	CI	75013			11 28 18			
28 NTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Correction / Cancellation Data			33 SECURITY REC NO	34 SEX
			1. CSC 2. CJA 3. PCA 4. NORA		CODE	TYPE MO DA YR			EOD DATA	
35 VET PREFERENCE		36 SERV. COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO
CODE		MO DA YR		MO DA YR		CAR RESV PROV TEMP		CODE CODE 0 WAIVER 1 YES		HEALTH INS CODE
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE	43 FEDERAL TAX DATA			44 STATE TAX DATA		
CODE				CODE	FORM EXECUTED CODE NO TAX EXEMPTIONS			FORM EXECUTED CODE NO TAX EXEMPTIONS		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS.) 3 - BREAK IN SERVICE (MORE THAN 3 YRS.)				1 YES 2 NO	CODE NO TAX EXEMPTIONS			1 YES 2 NO		
SIGNATURE OR OTHER AUTHENTICATION										
FROM: WH										
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">10-27-70</p> <p style="margin: 0;"><i>[Signature]</i></p> </div>										

FORM 566 1150  
Mfg 6-70

Use Previous Edition

SECRET

DMB

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downgrading and  
declassification

(When Filled In)

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
GOODPASTURE ANN L	057303	51	997	CF GS-13 5	\$19,555



14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	GRN.	PUNCS	GR-STEP	NEW SALARY
GODPASTURE ANN L	057303	51	997	GS 13 6	\$18,447

SF: 2 DEC 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION														
1 SERIAL NUMBER 057303		2 NAME (LAST-FIRST MIDDLE) GOODPASTURE ANN L												
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				4 EFFECTIVE DATE 12   01   63		5 CATEGORY OF EMPLOYMENT REGULAR								
6 FUNDS		V TO V		V TO CF		7 Financial Analysis No Chargeable		8 CSC OR OTHER LEGAL AUTHORITY						
		CF TO V		X CF TO CF		9135 0623 0000		50 USC 403 J						
9 ORGANIZATIONAL DESIGNATIONS DDP WH DEVELOPMENT COMPLEMENT						10 LOCATION OF OFFICIAL STATION WASH., D.C.								
11 POSITION TITLE OPS OFFICER						12 POSITION NUMBER 9997		13 SERVICE DESIGNATION D						
14 CLASSIFICATION SCHEDULE (GS, IS, etc.) GS			15 OCCUPATIONAL SERIES 0136.01			16 GRADE AND STEP 13 6		17 SALARY OR RATE 16809						
18 REMARKS OTHER														
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL														
19 ACTION CODE 37	20 Employ Code 18	21 OFFICE CODING NUMERIC 51997		ALPHABETIC WH		22 STATION CODE 75013	23 INTEGREE CODE	24 Mgr's Code 1	25 DATE OF BIRTH 11   28   18			26 DATE OF GRADE	27 DATE OF LEI	
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction/Cancellation Data			33 SECURITY REQ. NO	34 SEX		
								EOD DATA						
35 VET. PREFERENCE		36 SERV. COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI - HEALTH INSURANCE		40 SOCIAL SECURITY F.NO.				
CODE		1 NONE 2 5 PT 3 10 PT		MO DA YR		MO DA YR		CAR PROV		HEALTH INS CODE		NO TAX EXEMP	STATE CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA			44 STATE TAX DATA					
CODE				1 NO PREVIOUS SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS.) 3 BREAK IN SERVICE (MORE THAN 3 YRS.)		FORM EXECUTED 1 YES 2 NO		CODE		FORM EXECUTED 1 YES 2 NO		NO TAX EXEMP		STATE CODE
SIGNATURE OR OTHER AUTHENTICATION														

POSTED  
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FORM 5-66 1153  
MAY 10-67

Use Previous Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

651

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
097303		GOODPASTURE ANN L		51 620		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 13	5	\$16,329	11/06/66	GS 13	6	\$16,809	11/03/68		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>W. J. Kanfer</i>									
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS								AUDITED BY	
FORM 7.25 560 E Use previous editions		PAY CHANGE NOTIFICATION						(4 51)	

J.P.

648

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"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620 CF	GS 13 5	\$15,307	\$16,329

14-00000

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 5	\$14,665	\$15,307

*epw/11*      *C46*

1. Serial No.		2. Name			3. Cost Center Number			4. LWOP Hours		
097303		GOODPASTURE ANN L			51 620 CF					
5. OLD SALARY RATE					6. NEW SALARY RATE				7. TYPE ACTION	
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PSI	ESI	ADJ
GS 13	4	114,217	11/08/64	GS 13	5	114,000	11/00/66			
8. Remarks and Authentication										
<p>NO EXCESS LWOP  IN PAY STATUS AT END OF WAITING PERIOD  LWOP STATUS AT END OF WAITING PERIOD  CLERKS INITIALS                      AUDITED BY</p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS  OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: <i>[Signature]</i>      DATE <i>11-2-66</i></p>										
<b>PAY CHANGE NOTIFICATION</b>										

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF FL 89-504  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 4	\$13,815	\$14,217

PJM: 11 FEB 66

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)								
057303		SOOPRASTURE ANN L								
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM				02   13   66		REGULAR				
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY						
V TO V CF TO V		V TO CF X CF TO CF		6195 0890 0000		SECTION 208 P.L. 89-343				
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION						
DDP/AM FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION				MEXICO CITY, MEXICO						
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER				0418		D				
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS		0136.01		13 4		13915				
18. REMARKS										
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION.										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. Hdqtr. Code	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LET
28	10	51620	WH	45075		3	11   29   19	11   11   62	11   09   64	
29. HTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.		34. SEX
NO. DA. YR.			1 - CSC 2 - FICA 3 - NONE		2	EOD DATA				
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREFR. CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.
CODE		NO. DA. YR.		NO. DA. YR.		CODE		CODE		
0 - NONE 1 - 5 PT 2 - 10 PT						CAR - RISV PNOV - TEMP		0 - WAIVER 1 - YES		
41. PREVIOUS GOVERNMENT SERVICE DATA			42. LEAVE CAT. CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA		
CODE			CODE		FORM EXECUTED			FORM EXECUTED		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)					1 - YES 2 - NO			1 - YES 2 - NO		
SIGNATURE OR OTHER AUTHENTICATION										

FORM 1150  
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Use Previous Edition

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GROUP 1  
Excluded from automatic  
downgrading and  
declassification  
(When Filled In)



"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 4	\$13,335	\$13,815

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCS 05/27765

1 SERIAL NUMBER <b>057303</b>		2 NAME (LAST-FIRST-MIDDLE) <b>GOODPASTURE ANN L</b>	
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>		4 EFFECTIVE DATE MO DA YE <b>09 31 65</b>	
5 CATEGORY OF EMPLOYMENT		6 FUNDS V TO V G TO V X G TO G	
7 COST CENTER NO. CHARGEABLE <b>5135 0990 0000</b>		8 CSC OR OTHER LEGAL AUTHORITY	
9 ORGANIC UNIT DESIGNATION <b>DDP/WH DIVISION</b>		10 LOCATION OF OFFICIAL STATION <b>MEXICO CITY, MEXICO</b>	
11 POSITION TITLE <b>OPS OFFICER</b>		12 POSITION NUMBER <b>0418</b>	
13 CAREER SERVICE DESIGNATION <b>D</b>		14 CLASSIFICATION SYMBOL (GS, LB, etc.) <b>GS</b>	
15 OCCUPATIONAL SERIES <b>0136,01</b>		16 GRADE AND STEP <b>13</b>	
17 SALARY OR RATE		18 REMARKS	
SIGNATURE OR OTHER AUTHENTICATION			

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6-9-65 H

13

1. Serial No. 057303		2. Name GOODPASTURE ANN L		3. Cost Center Number 51 700 CF <i>476</i>		4. LWOP Mhrs				
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 13	3	\$12,915	11/10/63	GS 13	4	\$13,335	11/08/64			
8. Remarks and Authentication										
<p> <input checked="" type="checkbox"/> NO EXCESS LWOP  <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD  <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD            CLERKS INITIALS _____ AUDITED BY _____         </p> <p>04 559</p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE <i>[Signature]</i> DATE <i>25/2/64</i></p>										
PAY CHANGE NOTIFICATION										



14-00000

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI  
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,  
EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	700	CF GS 13 3	\$11,880	\$12,495



LLG: 9 NOV. 62

SECRET  
(When Filled In)

OCF NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)															
057303		GOODPASTURE ANN L															
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT								
PROMOTION						11 11 62			REGULAR								
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE			8. CSC OR OTHER LEGAL AUTHORITY								
CF TO V		X		CF TO CF		3135 5700 1000			50 USC 403 J								
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION											
DDP WH BRANCH 3 MEXICO CITY, MEXICO STATION						MEXICO CITY, MEXICO											
11. POSITION TITLE						12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION								
OPS OFFICER						0852			D								
14. CLASSIFICATION SCHEDULE (GS, LB, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE									
GS				0136.01		13 2		11515									
18. REMARKS																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. Hdqtrs. Code	25. DATE OF BIRTH			26. DATE OF GRADE			27. DATE OF LSI				
22	10	NUMERIC	ALPHABETIC	45075		3	NO	DA	YR	NO.	DA	YR	NO	DA	YR		
		64700	WH				11	28	18	11	11	62	11	11	62		
28. NTC EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REQ NO.		34. SER				
NO. DA YR		1 - CSC 2 - FICA 3 - NONE		CODE		TYPE		NO. DA. YR.			EOD DATA						
35. VET. PREFERENCE		36. SERV. COMP DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE			40. SOCIAL SECURITY NO.						
CODE		0 - NONE 1 - 8 PT 2 - 10 PT		NO. DA. YR		CAR RESV PROV TEMP		CODE			CODE			0 - WAIVER 1 - YES			
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA											
CODE		0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		FORM EXECUTED		CODE		NO TAX EXEMPTIONS		FORM EXECUTED		CODE		NO TAX STATE CODE EXEMP.			
				1 - YES 2 - NO						1 - YES 2 - NO							
SIGNATURE OR OTHER AUTHENTICATION																	
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;"><i>[Signature]</i></p> </div>																	

FORM 4-62 1150

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SECRET

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downgrading and  
declassification

(When Filled In)

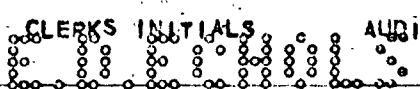
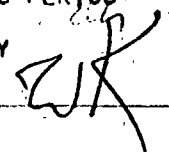
*cey 11/16/62*

LOC

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND  
DCI MEMORANDUM DATED 1 AUGUST 1954, SALARY IS ADJUSTED AS FOLLOWS:  
EFFECTIVE 14 OCTOBER 1952

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST	OLD SALARY	NEW GR-ST	NEW SALARY
GOODPASTURE ANN L	057333	64700	CF 12 5	5	9995	12 5	\$10735



1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Month				
057303		GOODPASTURE ANN L		64 700 CF 8						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS 12	4	\$ 9,735	03/19/61	GS 12	5	\$ 9,995	09/16/62			
8. Remarks and Authentication										
4 559										
<input checked="" type="checkbox"/> / NO EXCESS LWOP    / EXCESS LWOP MB 7/11/62 <input checked="" type="checkbox"/> / IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> / IN LWOP STATUS AT END OF WAITING PERIOD										
CLERKS INITIALS						AUDITED BY				
										
PAY CHANGE NOTIFICATION										

SECRET  
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
557303		GOODPASTURE ANN L		DDP/WH 8 UV						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS	12	3	\$ 9,475	09/20/59	12	4	\$ 9,735	03/19/61		
8. Remarks and Authentication										
<p>✓ / NO EXCESS LWOP</p> <p>✓ / IN PAY STATUS AT END OF WAITING PERIOD</p> <p>✓ / IN LWOP STATUS AT END OF WAITING PERIOD</p> <p><b>REHIRE</b> WK</p>										
PAY CHANGE NOTIFICATION										

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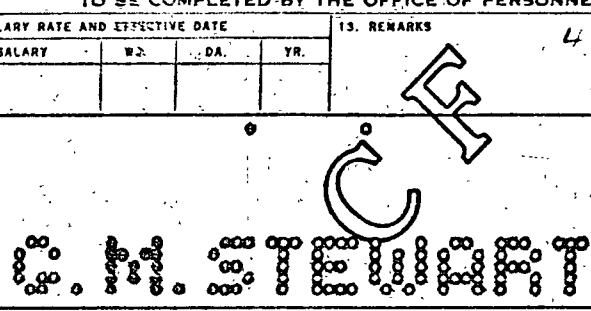
IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED  
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
DI	GOODPASTURE ANN L	557303	46 52	GS-12 3	\$ 8,810	\$ 9,475

/S/ EMMETT D. ECHOLS  
DIRECTOR OF PERSONNEL

es

SECRET  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED C/P CAN		4. FUNDS		5. ALLOTMENT		
557303		GOODPASTURE ANN L			DDP/WH 8		UV				
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
GS 12	2	\$ 8,570	03	23	58	GS 12	3	\$ 8,810	09	20	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO.	DA.	YR.	4 359					
						RF RB 9/21/59					
14. AUTHENTICATION											
											
PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO 560a  
1 MAR. 58

SECRET

PERSONNEL FOLDER (4)

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE  
12 JANUARY 1959 AUTHORIZED BY P. L. 85-1462 AND DCI  
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	557303	GS-12-2	\$ 7,785	\$ 8,570

GORDON M. STEWART  
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME			3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT		
557303		GOODPASTURE ANN L			DDP/WH		UV				
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
12	1	\$ 7,570	09	23	56	12	2	\$ 7,785	03	23	58
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
9. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LEAVE LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK			11. AUDITED BY		
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	NO.	DA.	YR.	4 317420 4705					
						3/23/58 on					
14. AUTHENTICATION											
PERIODIC STEP INCREASE - AUTHENTICATION											

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

ORO

1. NAME (LAST-FIRST-MIDDLE-ONE GIVEN NAME, INITIALS, AND SURNAME) <b>MISS ANN L. GOODPASTURE</b>	2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO. <b>157303</b>	4. DATE <b>13 November 56</b>
---	--	---	----------------------------------

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>REASSIGNMENT</b>	6. EFFECTIVE DATE <b>18 Nov 1956</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 J</b>
---	---	---

FROM		TO	
<b>BB-27-12</b>	8. POSITION TITLE <b>IO (PI)</b>	<b>BB-571</b>	
<b>GS-0136.51-12 \$7570.00 per annum</b>	9. SERVICE SERIES, GRADE, SALARY	<b>GS-0136.51-12 \$7570.00 per annum</b>	
	10. ORGANIZATIONAL DESIGNATIONS <b>501600</b>	<b>IDP/REA PI Staff</b>	
	11. HEADQUARTERS <b>2</b>	<b>Washington, D. C.</b>	
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPT'L <b>2</b>	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

13. VETERAN'S PREFERENCE				14. POSITION CLASSIFICATION ACTION			
None	5	10	15	NEW	VICE	I. A.	REAL
<input checked="" type="checkbox"/>							
				<b>BD-DI</b>			

15. SEX <b>F</b>	16. APPROPRIATION FROM: <b>7-3300-80</b> TO: <b>750-13</b>	17. SUBJECT TO C. S. RETIREMENT ACT (45 USC 5502) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVIT (EXCEPTIONS ONLY)	19. LEGAL RESIDENCE STATE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
---------------------	--	---	---	---

20. REMARKS:

3 EOD 09/18/47

RECORDED  
 11/14/56

ENTRANCE PERFORMANCE RATING:  
 Director of Personnel

4. PERSONNEL FOLDER COPY

7/11/56

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS, AND SURNAME) <b>MISS ANN L. GOODPASTURE 157303</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO.	4. DATE <b>20 Sep 1956</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>PROMOTION 30</b>		6. EFFECTIVE DATE <b>23 Sep 56</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 j</b>	
FROM <b>BB-28</b> <b>GS-0136.51-11 \$6605.00 per annum</b>		8. POSITION TITLE	TO <b>IO (FI) BB-27-12</b> <b>GS-0136.51-12 \$7970.00 per annum</b>	
		9. SERVICE, SERIES, GRADE, SALARY		
		10. ORGANIZATIONAL DESIGNATIONS <b>501600</b>	<b>IDP/NSA</b> <b>FI Staff</b>	
		11. HEADQUARTERS <b>2</b>	<b>Washington, D. C.</b>	
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPT'L	<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL
13. VETERAN'S PREFERENCE NONE WWII OTHER 5-PT. 10 POINT <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			14. POSITION CLASSIFICATION ACTION NEW VICE L. A. REAL <b>SD-DI</b>	
15. SEX <b>F</b>	16. APPROPRIATION FROM: <b>7-3300-20</b> <b>750-13</b> TO: <b>Sans</b>		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
			19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
20. REMARKS:  <b>3 BOD 09/18/57</b>  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">POSTED <i>Hmc 25 Sep 56</i></div>				
ENTRANCE PERFORMANCE RATING:				
Director of Personnel				
SIGNATURE OR OTHER AUTHENTICATION				

4. PERSONNEL FOLDER COPY



Combined Personnel Action

S-E-C-R-E-T

Vouchered to      Vouchered

Allotment No. 7-3300-20

Used in lieu of SF-52 and SF-50 to document actions involving the movement of employees into current NEA Division T.O. Positions in accordance with T.O. authorization No. 972 approved 25 June 1956, and effective 29 July 1956. Headquarters

<u>Serial No.</u>	<u>Name</u>	<u>Position Number</u>	<u>Occupational Series</u>	<u>Organ. Code</u>	<u>Organizational Title</u>
		BE-27	GS-0136.51-13		FOREIGN INTELLIGENCE STAFF I.O. FI
		BE-28	GS-0136.51-09		I.O. FI
	Goodpasture, Ann, L.	BE-28	GS-0136.51-11		I.O. FI
		BE-357	GS-0132.44-07		REPORTS OFFICER
		BE-329	GS-0301.28-07		Intelligence Assistant
		BE-29	GS-0322.01-06		Clerk Typist
		BE-404	GS-0322.01-05		Clerk Typist
		BE-38911	GS-0322.01-05		Clerk Typist

Approved: [Signature]      5/27/56  
NEA Division      Date

[Signature]      27 July 56  
Records & Services Division      Date  
Office of Personnel

S-E-C-R-E-T

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

171

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS) AND SURNAME: <b>Miss Ann L. Goodpasture 557393</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO.	4. DATE <b>7 Mar 1957</b>												
This is to notify you of the following action affecting your employment:																
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Resignment 06</b>		6. EFFECTIVE DATE <b>BOB 10 Mar 1957</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 j</b>													
FROM		TO														
<b>IO (FI) EE-571</b> <b>GS-0136.51-12 \$7570.00 per annum</b> <b>DDP/ERA</b> <b>FI Staff</b>  <b>Washington, D. C.</b> <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<b>I. O. (FI) BAF-400</b> <b>GS-0136.51-12 \$7570.00 per annum</b> <b>DDP/VA</b> <b>Branch III</b> <b>Mexico City, Mexico Station</b>  <b>Mexico City, Mexico</b> <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL														
8. POSITION TITLE		9. SERVICE SERIAL, GRADE, SALARY														
10. ORGANIZATIONAL DESIGNATIONS <b>465250</b>		11. HEADQUARTERS <b>5</b>														
12. FIELD OR DEPT'L		12. FIELD OR DEPT'L														
13. VETERAN'S PREFERENCE																
<table border="1"> <tr> <th>NONE</th> <th>WWII</th> <th>OTHER</th> <th>5-PT</th> <th colspan="2">10 POINT</th> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>DIAB</td> <td>OTHER</td> </tr> </table>					NONE	WWII	OTHER	5-PT	10 POINT		<input checked="" type="checkbox"/>				DIAB	OTHER
NONE	WWII	OTHER	5-PT	10 POINT												
<input checked="" type="checkbox"/>				DIAB	OTHER											
14. POSITION CLASSIFICATION ACTION																
<table border="1"> <tr> <th>NEW</th> <th>VICE</th> <th>I. A.</th> <th>REAL</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>					NEW	VICE	I. A.	REAL								
NEW	VICE	I. A.	REAL													
15. SEX <b>F</b>		16. APPROPRIATION FROM: <b>7-3300-20 450-75</b> TO: <b>7-3570-55-060</b>		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>												
18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:														

20. REMARKS:  
 Subject to approved medical clearance prior to being sent overseas.

POSTED

11 MAR 11 1957

*Ru*

3 EOD 09/18/47

"Transfer TO Unvouchered funds FROM Vouchered funds."

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1v1

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIAL(S) AND SURNAME) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO.	4. DATE <b>19 Jun 1956</b>																
<i>This is to notify you of the following action affecting your employment:</i>																				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Resignment</b>		6. EFFECTIVE DATE <b>17 Jun 1956</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 J</b>																	
FROM		TO																		
<b>Operations Off. (CE) BB-574-11</b>  <b>OS-0132.58-11</b>  <b>DDP/VE</b> <b>FI Staff</b> <b>Counter Espionage Section</b>		8. POSITION TITLE  <b>IO (FI) EE-28</b>	<b>OS-0136.51-11 \$6605.00 per annum</b>  <b>DDP/VEA</b> <b>FI Staff</b> <b>Repts &amp; Requirements Section</b>																	
9. SERVICE SERIES, GRADE, SALARY		10. ORGANIZATIONAL DESIGNATIONS <b>500130</b>																		
11. HEADQUARTERS <b>2</b>		12. FIELD OR DEPTL <b>Washington, D. C.</b>																		
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL																		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION																		
<table border="1"> <tr> <td>NONE</td> <td>WWII</td> <td>OTHER</td> <td>5-PT.</td> <td colspan="2">10 POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>DISAB</td> <td>OTHER</td> </tr> </table>		NONE	WWII	OTHER	5-PT.	10 POINT						DISAB	OTHER	<table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>I. A.</td> <td>REAL.</td> </tr> </table>			NEW	VICE	I. A.	REAL.
NONE	WWII	OTHER	5-PT.	10 POINT																
				DISAB	OTHER															
NEW	VICE	I. A.	REAL.																	
<table border="1"> <tr> <td>0</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		0	X					<b>EO/DI</b>												
0	X																			
14. SEX <b>2</b> <b>F</b>	16. APPROPRIATION FROM: <b>6-3000-20</b> TO: <b>6-3300-20</b>	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:																
20. REMARKS:  <p style="text-align: center;"><b>3 EOD</b></p>																				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p><b>POSTED</b></p> <p><i>Ann L. Goodpasture</i></p> </div>																				
ENTRANCE PERFORMANCE RATING: <b>X</b>																				
Director of Personnel: _____ Signature of User for Notification: _____																				

4. PERSONNEL FOLDER COPY

773 6/21/56

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL  
(When Filled In)

U. S. GOVERNMENT PRINTING OFFICE: 1954: 220030

1. Agency and organizational designation:		2. Payroll period:	3. Block No. 6-3600-20	4. Slip No.
---	--	--------------------	---------------------------	-------------

5. Employee's name (and social security account number when appropriate): GOODPASTURE, Ann L.		6. Grade and salary: GS-11 \$6390.00		
--	--	---	--	--

PAYROLL CHANGE DATA											
	BASE PAY	OVERTIME		GROSS PAY	RET.	FEDERAL TAX	BOND	F. I. C. A.	STATE TAX	GROUP LIFE INS.	NET PAY
7. Previous normal											
8. New normal											
9. Pay this period											

10. Remarks: DEC 1 1955					11. Appropriation(s): WB 1			12. Prepared by: 11-8-55			
								13. Audited by:			

Periodic step-increase     Pay adjustment     Other step-increase

14. Effective date: 1 Jan 56	15. Date last equivalent increase: 1 Jul 54	16. Old salary rate: \$6390.00	17. New salary rate: \$6605.00	18. Performance rating, satisfactory or better: SATISFACTORY
---------------------------------	--	-----------------------------------	-----------------------------------	---

19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):

No excess LWOP. Total excess LWOP

(Check applicable box in case of excess LWOP)  
 Excess LWOP during regular pay period.  
 Excess LWOP during waiting period.

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION *dah*

1. NAME (MR., MISS, MRS. OR GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Miss Ann L. Goodpasture		28 Nov 1913		21 Oct 1955
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment		23 Oct 1955	50 USCA 403 j	
FROM		TO		
Para-Mil. Off. BB-101-11 GS-0136.11-11 \$6390.00 Per Annum		8. POSITION TITLE	Operations Off. (CE) BB-574-11 GS-0132.52-11 \$6390.00 Per Annum	
French Branch, FI, PP, EM		9. SERVICE SERIES, GRADE, SALARY	DDB/WE FI Staff Counter Espionage Section	
		10. ORGANIZATIONAL DESIGNATIONS		
		11. HEADQUARTERS	Washington, D.C.	
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPT'L	<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL
13. VETERAN'S PREFERENCE			14. POSITION CLASSIFICATION ACTION	
NONE	WWII	OTHER	5-PT.	10-POINT
			DISAB	OTHER
<input checked="" type="checkbox"/>				
15. APPROPRIATION			17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	
FROM: 6-3600-20			Yes	
TO: Same				
18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)			19. LEGAL RESIDENCE	
			<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED	
			STATE:	
20. REMARKS:				
ENTRANCE PERFORMANCE RATING:				
Director of Personnel				
				21. SIGNATURE OR OTHER AUTHENTICATION

POSTED  
31 OCT 1955 *dah*

10/24/55

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIALS, AND SURNAME) <b>Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO. <b>600-0000-10 Feb 55</b>	4. DATE <b>25 Feb 1955</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Reassignment</b>		6. EFFECTIVE DATE <b>B.O.B. 27 Feb 1955</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403</b>	
FROM <b>Area Ops. Off. BEP 387</b>		8. POSITION TITLE <b>Para-Ml. Off. BB 101-11</b>	TO	
9. SERVICE SERIES, GRADE, SALARY <b>GS-0136.01-11 \$5940.00 per annum</b>		10. ORGANIZATIONAL DESIGNATIONS <b>DDP/EA India, Pakistan, Afghanistan Br.</b>		
11. HEADQUARTERS <b>Washington, D. C.</b>		12. FIELD OR DEPT'L <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> 5-YR <input type="checkbox"/> 10-POINT		14. POSITION CLASSIFICATION ACTION <input type="checkbox"/> NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REPL. <b>SD-DI</b>		
15. SEX <b>F</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>5-3340-55-013</b> TO: <b>5-3000-57</b>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED		STATE: <b>California</b>		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
*Transfer TO Vouchered funds FROM Unvouchered funds.*				
<p><b>IMPORTANT TO DOD DIRECTIVE</b></p> <p><b>RECEIVED 10-16390</b></p> <p><b>EPB 1 Mar 55</b></p>				
ENTRANCE PERFORMANCE RATING				
Deputy Director of Personnel				

2-28-55

SECRET

289 MC  
12/14/54  
Jom

STANDARD FORM 52 PROPERTY OF THE U. S. CIVIL SERVICE COMMISSION GSA GEN. REG. NO. 27 MAY 1962 EDITION GSA GEN. REG. NO. 27 MAY 1962 EDITION	<b>REQUEST FOR PERSONNEL ACTION</b>	UNVOUCHERED
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REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname) <b>MISS ANN L. GOODPASTURE</b>	2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>21 Nov. 54</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>REASSIGNMENT</b>		6. EFFECTIVE DATE & PROPOSED: <b>18 DEC 1954</b>	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)			

FROM— <b>Intelligence Officer (FI) BA(P) 8087</b> <b>GS-0136-51-11 \$5940 per annum</b> <b>DDP/WH</b> <b>Project PBSUCCESS</b> <b>Washington, D. C.</b>	9. POSITION TITLE AND NUMBER <b>GS-0136-51-11 \$5940 per annum</b>	10. SERVICE, GRADE, AND SALARY <b>DDP/NEA</b> <b>India Pakistan Afghanistan Br.</b>	11. HEADQUARTERS <b>New Delhi, India</b>
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

12. REMARKS (Use reverse if necessary)  
**Grade of position BEP 387 is GS-12.**

13. REQUESTED BY (Name and title) <b>THOMAS J. HESTER, NEA/ADM/PERSONNEL</b>	14. REQUEST APPROVED BY Signature: <i>James P. Humphries (WMA)</i> Title: <i>FI/CMO 23 Nov '54</i>
15. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>X 8671</b>	

16. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> S-P.T. <input type="checkbox"/> 10-POINT <input type="checkbox"/> 17. APPROPRIATE FUNDS AVAILABLE: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	18. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>SD:FI</b>
---	---

19. SEX <input checked="" type="checkbox"/> F <input type="checkbox"/> M	20. RACE <input type="checkbox"/> W <input type="checkbox"/> O <input type="checkbox"/> O <input type="checkbox"/> O	21. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	22. LEGAL RESIDENCE STATE: <b>OKLA.</b>
--	--	--	---

23. STANDARD FORM 52 REMARKS

*concerned by 12-10-54 RW 12-13-54 Jomloger E Date OK per 12/14/54 Jom*

OFFICE/DIVISION WITHIN CEILING  
Date: *12/10* Position: *CMO*

24. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR PCS. CONTROL	<i>JB</i>	<i>12-8-54</i>	
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.			
E.			

**POSTED**  
*12/17/54 JB*

F. APPROVED BY  
*Joseph P. ...* SECRET *A. Busby*

STANDARD FORM 52  
 PREPARED BY THE  
 U. S. CIV. SERVICE COMMISSION  
 JANUARY 1953 - PERSONNEL PERSONNEL  
 MANUAL CHAPTER II

**REQUEST FOR PERSONNEL ACTION**

**CONFIDENTIAL FUNDS**

7/24/54  
Sam

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, initials, and surname) <b>Miss Ann L. Goodpasture</b>	2. DATE OF BIRTH <b>28 Nov. 1919</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>10 June 1954</b>
---	---	----------------	---

5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Promotion</b>	6. EFFECTIVE DATE A. PROPOSED	7. C. S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether established, change grade or title, etc.)		B. APPROVED: <i>July 54</i>

FROM - <b>Intelligence Officer (FI) BA(P)-9033 GS-0136.51-9 \$5435 per annum DDP/AH Project PBSUCCESS Washington, D.C.</b>	8. POSITION TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	TO - <b>Intelligence Officer (FI) BA(P) 8085 GS-0136.51-11 \$5940 per annum DDP/AH Project PBSUCCESS Washington, D.C.</b>
---	--	--

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title) <b>P. C. BOWERS, Personnel Officer</b>	D. REQUEST APPROVED BY <i>Howard J. Presson</i> Signature: <b>HOWARD J. PRESSON</b> Title: <b>Administrative Officer, PBS</b>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>X-1161</b>	

13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER: 5 PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB: OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L <input type="checkbox"/> A <input type="checkbox"/> REG. <input type="checkbox"/> <b>CD-FI</b>
--	--

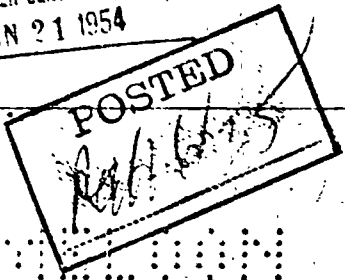
15. SEX <b>F</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>4-3500-51-082</b> TO: <b>4-3500-51-081</b>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSARY ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>OKLAHOMA</b>
---------------------	----------------------	---	--	---	---

21. STANDARD FORM 50 REMARKS  
**This action also corrects Reassignment notification dated 4 Dec. 53, to show the correct salary, previously shown as \$5310.00 per annum.**

APPROVED BY  
 CAREER SERVICE BOARD  
 DATE: JUN 21 1954

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<i>PCB</i>	<b>6/23</b>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>PCB</i>	<b>23 June 54</b>	
E.			

F. APPROVED BY  
*PCB* **SECRET** *Dayton 22 June 54*





S E C R E T

COMBINED PERSONNEL ACTION  
UNVOUCHERED TO UNVOUCHERED

USED IN LIEU OF SF-52 TO DOCUMENT PERSONNEL ACTIONS INVOLVING THE MOVEMENT OF EMPLOYEES INTO CURRENT T/O POSITIONS AND REFLECT CHANGES IN TITLE AND/OR ADDING SIX DIGIT CLASS SERIES NUMBERS.

DATE OF T/O APPROVAL: 29 April 1954

EFFECTIVE DATE OF ACTION: 23 May 1954

DDP/WH  
PROJECT PSUCCESS

Name	FROM		TO		Ccds/Grade	Pos No.
	Title	Code/Grade	Pos No.	Title		
<b>WASHINGTON HEADQUARTERS</b>						
PRFSTON, Howard J.	Admin Off.	GS-0301.01-15	BAP-29	Admin Off.	GS-0301.03-15	EAP-8002
DUDLEY, Thomas J.	Fin. Ops. Off.	GS-0510.15-12	BAP-30	Fin. Ops. Off.	GS-0510.15-12	EAP-8003
SHORMAKER, M. P.	Log. Off.	GS-2010.01-12	BAP-31	Log. Off.	GS-2010.01-12	EAP-8004
BOWERS, Philip C.	Personnel Off.	GS-0201.01-11	BAP-32	Personnel Off.	GS-0201.01-11	EAP-8008
BERTRAND, Eileen A.	Dispatch Anal.	GS-0305.12-7	BAP-33	Dispatch Anal.	GS-0305.12-7	EAP-8011
STONE, Cynthia H.	Clerk Typist	GS-0322.01-5	BAP-35	Clerk Typist	GS-0322.01-5	EAP-8014
HARRISON, Cynthia M.	Clerk Steno	GS-0312.01-4	BAP-36	Clerk Steno	GS-0312.01-4	EAP-8015
<b>STATION LINCOLN</b>						
HANEY, Albert R.	Ops Off (Ch, FI)	GS-0132.06-15	BAP-1	Ops Off, PP	GS-0136.31-15	EAP-8016
HOBBINS, Enno R.	Ops Off (Dep Ch)(PP)	GS-0136.31-14	BAP-2	Ops Off, PP	GS-0136.31-14	EAP-8018
	Ops Officer	GS-0132.06-13	BAP-3	Intel Off (FI)	GS-0136.51-13	EAP-8019
	Ops Officer	GS-0132.06-13	BAP-4	Intel Off (FI)	GS-0136.51-13	EAP-8020
	Air Ops Off	GS-0136.16-13	BAP-13	Air Ops Off	GS-0136.16-13	EAP-8021
KING, Michael J.	Fiscal Acct	GS-0501.03-11	BAP-11	Fiscal Acct. Asst.	GS-0501.03-11	EAP-8022
STEWART, Jack	Intel Off (FI)	GS-0132.06-9	BAP-12	Intel Off (FI)	GS-0136.51-9	EAP-8023
BAUMAN, Jack McV.	Invest. (Gen)	GS-1810-12	BAP-18	Security Off.	GS-1810.01-12	EAP-8024
ROCKETT, Alice E.	Reports Off.	GS-0132.44-9	BAP-6	Reports Off.	GS-0132.44-9	EAP-8025
SANCHEZ, Nestor D.	Intel Off (FI)	GS-0132.06-11	BAP-23	Intel Off (FI)	GS-0136.51-11	EAP-8028
	Sec. Ops. Off.	GS-1810.03-10	BAP-24	Security Off	GS-1810.01-10	EAP-8029

S E C R E T

SECRET

Page 2

DDP/WH  
PROJECT PBSUCCESS

Name	FROM Title	Code/Grade	TO Title	Code/Grade	Pos No.
STATION LINCOLN (Continued)					
Trottin, Carl E.	Intel Asst	GS-0301.22-7	BAP-9 Intel Asst	GS-0301.35-7	BAP-8031
Ebert, Louis V.	Intel Off (FI)	GS-0132.06-7	BAP-10 Intel Off (FI)	GS-0132.51-7	BAP-8032
GCODPASTURE, Ann L.	Intel Off (FI)	GS-0132.06-9	BAP-13 Intel Off (FI)	GS-0132.51-9	BAP-8033
[Redacted]	Trng Instr (F.L.)	GS-1710.04-9	BAP-25 Trng Instr (F.L.)	GS-1710.04-9	BAP-8034
[Redacted]	Admin Asst	GS-0301.02-7	BAP-19 Admin Asst	GS-0301.02-7	BAP-8037
[Redacted]	Admin Asst	GS-0301.02-7	BAP-46 Admin Asst	GS-0301.02-7	BAP-8038
[Redacted]	Secretary	GS-0318.03-7	BAP-27 Secretary	GS-0318.03-7	BAP-8039
MAGGARD, Peggy M.	Secretary (Gen)	GS-0318.03-7	BAP-24 Secretary	GS-0318.03-7	BAP-8040
[Redacted]	Secretary (Gen)	GS-0318.03-4	BAP-16 Secretary	GS-0318.03-4	BAP-8041
[Redacted]	Secretary (Gen)	GS-0318.03-6	BAP-15 Secretary	GS-0318.03-6	BAP-8042
KEIRSTEAD, Rosemary J.	Secretary (Gen)	GS-0318.03-4	BAP-21 Secretary	GS-0318.03-4	BAP-8043
[Redacted]	Secretary	GS-0318.03-4	BAP-22 Secretary	GS-0318.03-4	BAP-8045
[Redacted]	Secretary (Gen)	GS-0318.03-4	BAP-12 Secretary	GS-0318.03-4	BAP-8046
[Redacted]	Secretary (Gen)	GS-0318.03-4	BAP-20 Secretary	GS-0318.03-4	BAP-8047
BEYERS, Barbara C.	Secretary	GS-0318.03-5	BAP-28 Secretary	GS-0318.03-5	BAP-8048
[Redacted]	Secretary (Steno)	GS-0318.01-5	BAP-49 Secretary (Steno)	GS-0318.01-5	BAP-8049
[Redacted]	Clerk Typist (Sp)	GS-0322.01-4	BAP-45 Clerk Typist	GS-0322.01-4	BAP-8051
[Redacted]	Secretary (Typ)	GS-0318.02-4	BAP-47 Secretary (Typ)	GS-0318.02-4	BAP-8052
[Redacted]	Clerk Steno	GS-0312.01-4	BAP-50 Clerk Steno	GS-0312.01-4	BAP-8053
FJHOPEFUL	[Redacted]	[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	Supply Off	M.Sgt	BAP-53 Supply Off.	M/Sgt	BAP-8056
[Redacted]	Mod Tech (Gen)	GS-0645.01-9	BAP-55 Mod Tech (Gen)	GS-0645.01-9	BAP-8058
[Redacted]	Supply Clerk	GS-2040.5	S-71 Supply Asst	GS-2001.01-5	BAP-8059
WASHINKO, John	Admin Asst	GS-7	S-59 Admin Asst	GS-0301.02-7	BAP-8060

APPROVED BY:

[Redacted Signature]

SECRET

1. Agency and organizational designations		4. Pay		5. Basic Pay		6. Step Pay		
3. Employee's name (and social security account number when appropriate)		7. Grade and salary		8. Step		9. Step Pay		
GOODPASTER, Ann T.		GS-3 \$5310						
PAY-ROLL CHANGE DATA								
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F. I. C. A.	NET PAY
7. Previous normal								
8. New normal								
9. Pay this period								
10. Remarks				11. Appropriation(s)		12. Prepared by		
				DDP/WH 8		mnh 27 Nov. 53		
						13. Audited by		
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase								
14. Effective date	15. Date last equivalent increase	16. Old salary rate	17. New salary rate	18. Performance rating is satisfactory or better.				
31 Jan 54	1 Feb. 53	\$5310	\$6435	[Signature or other authentication] <i>KW</i>				
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):								
<input type="checkbox"/> No excess LWOP    Total excess LWOP								
STANDARD FORM NO. 1126d—Revised Form prescribed by Comp. Gen., U.S. Nov. 8, 1950, General Regulations 11a, 102								

PAY ROLL CHANGE SLIP—PERSONNEL COPY

STANDARD FORM 52  
 FORMS GATED BY THE  
 U.S. CIVIL SERVICE COMMISSION  
 JANUARY 1969 - FEDERAL OFFICIALS  
 BUREAU CHAPTER 5

**REQUEST FOR PERSONNEL ACTION**

UNVOUCHERED

20. 4. 3. 2. R  
 2/4/54  
 yr

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initials, and surname) <b>Miss Ann L. GOODPASTURE</b>	2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. REQUEST NO. <b>-</b>	4. DATE OF REQUEST <b>4 Dec 53</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		D. APPROVED: <b>FEB 14 1954</b>	

FROM— <b>INTEL OFCR, BA-182</b>  <b>GS-132-9, \$5310.00 p.a.</b>  <b>DDP/WH</b> <i>211</i> <b>Monterrey, Mexico</b>	9. POSITION TITLE AND NUMBER  10. SERVICE, GRADE, AND SALARY  11. ORGANIZATIONAL DESIGNATIONS  12. HEADQUARTERS	TO— <b>INTEL OFFICER (FI) -13</b>  <b>GS-0132.06-9, \$5310.00 p.a.</b>  <b>DDP/WH</b>  <b>PROJECT PBSUCCESS</b> <i>Washington Field</i>
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)  
**Slot #13**  
**Presently at hqtrs.**  
*\* Field established by Special Agent per instruction 15 Dec 53.*

B. REQUESTED BY (Name and title) <i>Lawson</i> <b>AC/WH</b>	D. REQUEST APPROVED BY Signature: <i>Dorris B. Powell</i> Title: <b>F1/C400</b>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>x-157</b>	

13. VETERAN PREFERENCE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NONE</td> <td>WWI</td> <td>OTHER</td> <td>5-PT.</td> <td>10 POINT</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>DISAB. OTHER</td> </tr> </table>	NONE	WWI	OTHER	5-PT.	10 POINT	<input checked="" type="checkbox"/>				DISAB. OTHER	14. POSITION CLASSIFICATION ACTION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>NEW</td> <td>VICE</td> <td>I.A.</td> <td>REAL</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> <b>CD: FI</b>	NEW	VICE	I.A.	REAL				
NONE	WWI	OTHER	5-PT.	10 POINT															
<input checked="" type="checkbox"/>				DISAB. OTHER															
NEW	VICE	I.A.	REAL																

15. SEX <b>♀</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>4-3570-55-060</b> TO: <b>4-3500-51-081</b>	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
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21. STANDARD FORM 50 REMARKS  
*terminated 2 Feb. yr.*  
*concern 2-3-54*  
*11.11.54*

**FOSS-ED**

*VED 2/19/54*

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS. CONTROL	<i>15/54</i>		
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<i>1/1/54</i>	<i>1/1/54</i>	
E.			

F. APPROVED BY  
*Shade*    *OK Humphrey*

12/17/53  
89

**SECRET** Information UNCLASSIFIED

STANDARD FORM 52  
PROVIDED BY THE  
U. S. CIVIL SERVICE COMMISSION  
January 1953 - FEDERAL PERSONNEL  
MANUAL, CHAPTER 51

**REQUEST FOR PERSONNEL ACTION**

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs. - One given name, initial(s), and surname) <b>Miss Ana L. GOODPASTURE</b>		2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>30 Nov. 53</b>
5. NATURE OF ACTION REQUESTED. A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Conversion from FSS Status</b>		6. EFFECTIVE DATE A. PROPOSED: <b>Oct 12 Oct 53*</b>		7. C. S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <b>Col-1300863</b>		

FROM - <b>Administrative Assistant, FSS-9</b> <i>Intell Officer W-152</i> <b>FSS-9 \$4470.00</b> <i>65-132-1-45310.00</i> <b>DDP/WH</b> <i>III</i> <b>Monterrey, Mexico</b>	8. POSITION TITLE AND NUMBER	TO - <b>INTELL OFFICER BA-182</b>
	9. SERVICE, GRADE, AND SALARY	<b>GS-132-9 \$5310.00</b>
	10. ORGANIZATIONAL DESIGNATIONS	<b>DDP/WH</b> <i>III</i>
	11. HEADQUARTERS	<b>Monterrey, Mexico</b>
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)  
**BA-182**

B. REQUESTED BY (Name and title) <i>[Signature]</i> <b>C/WH</b>	D. REQUEST APPROVED BY Signature: <i>[Signature]</i> <b>Davis B. Powell</b>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>2157</b>	Title: <b>F/ICMO</b>

13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. OTHER	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>CD-FI</b>
---	---

15. SEX <b>W</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>3532-00-000 4-3570-55-060</b> TO: <b>3532-00-000</b> <i>Sand</i>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>IC-145</b>
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21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. CEIL OR POS CONTROL	<i>[Signature]</i>	<b>4 Dec</b>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			
F. APPROVED BY <b>Security Information</b>			

**SECRET**  
SECURITY INFORMATION UNVOICED

**REQUEST FOR PERSONNEL ACTION**

*EO 48 19 12 1953*

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.-Miss-Ms.-One given name, initial(s), and surname) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>		3. REQUEST NO.		4. DATE OF REQUEST <b>7 Mar 1953</b>	
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>				6. EFFECTIVE DATE A. PROPOSED:		7. C.S. OR OTHER LEGAL AUTHORITY	
8. POSITION (Specify whether establish, change grade or title, etc.)				B. APPROVED: <i>29 Mar 53 [Signature]</i>			
FROM— (Adm Assistant) Intell Ofcr (Ops)  GS-9 \$5310.00 <del>DDP</del> <del>WH</del>  Monterrey, Mexico		9. POSITION TITLE AND NUMBER  10. SERVICE, GRADE, AND SALARY  11. ORGANIZATIONAL DESIGNATIONS  12. HEADQUARTERS		TO— (Adm Assistant) INTELL OFFICER BA-182  GS-132-9 \$5310.00 DD/P WH III Monterrey, Mexico			
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL			
A. REMARKS (Use reverse if necessary)  <b>BA-182</b>							
B. REQUESTED BY (Name and title) <i>[Signature]</i> C/WH				D. REQUEST Signature: _____ Title: <i>for FI/PO</i>			
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>X-457</b>							
13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB <input type="checkbox"/> OTHER <input type="checkbox"/>				14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>			
15. SEX <input type="checkbox"/> 16. RACE <input type="checkbox"/>		17. APPROPRIATION FROM: TO: <b>3532-00-000</b>		18. SUBJECT TO C S RETIREMENT ACT (YES-NO)		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:							
21. STANDARD FORM 50 REMARKS  <i>[Handwritten marks]</i>							
22. CLEARANCES		INITIAL OR SIGNATURE		DATE		REMARKS:	
A.							
B. CEIL OR POS CONTROL							
C. CLASSIFICATION							
D. PLACEMENT OR ENPL.							
E.							
F. APPROVED BY <b>8-17-53 [Signature]</b>							

**POSTED**  
*[Signature]*

1. Agency and organizational designations		2. Pay roll		3. Block No.	4. Slip No.				
5. Employee's name (and social security account number when appropriate)		6. Grade and salary							
WOODRUFF, Ann L.		GS - 9 \$5125							
PAY ROLL CHANGE DATA									
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F.I.C.A.		NET PAY
7. Previous normal									
8. New normal									
9. Pay this period									
10. Remarks:				11. Appropriation(s)		12. Prepared by			
[Signature]				VR 14		ba 1/28/53			
						13. Audited by			
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase									
14. Effective date	15. Date last equivalent increase	16. Old salary rate	17. New salary rate	18. Performance rating is satisfactory or better.		(Signature or other authentication)			
1 Jan 53	7 Feb 52	\$5125	\$5310						
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):						(Check applicable box in case of excess LWOP)			
<input type="checkbox"/> No excess LWOP. Total excess LWOP						<input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.			
[Handwritten marks]						Initials of Clerk			
STANDARD FORM NO. 1126—Revised Form prescribed by Comp. Gen., U.S. Nov. 8, 1950, General Regulations No. 102						PAY ROLL CHANGE SLIP—PERSONNEL			

pre

1. Agency and organizational designations <b>CENTRAL INTELLIGENCE AGENCY</b>				2. Pay period <b>1/15-1/31</b>	3. Block No. <b>177</b>	4. Slip No.		
5. Employee's name (and social security account number when appropriate) <b>C. DIPIASTISS, Ann L.</b>				6. Grade and salary <b>GS-9 \$5080.00</b>				
<b>PAY ROLL CHANGE DATA</b>								
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	F.I.C.A.	NET PAY
7. Previous normal								
8. New normal								
9. Pay this period								
10. Remarks <b>Please return to FDC prior to 14 Feb 62</b>				11. Appropriation(s) <b>WH 56-24</b>		12. Prepared by <i>[Signature]</i>		13. Audited by
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase								
14. Effective date <b>3 Feb 62</b>	15. Date last equivalent increase <b>4 Feb 61</b>	16. Old salary rate <b>\$5000.00</b>	17. New salary rate <b>\$5135.00</b>	18. Performance rating as satisfactory or better <i>[Signature]</i> (Signature or other authentication)				
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods). Period(s): <input type="checkbox"/> No excess (WOP. Total excess LWOP				(Check applicable box in case of LWOP) <input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.				Initials of Clerk <i>[Signature]</i>
STANDARD FORM NO. 1176d-Revised Form provided by Comp. Gen., U.S. Nov. 8, 1950, General Regulations No. 102				<b>PAY ROLL CHANGE SLIP - PERSONNEL COPY</b> <i>[Signature]</i>				



SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME <b>Ann L. Goodpasture</b>		DATE <b>7 June 1951</b>
NATURE OF ACTION		EFFECTIVE DATE <b>8 June 1951</b>
	FROM	TO
TITLE	<b>Intelligence Officer GS-9</b>	<b>Administrative Assistant FSS-9</b>
GRADE AND SALARY	<b>GS-9 \$4600.00</b>	
OFFICE	<b>OSO</b>	<b>OSO</b>
DIVISION	<b>FDT</b>	<b>FDT</b>
BRANCH		
OFFICIAL STATION	<b>Monterrey</b>	<b>Monterrey</b>

APPROVAL

QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER <i>H. C. [Signature]</i>	

POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS  YES  NO

OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON \_\_\_\_\_

SECURITY CLEARED ON \_\_\_\_\_

OVERSEAS AGREEMENT SIGNED \_\_\_\_\_

ENTERED ON DUTY \_\_\_\_\_

**PURSUANT TO DCI DIRECTIVE  
EFFECTIVE 21 OCT. 1951  
SALARY ADJUSTED TO \$ 5060**

(SIGNATURE OF AUTHENTICATING OFFICER)

REMARKS:

Subject is due a lump sum payment for annual leave to be paid up to 7 June 1951.

**POSTED**  
*[Signature]*

**COPY IN PERSONNEL FILES  
CONFIDENTIAL FUNDS BRANCH**

SECRET

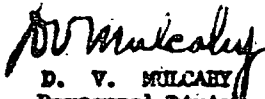
CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME GO. DPASTINE, Ann L.		DATE 23 April 1951
NATURE OF ACTION Appointment		EFFECTIVE DATE 27 May 1951
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM	TO
		Intelligence officer (top) GS-9 Long
		GS-9 \$1600.00
		OSO
		OUT
		Conterrey
APPROVAL		
QUALIFICATIONS Frank Jones CLASSIFICATION TOP SECRET L-594	FOR ASSISTANT DIRECTOR PERSONNEL OFFICER A. C. [Signature]	EXECUTIVE 353200
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON 22 May 1951		
SECURITY CLEARED ON CONFERENCE		
OVERSEAS AGREEMENT SIGNED 28 May 1951		
ENTERED ON DUTY 27 May 1951		
Alex McReid (SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS: Slot 2. Please transfer leave from V funds.		
301 JF 24 April		

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(ml)

1. NAME (MR.-MISS-MRS.-ONE GIVEN NAME INITIALS) AND SURNAME		2. DATE OF BIRTH	3. JOURNAL ACTION NO.	4. DATE
Miss Ann L. Goodpasture		08 Nov. 1918	86675	27 June 1951
This is to notify you of the following action affecting your career:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Resignation		05/25/51		
FROM		TO		
Intelligence Officer (Ops.)		0. POSITION TITLE		
GS-9-130 \$4600.00 per. annum.		9. SERVICE SERIES, GRADE, SALARY		
OSO FIZ/SEA Branch I		10. ORGANIZATIONAL DESIGNATIONS		
Washington, D. C.		11. HEADQUARTERS		
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT. <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
ONE <input type="checkbox"/> TWO <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/>		
		Bu. #1801 CSC #1741 12/19/47		
15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT OF AFFIDAVITS (ACCESSIONS ONLY)
		FROM: \$115900 TO: \$21-100	Yes	
		20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: Oklahoma		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
*To accept other employment.				
INB: 5/25/51				
LEL: 90 hrs., 5/28/51 thru 8 hrs., 6/13/51				
inc 1 holiday 5/30/51				
ENTRANCE EFFICIENCY RATING:				
 D. V. MULCAHY Personnel Division AUTHENTICATION				

*gm*

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION


(mca)

1. NAME (MR., MISS, MRS., etc.; GIVE NAME, INITIALS, AND SURNAME) <b>Miss Ann L. Goodpastore</b>		2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. JOURNAL OR ACTION NO. <b>24656</b>	4. DATE <b>3 Feb. 1951</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Promotion</b>		6. EFFECTIVE DATE <b>4 Feb. 1951</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-6.116(b)</b>	
FROM <b>Intelligence Officer (Ops) GS-7</b>		TO <b>Intelligence Officer (Ops) GS-9</b>		
8. SERVICE SERIES, GRADE, SALARY <b>GS-7-132-\$4325.00 per annum Bu.#1803 CSC#1740</b>		9. SERVICE SERIES, GRADE, SALARY <b>GS-9-130-\$4600.00 per annum</b>		
10. ORGANIZATIONAL DESIGNATIONS <b>OSO FDZ/SEA Branch I</b>		10. ORGANIZATIONAL DESIGNATIONS <b>OSO FDZ/SEA Branch I</b>		
11. HEADQUARTERS <b>Washington, D. C.</b>		11. HEADQUARTERS <b>Washington, D. C.</b>		
12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> <b>X</b>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input checked="" type="checkbox"/> <b>Bu.#1801 CSC#1741 12/19/47</b>		
15. SEX <b>F</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>2115900</b> TO: <b>951-100</b>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>	19. DATE OF APPOINTMENT OF AFFIDAVIT (ACCESSIONS ONLY)
		20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Oklahoma</b>		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
ENTRANCE EFFICIENCY RATING:				
Signature: _____ _____ <b>Personnel Branch</b> 22. SIGNATURE OR OTHER AUTHENTICATION				

1. Agency and organizational designations <b>CENTRAL INTELLIGENCE AGENCY</b>		2. Pay period	3. Block No. <b>252-106</b>	4. Slip No.					
5. Employee's name <b>William J. ...</b>			6. Grade and salary <b>GS-7 \$4,200.00</b>						
PAY ROLL CHANGE DATA									
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND			NET PAY
7. Previous normal									
8. New normal									
9. Pay this period									
10. Remarks: <b>CSO, FID, SEA DIVISION #1</b>				11. Appropriation(s)		12. Prepared by			
						13. Audited by			
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase									
14. Effective date <b>24 Dec 50</b>	15. Date last equivalent increase <b>25 Dec 49</b>	16. Old salary rate <b>\$4,200.00</b>	17. New salary rate <b>\$4,325.00</b>	18. (a) Effici cond... than... and service and (b) ... <i>[Signature]</i>		19. Suspense date <b>8 Dec 50</b>			
20. LWOP data (Fill in appropriate spaces covering LWOP during following periods):					(Check applicable box in case of excess LWOP)				
Periods: <b>None</b>					<input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.				
<input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP <b>None</b>					Initials of <b>JA</b>				
STANDARD FORM NO. 1126 Form prescribed by Comp. Gen., U. S. Feb. 3, 1950, General Regulations No. 102					PAY ROLL CHANGE SLIP—PERSONNEL COPY				

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION (info)

1. NAME (MR - MISS - MRS - DR. C. OR S. FOR NAME, INITIALS, AND SURNAME) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>26 Nov. 1918</b>	3. JOURNAL OR ACTION NO. <b>14085</b>	4. DATE <b>22 Dec. 1950</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Reassignment</b>		6. EFFECTIVE DATE <b>24 Dec. 1950</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-6.116(b)</b>	
FROM <b>Reports Officer, GS-7 (Intelligence Officer)</b>		8. POSITION TITLE <b>Intelligence Officer (Ops) GS-7</b>		
9. SERVICE SERIES, GRADE, SALARY <b>GS-7-130-\$4325.00 per annum Bu. #1489 CSC/1A49</b>		10. ORGANIZATIONAL DESIGNATIONS <b>OSO FDZ/SEA Branch I</b>		
11. HEADQUARTERS <b>Washington, D. C.</b>		12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input checked="" type="checkbox"/> HEAD. OTHER		14. POSITION CLASSIFICATION ACTION <input type="checkbox"/> NEW <input type="checkbox"/> VICE <input checked="" type="checkbox"/> I. A. <input type="checkbox"/> REAL <b>Bu. #1803 CS-1749 27/10/50</b>		
15. SEX <b>F</b>	16. RACE <b>V</b>	17. APPROPRIATION FROM: <b>715000</b> TO: <b>971-108</b>		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>
		19. DATE OF APPOINTMENT OF AFFIDAVIT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Oklahoma</b>
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
ENTRANCE EFFICIENCY RATING: _____				
22. SIGNATURE OF OFFICIAL AUTHORIZING ACTION 				

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(part) 130

1. NAME (MR., MISS, MRS.—ONE GIVEN NAME, INITIAL(S), AND SURNAME) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov. 1913</b>	3. JOURNAL OR ACTION NO. <b>#1809</b>	4. DATE <b>2/13/50</b>
5. NATURE OF ACTION (USE STANDARD TERM ACOLOGY) <b>Pay Increase - (Periodic)</b>				
6. EFFECTIVE DATE <b>12/25/49</b>		7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>CIA Admin. Inst. 20-1 Dated 12/9/49</b>		
8. POSITION TITLE <b>Reports Officer, GS-7 (Intelligence Officer)</b>		9. SERVICE, SERIES, GRADE, SALARY <b>GS-7, \$4075.00 per annum</b>		
10. ORGANIZATIONAL DESIGNATIONS <b>OSO COPS - YDZ SEA Division #1</b>		11. HEADQUARTERS <b>Washington, D. C.</b>		
12. FIELD OR DEPT L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		13. VETERAN'S PREFERENCE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER		
14. POSITION CLASSIFICATION ACTION <b>Bu. #1489 CSC 1445 12/10/49</b>		15. SEX <input checked="" type="checkbox"/> F <input type="checkbox"/> M		
16. APPROPRIATION <b>2105700</b>		17. SUBJECT TO C. S. RETIREMENT ACT (YES—NO) <b>Yes</b>		18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STAT: <b>Oklahoma</b>		20. REMARKS: THIS ACTION IS SUBJECT TO APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.		
<p><b>Last Salary Increase ..... 12/26/48</b></p> <p><b>Efficiency Rating ..... Excellent</b>  <b>Dated ..... 12/20/49</b></p> <p><b>Conduct Report ..... Satisfactory</b>  <b>Dated ..... 12/23/49</b></p>				
ENTRANCE EFFICIENCY RATING:		21. SIGNATURE OR OTHER AUTHENTICATION  <b>Robert S. Wattles</b> <b>ROBERT S. WATTLES</b> <b>Employee Division</b>		

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION **1ba 130**

1. NAME (MR., MISS, MRS., FIRST, MIDDLE, INITIAL, LAST) <b>Miss Ann L. Goodpastore</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO. <b>526</b>	4. DATE <b>10-28-49</b>	
This is to notify you of the following action affecting your employment:					
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Conversion-Class. Act of 1949</b>		6. EFFECTIVE DATE <b>10-30-49</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Letter-DCI-10-28-49</b>		
FROM		TO			
<b>Reports Officer P-2</b> <b>(Intelligence Officer)</b>  <b>P-2 \$3978.00 per annum</b>  <b>OSO</b> <b>COPS</b> <b>SEA</b> <b>DIVISION #1</b>  <b>Washington, D.C.</b>		8. POSITION TITLE  9. SERVICE, GRADE, SALARY  10. ORGANIZATIONAL DESIGNATIONS  11. HEADQUARTERS	<b>Reports Officer GS-7</b> <b>(Intelligence Officer)</b>  <b>GS-7 \$4075.00 per annum</b>  <b>OSO</b> <b>COPS - FDZ</b> <b>SEA</b> <b>DIVISION #1</b>  <b>Washington, D.C.</b>		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL			
13. REMARKS					
<div style="border: 1px solid black; width: 200px; height: 40px; margin: 0 auto;"></div> <p><b>Acting Chief, Employees Division</b></p>					
14. SIGNATURE OR OTHER AUTHENTICATION					
15. VETERAN'S PREFERENCE			16. POSITION CLASSIFICATION ACTION		
NONE	5 PT.	10 POINT	WWII	WWI	OTHER
<input checked="" type="checkbox"/>					
17. SEX <input checked="" type="checkbox"/> F <input type="checkbox"/> M 18. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> N			NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input checked="" type="checkbox"/> REAL <input type="checkbox"/> <b>En. #1489</b> <b>OS-1445</b> <b>10/10/47</b>		
19. APPROPRIATION			20. SUBJECT TO C S RETIREMENT ACT (YES-NO)	21. DATE OF OATH (ACCESSIONS ONLY)	22. LEGAL RESIDENCE
FROM: <b>2105900</b> TO: <b>950-108</b>			<b>Yes</b>		<b>Oklahoma</b>



CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION **281 (pl) 130**

1. NAME (MR - MISS - MRS - FIRST - MIDDLE INITIAL - LAST) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OF ACTION NO.	4. DATE <b>21 March 1949</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Encoyted Appointment</b>		6. EFFECTIVE DATE <b>21 March 1949</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-43</b>	
FROM		TO		
8. POSITION-TITLE <b>Reports Officer (Intelligence Officer)</b>		<b>P-2</b>		
9. SERVICE GRADE SALARY <b>P-2 \$3978.00 per annum</b>				
10. ORGANIZATIONAL DESIGNATIONS <b>OSO COFS - FBZ SEA Division #1</b>				
11. HEADQUARTERS <b>Washington, D.C.</b>				
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPT L	<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL
13. REMARKS  <p><b>Previously employed at \$3978.00 per annum</b></p> <p><b>No-Strike Affidavit has been properly executed.</b></p> <p><b>This appointment is subject to the satisfactory completion of a trial period of six months.</b></p>				
<div style="border: 1px solid black; width: 150px; height: 40px; margin: 0 auto;"></div> <p><b>Personnel Officer</b></p> <p>14. SIGNATURE OR OTHER AUTHENTICATION</p>				
15. VETERAN'S PREFERENCE			15. POSITION CLASSIFICATION ACTION	
NONE	5 PT	10 POINT	NEW	VIC
<input checked="" type="checkbox"/>		DISAB WIFE WIDOW	I A	REAL
			<input checked="" type="checkbox"/>	
17. SEX <b>F</b>			19. APPROPRIATION <b>2199900</b>	
18. RACE <b>W</b>			FROM <b>959-108</b>	
			TO	
			20. SUBJECT TO C S RETIREMENT ACT (YES--NO) <b>Yes</b>	
			21. DATE OF OATH (ACCESSIONS ONLY) <b>21 March 1949</b>	
			22. LEGAL RESIDENCE <b>Oklahoma</b>	

4. PERSONNEL FOLDER COPY

**SECRET**

**PERSONNEL ACTION REQUEST  
SPECIAL FUNDS**

NOTE: See instructions on reverse side.

NAME <b>GOODPASTURE, Ann L.</b>		DATE <b>7 February 1949</b>
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>
LOCAL ADDRESS		NUMBER OF DEPENDENTS
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b> AGE <b>30</b>
NATURE OF ACTION <b>Resignation</b>		EFFECTIVE DATE <b>20 March 1949</b>

	FROM	TO
Title	<b>Administrative Assistant</b>	
Grade and Salary	<b>GAF-7 \$3978.00</b>	
Office - Branch	<b>GSO - FBZ</b>	
Division		
Section		
Official Station	<b>Washington, D.C. (Field)</b>	

REF ID: A68111  
 CONFIDENTIAL  
 [Signature]

ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)  
**Please transfer accrued leave to vouchered funds.**

POSTED  
 [Signature] 3/20/49

**APPROVAL**

FIELD		HEADQUARTERS U. S.	
_____ CHIEF OF STATION	DATE	_____ PERSONNEL OFFICER	DATE
_____ SPECIAL FUNDS OFFICER	DATE	_____ BRANCH CHIEF	DATE
_____ DATE	DATE	<i>E. M. J. [Signature]</i> FOR THE ASSISTANT DIRECTOR	DATE
_____ DATE	DATE	<i>James F. McMan [Signature]</i> CHAIRMAN PERSONNEL REVIEW COMMITTEE	DATE
_____ DATE	DATE	<i>[Signature]</i> SPECIAL FUNDS OFFICER	DATE

**SECRET**

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

*12*

NAME <b>GOODPASTURE, Ann L.</b>		DATE <b>1 April 1949</b>	
RESIDENCE AT TIME OF EMPLOYMENT			
LOCAL ADDRESS			
CITIZENSHIP <b>USA</b>	SEX <b>F</b>	DATE OF BIRTH <b>28 Nov. 1918</b>	MARITAL STATUS <b>Single</b>
NATURE OF ACTION <b>Amendment to Periodic Pay Increase</b>		EFFECTIVE DATE <b>26 December 1948</b>	
	FROM	TO	
TITLE	<b>Administrative Assistant</b>	<b>Administrative Assistant</b>	
GRADE AND SALARY	<b>CAF-7 \$3852.60</b>	<b>CAF-7 \$3978.00</b>	
OFFICE	<b>OSO - FBZ</b>	<b>OSO - FBZ</b>	
BRANCH			
DIVISION			
OFFICIAL STATION	<b>Washington, D.C. (Field)</b>	<b>Washington, D.C. (Field)</b>	
APPROVAL			
FIELD		HEADQUARTERS	
CHIEF OF STATION		FOR THE ASSISTANT PERSONNEL OFFICER	
		COPY IN PAYROLL FILES <b>CONFIDENTIAL FUNDS BRANCH</b> <i>Ann L.</i> - INITIALS	
		PERSONNEL OFFICER <i>George E. Melton</i> Deputy Personnel Officer	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS			
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____			
SECURITY CLEARED ON _____			
OVERSEAS AGREEMENT SIGNED _____			
ENTERED ON DUTY _____			
AUTHENTICATED BY <i>(Signature)</i>			
REMARKS  <b>Original action amended to reflect the correct effective date.</b>			

**POSTED**  
*AG 4/27/49*

SECRET

SECRET

PERSONNEL ACTION REQUEST  
SPECIAL FUNDS

B

NOTE: See instructions on reverse side.

NAME <b>Ann L. GOODPATURE</b>		DATE <b>7 December 1948</b>
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>
LOCAL ADDRESS		NUMBER OF DEPENDENTS
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b> AGE <b>30</b>
NATURE OF ACTION <b>Periodic Pay Increase</b>		EFFECTIVE DATE <b>1 Dec 48</b>

	FROM	TO
Title	Administrative Assistant	Administrative Assistant
Grade and Salary	CAF-7 \$3727.20	CAF-7 \$3978.00
Office - Branch	OSO - FBI	OSO - FEZ
Division		
Section		
Official Station	Washington, D.C. (Field)	Washington, D.C. (Field)
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		<i>ATE 2/3/49</i>
Special Foreign Living		<i>Y</i>

REMARKS: (May be continued to reverse side)

Subject has received no increase in salary since 14 December 1947 when she received a temporary promotion to a CAF-9, effective only while at her field post. Subject returned from the field on 7 December and was downgraded to CAF-7, \$3727.20. Subject was promoted to CAF-7 on 17 April 1946. I certify that subjects service and conduct have been satisfactory in all respects.

APPROVAL		<i>Henry W. Linn</i>	
FIELD	HEADQUARTERS U.S.		
CHIEF OF STATION	DATE	<i>H. C. Clendinning</i>	<i>1 Dec 48</i>
SPECIAL FUNDS OFFICER	DATE	PERSONNEL OFFICER	DATE
	DATE	<i>Robert J. Winters</i>	<i>15 Dec 48</i>
	DATE	BRANCH CHIEF	DATE
	DATE	FOR THE ASSISTANT DIRECTOR	DATE
	DATE	CHAIRMAN PERSONNEL REVIEW COMMITTEE	DATE
	DATE	<i>William H. Davis</i>	<i>12/17/48</i>
	DATE	SPECIAL FUNDS OFFICER	DATE

SECRET

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

*[Handwritten initials]*

NAME: <b>GOODPASTURE, Ann L.</b>		DATE: <b>1 April 1949</b>	
RESIDENCE AT TIME OF EMPLOYMENT			
LOCAL ADDRESS			
CITIZENSHIP <b>USA</b>	SEX <b>F</b>	DATE OF BIRTH <b>28 Nov. 1918</b>	MARITAL STATUS <b>Single</b>
NO. OF DEPENDENTS		DATE OF APPOINTMENT	
NATURE OF ACTION <b>Amendment to Transfer and Change to a Lower Grade</b>			EFFECTIVE DATE <b>7 December 1948</b>
	FROM	TO	
TITLE		<b>Administrative Assistant</b>	
GRADE AND SALARY		<b>CAF-7 \$3852.60</b>	
OFFICE		<b>OSO - FBZ</b>	
BRANCH			
DIVISION			
OFFICIAL STATION		<b>Washington, D.C. (Field)</b>	
APPROVAL			
FIELD		HEADQUARTERS	
CHIEF OF STATION <i>[Signature]</i>		FOR THE ASSISTANT DIRECTOR	
PERSONNEL OFFICER <i>[Signature]</i>			
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____			
SECURITY CLEARED ON _____			
OVERSEAS AGREEMENT SIGNED _____			
ENTERED ON DUTY _____			
AUTHENTICATED BY <i>[Signature]</i>			
REMARKS:  <b>Original action amended to reflect correct salary.</b>			

SECRET

SECRET

B

PERSONNEL ACTION REQUEST  
SPECIAL FUNDS

NOTE: See instructions on reverse side.

NAME <b>Ann L. GOODPASTURE</b>		DATE <b>7 December 1948</b>
LEGAL ADDRESS <b>Oklahoma</b>	MARITAL STATUS <b>Single</b>	
LOCAL ADDRESS	NUMBER OF DEPENDENTS	
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b> AGE <b>30</b>
NATURE OF ACTION <b>Transfer and Downgrade - Change to lower grade</b>		EFFECTIVE DATE <b>7 December 1948</b>

	FROM	TO
Title	Administrative Assistant	Administrative Assistant
Grade and Salary	CAF-9 \$4479.60	CAF-7 \$3727.20
Office - Branch	OSO - FBZ	OSO - FBZ
Division		
Section		
Official Station		Washington, D.C. (Field)
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)

Subject has completed tour of duty in the field.

*WSD 2/3/49*  
*Jif*

APPROVAL

FIELD		HEADQUARTERS U. S.	
_____ CHIEF OF STATION	DATE	<i>E.M. Jewell</i> PERSONNEL OFFICER	<i>12/8/48</i> DATE
_____ SPECIAL FUNDS OFFICER	DATE	_____ BRANCH CHIEF	DATE
_____ DATE	DATE	_____ FOR THE ASSISTANT DIRECTOR	DATE
_____ DATE	DATE	_____ SPECIAL FUNDS OFFICER	DATE
_____ DATE	DATE	_____ SPECIAL FUNDS OFFICER	DATE

SECRET

PERSONNEL ACTION REQUEST  
SPECIAL FUNDS

VS  
SECRET  
CMMW

NOTE: See instructions on reverse side.

NAME <b>Anne L. Goodpasture</b>		DATE <b>23 December 1947</b>
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>
LOCAL ADDRESS		NUMBER OF DEPENDENTS
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b>
NATURE OF ACTION <b>TEMP Promotion</b>		AGE <b>29</b>
		EFFECTIVE DATE <b>14 Dec 47</b>

	FROM	TO
Title	<b>Administrative Assistant</b>	<b>Administrative Assistant</b>
Grade and Salary	<b>GAP-7 \$3397.20</b>	<b>GAP-9 \$4149.60</b>
Office - Branch	<b>OSO-FBZ</b>	<b>OSO-FBZ</b>
Division		
Section		
Official Station		
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)

Subject has had no pay increase since 17 April 1947.  
See attached justification. *This promotion to be effective while on duty in [ ] only.*

DGC 02/10/47  
 Adj EOD 09/18/47  
 LCD 09/14/47

APPROVAL	
FIELD	HEADQUARTERS U. S.
CHIEF OF STATION	<u>E. M. Jewell</u> 26 Dec 1947 PERSONNEL OFFICER DATE
SPECIAL FUNDS OFFICER	<u>Henry J. [unclear]</u> 23 Dec 47 BRANCH CHIEF DATE
	<u>Max [unclear]</u> 29 Dec 47 FOR THE ASSISTANT DIRECTOR DATE
	[ ] 31 Dec 47 SPECIAL FUNDS OFFICER DATE

DISTRIBUTION OF SALARY

To be paid by \_\_\_\_\_ Office \$ 149.50  
 (FIELD)  
 Tax withheld in the United States 48.40  
 Insurance to be withheld in the United States 12.50  
 (Amount subject to change if premium is increased or decreased)  
 Retirement withheld in United States 15.96  
 Other (Specify in detail) -----  
 Allotments 93.84

Name of Allottee C.H. Goodpasture  
 Address Box 522, Tipton, Okla.

Total Gross Salary Per Pay Period \$ 319.20

I HEREBY AUTHORIZE AND DIRECT THE DISBURSING OFFICE TO MAKE THE ABOVE ALLOTMENTS FROM MY COMPENSATION. ALL ADJUSTMENTS IN SALARY TO BE EFFECTED BY:

NET OVERSEAS PAYMENT \_\_\_\_\_  
 INITIAL ONE  
 U. S. ALLOTMENT \_\_\_\_\_

\_\_\_\_\_  
 SIGNATURE OF EMPLOYEE

REMARKS: (Continued from reverse side)

FEDERAL FUNDS BRANCH  
 17 DEC 50 14 30

INSTRUCTIONS: 1. Prepare in triplicate. 2. Note under "Remarks" whether action is transfer from vouchered funds or another government agency. 3. When form is prepared in the field, enter distribution of salary over signature of employee. 4. If job description or other information is appropriate, enter in "Remarks."



PERSONNEL ACTION REQUEST

SECRET

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME: <u>Anne L. COOPASTURE</u>		DATE: <u>12 November 1946</u>
NATURE OF ACTION: <u>Promotion</u>	NUMBER OF DEPENDENTS: _____	
EFFECTIVE DATE: <u>17 Apr. 1947</u>	LOCATION OF DEPENDENTS: _____	
MARITAL STATUS: <u>Single</u>	CITIZENSHIP: <u>USA</u>	SEX: <u>♀</u> AGE: <u>27</u>
FROM		TO
POSITION: <u>Clerk</u>	POSITION: <u>Administrative Assistant</u>	
CONTROL NO. _____	CONTROL NO. _____	
CLASSIFICATION: <u>CAF-5</u>	CLASSIFICATION: <u>CAF-7</u>	
ANNUAL GROSS SALARY: <u>1770.20</u> <u>32611.88</u> <i>6.144</i>	ANNUAL GROSS SALARY: <u>4397.20</u>	
OFFICIAL STATION: <u>(Branch)</u>	OFFICIAL STATION: _____	
ALLOWANCES:	ALLOWANCES:	
QUARTERS _____	QUARTERS _____	
COST OF LIVING _____	COST OF LIVING _____	
SPECIAL FOREIGN LIVING _____	SPECIAL FOREIGN LIVING _____	
TOTAL _____	TOTAL _____	
OFFICE:	OFFICE:	
BRANCH: <u>Special Operations A-782</u>	BRANCH: <u>Special Operations A-5B2</u>	
DIVISION: <u>D</u>	DIVISION: <u>D</u>	

TO BE PAID BY _____ OFFICE	\$ <u>150.00</u>
(Field)	
TAX WITHHELD IN UNITED STATES	<u>35.00</u>
INSURANCE TO BE WITHHELD IN UNITED STATES (Amount subject to change if premium is increased or decreased)	<u>12.50</u>
SAVINGS BONDS	_____
RETIREMENT WITHHELD IN UNITED STATES	_____
OTHER (Specify in detail) <u>3175.00 Unliquidated Travel Advance.</u>	_____
ALLOTMENTS _____	<u>60.82</u>
(Name of Allottee)	
Address _____	
TOTAL GROSS SALARY PER PAY PERIOD	\$ <u>261.32</u>

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

X Form No. 37-1  
Sep 1946

\_\_\_\_\_  
(Signature of Employee)

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

APPROVED \_\_\_\_\_ OFFICE

(Field)

Date \_\_\_\_\_

(Chief of Mission)

Date \_\_\_\_\_

(Security Officer)

Date \_\_\_\_\_

(Special Funds Officer)

*Wm G. Humph* 15 Nov 1946

APPROVED U.S. OFFICE

(Administrative Officer)

Date \_\_\_\_\_

(Branch Chief)

Date \_\_\_\_\_

(Chairman, Pers. Review Com.)

Date \_\_\_\_\_

(Special Funds Officer)

Date \_\_\_\_\_

**PERSONNEL ACTION REQUEST**

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>GOOPSTUTT, ANN L.</u>		DATE <u>12 March 1947</u>
NATURE OF ACTION <u>Periodic Increase</u>	NUMBER OF DEPENDENTS _____	
EFFECTIVE DATE <u>6 April 1947</u>	LOCATION OF DEPENDENTS _____	
MARITAL STATUS <u>Single</u>	CITIZENSHIP <u>U.S.</u>	SEX <u>F</u> AGE <u>28</u>
FROM		TO
POSITION <u>Clerk</u>	POSITION <u>Clerk</u>	
CONTROL NO. _____	CONTROL NO. _____	
CLASSIFICATION <u>C&amp;P-5</u>	CLASSIFICATION <u>C&amp;P-5</u>	
ANNUAL GROSS SALARY <u>\$2770.20</u>	ANNUAL GROSS SALARY <u>\$2895.60</u>	
OFFICIAL STATION _____	OFFICIAL STATION _____	
ALLOWANCES:	ALLOWANCES:	
QUARTERS _____	QUARTERS _____	
COST OF LIVING _____	COST OF LIVING _____	
SPECIAL FOREIGN LIVING _____	SPECIAL FOREIGN LIVING _____	
TOTAL _____	TOTAL _____	
OFFICE:	OFFICE:	
BRANCH <u>OSO-PBZ</u>	BRANCH <u>OSO-PBZ</u>	
DIVISION _____	DIVISION _____	

TO BE PAID BY _____ OFFICE	\$ <u>150.00</u>
(Field)	
TAX WITHHELD IN UNITED STATES	<u>30.00</u>
INSURANCE TO BE WITHHELD IN UNITED STATES (Amount subject to change if premium is increased or decreased)	<u>12.50</u>
SAVINGS BONDS	_____
RETIREMENT WITHHELD IN UNITED STATES	_____
OTHER (Specify in detail)	_____
ALLOTMENTS _____	<u>29.50</u>
(Name of Allottee)	
Address _____	
TOTAL GROSS SALARY PER PAY PERIOD	\$ <u>222.75</u>

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

**SECRET**

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

Periodic Pay Increase - Last Salary Increase - 10 March 1946

APPROVED \_\_\_\_\_ OFFICE \_\_\_\_\_  
(Field)

\_\_\_\_\_  
(Chief of Mission) Date \_\_\_\_\_

\_\_\_\_\_  
(Security Officer) Date \_\_\_\_\_

\_\_\_\_\_  
(Special Funds Officer) Date \_\_\_\_\_

APPROVED - U.S. OFFICE

*J. P. Higgins*  
(Administrative Officer) Date \_\_\_\_\_

*Lloyd George*  
(Branch Chief) Date *20 Mar 47*

\_\_\_\_\_  
(Chairman, Pers. Review Com.) Date \_\_\_\_\_

*E. J. [Signature]*  
(Special Funds Officer) Date \_\_\_\_\_



WAR DEPARTMENT  
NOTIFICATION OF PERSONNEL ACTION  
(DEPARTMENTAL)

exp/htw

1. Date 6 January 1947

23 Date of Birth

11/20/1918

2. TO Ann in SSU S. S. NO. \_\_\_\_\_

24 Civil Service or Other, Legal Authority

4 THROUGH: SSU  
Office in which Employed or to be Employed

This is to notify you of the following action concerning your employment, which is subject to the provisions on the reverse hereof. This form is an official record of your service history in the War Department and should be retained for future reference.

5. NATURE OF ACTION (Use standard terminology)

6 EFFECTIVE DATE

25 Male

Female

Termination \*\*

22 30 November 1946

7 POSITION TITLE

Clerk

(FROM)

(TO)

26 Non-Veteran  VETERAN 10Pt  10Pt

8 SERVICE GRADE AND SALARY

CAF-5 \$2770.20 p.a.

27 Civil Service Retirement

Yes  No

9 FORCE SERVICE OFFICE

SSU, AD

28 White  Negro  Other

10 DIVISION BRANCH AND SECTION

Registry

29 Nature of Position

New  Vice  Ten. Add'l  Vac.

11 DUTY STATION AND LOCATION

Washington, D.C.

WASHINGTON, D. C.

Reference Name No. Etc.

Bu.#916  
CSC #9

12. REMARKS

\*\*To accept an Excepted Appointment

\*\*Correction of action dated 12/13/46 to show correct effective date.

30 Date of Oath, Accession Action Only

31 Journal or Action No.

SSU-3

By order of the Secretary of War

*John H. Matye*

Administrative Assistant



**WAR DEPARTMENT  
NOTIFICATION OF PERSONNEL ACTION  
(DEPARTMENTAL)**

1. Date 13 December 1946 m/htw

2. TO Ann E Goodpasture 3. S S NO. \_\_\_\_\_  
First Name Middle Initial Last Name

13. Date of Birth  
**11/23/1918**

14. Civil Service or Other Legal Authority

4. THROUGH \_\_\_\_\_  
Office in which Employed at Date Employed

This is to notify you of the following action concerning your employment, which is subject to the provisions on the reverse hereof. This form is an official record of your service history in the War Department and should be retained for future reference.

5. NATURE OF ACTION (Use standard terminology)  
**Terminations**

6. EFFECTIVE DATE  
**17 November 1946**

15. Male \_\_\_\_\_ Female

7. POSITION TITLE	<b>Clark</b>	(FROM)	(TO)
8. SERVICE GRADE AND SALARY	<b>CAF-5 \$2770.20 p.a.</b>		
9. FORCE SERVICE OFFICE	<b>SSU, WD</b>		
10. DIVISION BRANCH AND SECTION	<b>Registry</b>		
11. DUTY STATION AND LOCATION	<b>Washington, D.C.</b>		<b>WASHINGTON, D. C.</b>

16. Non-Veteran  VETERAN No Prof.  5yr.  10yr.

17. Civil Service Retirement

18. White  Negro  Other

19. Nature of Position  
 New  Vice  12mo. Addl.  24mo.

Reference Name No. Etc.  
**Bu. #916  
 CSC #9  
 7/10/42**

20. Date of Cash Accession Action Only

21. Journal or Action No.  
**SSU-17**

12. REMARKS: **W/o accept an Excepted Appointment**

By order of the Secretary of War

*John H. Matys*

Administrative Assistant

WAR DEPARTMENT  
OFFICE OF STRATEGIC SERVICES UNIT  
WASHINGTON, D. C.

Name: **GOODPASTURE, Ann L. (Miss)**

Date: **5 June 1946**

Unit

This is to notify you that the ~~Office~~ Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **transfer**

Effective date: **5 June 1946**

	FROM—	TO—
Position.....	<b>Clerk-Stenographer</b>	<b>Clerk</b>
Grade and salary...	<b>CAF-5, \$2430 per annum P-5005</b>	<b>CAF-5, \$2430 per annum</b>
Branch.....	<b>SI</b>	<b>Registry</b>
Division.....		
Section.....		
Headquarters.....	<b>Washington, D. C.</b>	<b>Washington, D. C.</b>
Departmental or Field.....	<b>Field</b>	<b>Departmental</b>

REMARKS:

*63 W.P.R.  
6-16-46*

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of **OS. SSU.**
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*James B. Oprea*

CSC Report No.  
**Dept.**  
Civil Service or Other Legal Authority  
**Reg. XVI  
Section 2**

Appropriation  
**212/60425.001  
1010-410  
1022-48  
#135**

Date of birth  
**11/28/1918**

Legal residence  
**Oklahoma**

Sex  
**Female**

NATURE OF POSITION

V		
IA	<b>x</b>	<b>Bu #918 CSC #9 7/10/42</b>
VV		
New		

Annual Post Allowance

SUBJECT TO—

Investigation.....

1 year trial period.....

~~XXXXXXXX~~  
**WAR DEPARTMENT**  
**OFFICE OF STRATEGIC SERVICES**  
 WASHINGTON, D. C.

Name: **Goodpasture, Ann L. (Miss)**

Date: **4 March 1946**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer**

Effective date: **30 March 1946**

	FROM—	TO—
Position.....	<b>Clerk-Steno</b> <i>2430</i>	<b>Clerk-Steno</b> <i>2430</i>
Grade and salary.....	<b>CAF-5 \$2320 per annum</b>	<b>CAF-5 \$2320 per annum</b>
Branch.....	<b>SI</b>	<b>SI</b>
Division.....		
Section.....		
Headquarters.....	<b>Shanghai, China</b>	<b>Washington, D.C.</b>
Departmental or Field.....	<b>Field</b>	<b>Field*</b>

REMARKS: **\*Not to exceed 90 days within continental U.S.**

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund. *63 to PP 4-15-46*
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*L. Guin*  
 Chief, Civilian Personnel.

CSC Report No. <b>Field</b>
Civil Service or Other Legal Authority <b>A-1-7</b>
Appropriation <b>2160160 001</b> <b>1020-420</b> <b>C 2101-46</b>
Date of birth <b>11/28/1918</b>
Legal residence <b>Oklahoma</b>
Sex <b>Female</b>
NATURE OF POSITION
V <input type="checkbox"/>
IA <input type="checkbox"/>
VV <input type="checkbox"/>
New <input checked="" type="checkbox"/>
Annual Post Allowance
SUBJECT TO—
Investigation..... <input type="checkbox"/>
1 year trial period..... <input type="checkbox"/>



WAR DEPARTMENT  
~~OFFICE~~ STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: **GOODPASTURE, Ana L. (Miss)**

Date: **10 March 1946**

This is to notify you that the ~~Office~~ Strategic Services <sup>has</sup> taken the following action concerning your employment:

Nature of action: **Periodic Pay Increase**

Effective date: **10 March 1946**

	FROM-	TO-
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary.....	CAF-5, \$2320 per annum F-5065	CAF-5, \$2430 per annum *
Branch.....	SI	SI
Division.....		
Section.....		
Headquarters.....	Shanghai, China	Shanghai, China
Departmental or Field.....	Field	Field

REMARKS: **Last pay increase 3/1/45**  
**\*Plus living and quarters allowance at the rate authorized in Budget Circular A-8.**

*63 to R.  
5-22-46*

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of **SIX SHU**.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*James B. Opata*

CSC Report No.  
**Field (a)**

Civil Service or Other Legal Authority  
**Public Law 200 Section 2b**

Appropriation  
**1161300  
0 2101-46**

Date of birth  
**11/28/1918**

Legal residence  
**Oklahoma**

Sex  
**Female**

NATURE OF POSITION

V	
IA	
VV	
New	<b>F-5065 x 12/16/45</b>

Annual Post Allowance

SUBJECT TO--

Investigation.....

1 year trial period.....

Chief, ~~Personnel~~ Personnel, Division 1  
*Mi:ao* 310

WAR DEPARTMENT  
OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: GOODPASTURE, ANN L. (MISS)

Date: 29 January 1946

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Appointment by Transfer \*

Effective date: 16 December 1945

	FROM—	TO—
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary..	CAF-5, \$2320 per annum	CAF-5, \$2320 per annum **
Branch.....	Research & Analysis	SI
Division.....	Far East	
Section.....		
Headquarters.....	Shanghai, China	Shanghai, China
Departmental or Field.....	Field	Field

REMARKS:

\* From I.R.I.S., State Department

*13 WPR  
2-6-46*

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*[Signature]*  
Chief, Civilian Personnel.

CSC Report No.	
Field	
Civil Service or Other Legal Authority	
Schedule A-1-7	
Appropriation	
1161300 C 2101-46	
Date of birth	
11/28/1918	
Legal residence	
Oklahoma	
Sex	
Female	
NATURE OF POSITION	
V	
IA	
VV	F-5065 12/16/45
New	X
Annual Post Allowance	
** \$1980 per annum	
SUBJECT TO—	
Investigation.....	<input type="checkbox"/>
1 year trial period.....	<input type="checkbox"/>

IRIS  
STATE DEPARTMENT  
~~OFFICE OF STRATEGIC SERVICES~~  
WASHINGTON, D. C.

Name: GOODPASTURE, ANN L. (MISS)

Date: 29 January 1946

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Separation (transfer) \*

Effective date: 15 December 1945 COB

	FROM--	TO--
Position.....	Clerk-typographer	
Grade and salary.....	CAF-5, \$2320 per annum * F-5018	
Branch.....	Research & Analysis	
Division.....	Far East	
Section.....		
Headquarters.....	Shanghai, China	
Departmental or Field.....	Field	

REMARKS: \* To War Department, S.S.U.

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*[Signature]*

Chief, Civilian Personnel.

PERSONNEL FOLDER COPY

CSC Report No. <b>IRIS - Field</b>
Civil Service or Other Legal Authority
Appropriation <b>1161300 C 2201-46</b>
Date of birth <b>11/28/1918</b>
Legal residence <b>Oklahoma</b>
Sex <b>Female</b>
NATURE OF POSITION
V
IA
VV
New
Annual Post Allowance <b>*\$1980 per annum</b>
SUBJECT TO--
Investigation..... <input type="checkbox"/>
1 year trial period..... <input type="checkbox"/>

MI:ak 310

m m

**IRIS  
STATE DEPARTMENT  
~~OFFICE OF STRATEGIC SERVICES~~  
WASHINGTON, D. C.**

Name: **COOPASTURE, Ann L. (Miss)**

Date: **October 25, 1945**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer \***

Effective date: **October 25, 1945**

	FROM-	TO-
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary..	CAF-5, \$2320 per annum	CAF-5, \$2320 per annum **
Branch.....	Research & Analysis	Research & Analysis
Division.....	Far East	Far East
Section.....		
Headquarters.....	Chungking, China	Shanghai, China
Departmental or Field.....	Field	Field

REMARKS:

\* Per Cable #SHAN 4017

*WTD  
1-22-46*

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*John T. ...*  
Chief, Civilian Personnel

PERSONNEL FOLDER COPY

CSC Report No. <b>IRIS - Dept.</b>
Civil Service or Other Legal Authority <b>Schedule A-1-7</b>
Appropriation <b>1961097.001 DFF #1</b>
Date of birth <b>11/28/1918</b>
Legal residence <b>Oklahoma</b>
Sex <b>Female</b>
NATURE OF POSITION
V
IA
VV
New <input checked="" type="checkbox"/> <b>F-5018</b>
Annual Post Allowance <b>** \$ 1980 p.a.</b>
SUBJECT TO-
Investigation..... <input type="checkbox"/>
year trial period..... <input type="checkbox"/>

Notes **310**

IRIS  
STATE DEPARTMENT  
OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: **Goodpasture, Ann L. (Miss)** Date: **1 October 1945**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Appointment by transfer\***

Effective date: **1 October 1945**

FROM—	TO—
Position.....	Clerk-Stenographer
Grade and salary.....	CAF-5, \$2520 per annum**
Branch.....	Research & Analysis
Division.....	Far East
Section.....	
Headquarters.....	Chungking, China
Departmental or Field.....	Field

REMARKS:

\*From Office of Strategic Services

\*\*Living and quarters allowance at the base rate of \$1500 per annum plus \$600 per annum when government quarters are not provided.

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*C. V. ...*  
Chief, Civilian Personnel

PERSONNEL FOLDER COPY

CEC Report No.	
Field	
Civil Service or Other Legal Authority	
E.O. 9621 9/20/45	
Appropriation	
1961097.001 C LTF \$1	
Date of birth	
11/23/1913	
Legal residence	
Oklahoma	
Sex	
Female	
NATURE OF POSITION	
V	
IA	F-5019
VV	9/23/45
New	<input checked="" type="checkbox"/>
Annual Post Allowance	
SUBJECT TO—	
Investigation.....	<input type="checkbox"/>
1 year trial period.....	<input type="checkbox"/>

OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: GOODPASTURE, ANN L. (MISS) Date: 10 Sept. 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer**

Effective date: **23 September 1945**

	FROM-	TO-
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary..	CAF-5, \$2320 per annum	CAF-5, \$2320 per annum
Branch.....	Research & Analysis	Research & Analysis
Division.....		Far East
Section.....		
Headquarters.....	New Delhi, India	Chungking, China
Departmental or Field.....	Field	Field

REMARKS:

\* Living and quarters allowance at the base rate of \$1500 per annum plus \$500 per annum when government quarters are not provided.

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*E. J. Francis*  
Chief, Civilian Personnel

CSC Report No.	
Field	
Civil Service or Other Legal Authority	
Schedule A-1-7	
Appropriation	
1161300 C 2201-46	
Date of birth	
11/28/1918	
Legal residence	
Oklahoma	
Sex	
Female	
NATURE OF POSITION	
V	
IA	F-5018
VV	9/23/45
New	X 9/23/45
Annual Post Allowance	
SUBJECT TO-	
Investigation.....	<input type="checkbox"/>
1 year trial period.....	<input type="checkbox"/>

OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss) Date: 30 September 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Separation (transfer)\*

Effective date: 30 September 1945 COB

	FROM-	TO-
Position.....	Clerk-Stenographer	
Grade and salary..	CAF-5, \$2320 per annum**	
Branch.....	Research & Analysis	
Division.....	Far East	
Section.....		
Headquarters.....	Chungking, China	
Departmental or Field.....	Field	

REMARKS:

\*To State Department in accordance with Executive Order 9621, dated 20 September 1945.

\*\*Living and quarters allowance at the base rate of \$1500 per annum plus \$600 per annum when government quarters are not provided.

- Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- This appointment is for such time as your services may be required and funds are available for the work of OSS.
- This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*E. J. Francis*  
Chief, Civilian Personnel

PERSONNEL FOLDER COPY

CSC Report No. Field
Civil Service or Other Legal Authority
Appropriation 1161300 C 2201-48
Date of birth 11/28/1913
Legal residence Oklahoma
Sex Female
NATURE OF POSITION
V
IA
VV
New
Annual Post Allowance
SUBJECT TO-
Investigation..... <input type="checkbox"/>
1 year trial period..... <input type="checkbox"/>

OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss)

Date: May 31, 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: Excepted Appointment

Effective date: June 1, 1945

DOO-2/29/44

Position.....		Clerk-Stenographer
Grade and pay.....		GAF-5, \$2000 per annum*
Branch.....		Research & Analysis
Division.....		
Section.....		
Headquarters.....		New Delhi, India
Departmental or field.....		Field

Remarks: \* Plus living allowance at the rate established by the Strategic Services Officer not to exceed \$1377.00 per annum authorized by Budget Circular A-8.

This action is subject to the provisions of paragraphs checked below:

- Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.
- This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*William B. ...*  
Director of Personnel

C. S. C. Report No.	
Field	
Civil Service or other legal authority	
Schedule A-1-7	
Appropriation 1151300 8322-45	
Date of birth 11/28/1918	
Legal residence Oklahoma	
Sex Female	
NATURE OF POSITION	
New	Additional identical
X	
Vice	Vice vacancy
Reference (Name, number, and date, etc.) F-5018 6/1/45 310	
Subject to Retirement Act? Yes	

TW:mel



OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: **Goodpasture, Ann L. (Miss)**

Date: **May 31, 1945**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: **Termination \***

Effective date: **May 31, 1945 COB**

	FROM-	TO-
Position.....	<b>Clerk-Stenographer</b>	
Grade and salary..	<b>GAF-5, \$2000 per annum</b>	
Branch.....	<b>Research &amp; Analysis</b>	
Division.....		
Section.....		
Headquarters.....	<b>New Delhi, India</b>	
Departmental or field.....	<b>Field</b>	

Remarks: \* To accepted An Excepted Appointment, Schedule A-1-7.

This action is subject to the provisions of paragraphs checked below:

- Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.
- This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*William B. McEntee*  
Director of Personnel

C. S. C. Report No. <b>Field</b>	
Civil Service or other legal authority	
Appropriation <b>1151300 8322-45</b>	
Date of birth <b>11/28/1918</b>	
Legal residence <b>Oklahoma</b>	
Sex <b>Female</b>	
NATURE OF POSITION	
New	Additional identical
Vice	Vice vacancy
Reference (Name, number, and date, etc.)	
Subject to Retirement Act? <b>Yes</b>	

mm mel

OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss)

Date: March 1, 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: Transfer and Promotion and Change in Limitation

Effective date: March 1, 1945

	FROM-	TO-
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary.....	CAF-4, \$1800 per annum	CAF-5, \$2000 per annum
Branch.....	Civilian Personnel	Research and Analysis
Division.....	Training	
Section.....		
Headquarters.....	Washington, D. C.	New Delhi, India
Departmental or field.....	Field	Field

Remarks: Plus living allowance at the rate established by the Strategic Services Officer not to exceed \$1377.00 per annum authorized by Budget Circular A-8.

This action is subject to the provisions of paragraphs checked below: *63 to PR 3/2/45*

- Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.
- This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*William B. Minton Jr.*

Director, Personnel

C. S. C. Report No. <b>Field</b>
Civil Service or other legal authority Dept. Cir. 257 Rev. # Schedule A-1-7
Appropriation 1151300 8322445
Date of birth 11/23/1918
Legal residence Oklahoma
Sex Female
NATURE OF POSITION
New Additional identical X
Vice Vice vacancy
Reference (Name, number, and date, etc.) 9/30/44
Subject to Retirement Act? Yes

✓

OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: **Goodpasture, Ann L. (Miss)**

Date: **September 15, 1944**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: **Transfer and Change in Limitation**

Effective date: **September 16, 1944**

	FROM--	TO--
Position.....	<b>Clerk-Stenographer</b>	<b>Clerk-Stenographer</b>
Grade and salary.....	<b>CAF-4, \$1800 per annum B-#1381 CSC#68</b>	<b>CAF-4, \$1800 per annum</b>
Branch.....	<b>Research and Analysis</b>	<b>Civilian Personnel</b>
Division.....	<b>Far East</b>	<b>Training</b>
Section.....	<b>Military Supply<sup>1</sup></b>	
Headquarters.....	<b>Washington, D.C.</b>	<b>Washington, D.C.</b>
Departmental or field.....	<b>Departmental</b>	<b>Field*</b>

Remarks: **\*Pending transfer overseas.**  
**Subject to investigation.**

This action is subject to the provisions of paragraphs checked below:

Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.

This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*W. K. Kridler*

Director of Personnel

PERSONNEL FOLDER COPY

C. S. C. Report No.	
<b>Field(a)</b>	
Civil Service or other legal authority	
Appropriation <b>1151300.002 6005-45 From 2234</b>	
Date of birth <b>11/28/1918</b>	
Legal residence <b>Oklahoma</b>	
Sex <b>Female</b>	
NATURE OF POSITION	
New	Additional identical
<b>X</b>	
Vice	Vice vacancy
Reference (Name, number, and date, etc.) <b>9/6/44</b>	
Subject to Retirement Act? <b>Yes</b>	

*63c to Pay Roll  
9/16/44*

*EDM:mbg*

OFFICE OF STRATEGIC SERVICES  
COORDINATOR OF INFORMATION  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Kiss) Date: February 29, 1944

This is to notify you that the Coordinator of Information has taken the following action concerning your employment.

Nature of action: Appointment by Transfer

Effective date: February 29, 1944 - EOD

	FROM-	TO-
Position	Clerk-Stenographer	Clerk-Stenographer
Grade and salary	CAF-3, \$1620 per annum	CAF-4, \$1800 per annum
Branch	War Relocation Authority	Research and Analysis
Division	Personnel Management	Far East
Section	Replacement and Training	Military Supplies
Headquarters	Washington, D.C.	Washington, D. C.
Departmental or field	Departmental	Departmental

Remarks: This appointment is subject to a favorable report of the character investigation being made by the United States Civil Service Commission

A copy of the United States Civil Service Commission authorization is enclosed.

*63c sent to Payroll  
63d to O'Connell  
2/13/44  
DOO: February 29, 1944*

This action is subject to the provisions of paragraphs checked below:

- Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 2 1/2% will be deducted from your basic salary for deposit to your credit in the Retirement Fund. 5%
- This appointment is for such time as your services may be required and funds are available for the work of the office of the Coordinator of Information.

*[Signature]*  
Personnel Officer

PERSONNEL FOLDER COPY

C. S. C. Report No.  9861	
Civil Service or other legal authority DOA: 2/21/44 Reg. IX, Sec. 2a E.O. 9243 File D-9434	
Appropriation 1141300 2207-44	
Date of birth 11/23/1918	
Legal residence Oklahoma	
Sex Female	
NATURE OF POSITION	
New	Additional identification
Vice	Vice vacancy
	X
Reference (Name, number, and date, etc.) 2/1/43 Bu. #1381 CSC #68	
Subject to Retirement Act? Yes	

EDH:deb

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				057303			
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD	
GOODPASTURE ANN L.		11/28/18		F	13	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/CI/OPS		Washington, D.C.	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE			
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
30 November 1971				18 October 1970 - 31 October 1971			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<b>U-Unsatisfactory</b>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.						
<b>M-Marginal</b>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.						
<b>P-Proficient</b>	Performance is satisfactory. Desired results are being produced in the manner expected.						
<b>S-Strong</b>	Performance is characterized by exceptional proficiency.						
<b>O-Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1	Monitors all operational correspondence from the Far East Division Stations for counterintelligence leads and evidence of hostile espionage operations.						RATING LETTER
SPECIFIC DUTY NO. 2	Reviews field project outlines for evidence of penetrations, provocations, or foreign intelligence relationships. Advises Headquarters officers in preparation of security reviews. Represents CI Staff at DDP project review meetings when the senior officer is not available.						RATING LETTER
SPECIFIC DUTY NO. 3	Alternate Headquarters case officer to the Chief, CIOPS/FE for sensitive Prescribed and Limited Distribution counterintelligence projects handled by CI Staff.						RATING LETTER
SPECIFIC DUTY NO. 4	Coordinates cables and dispatches from FE Division Headquarters to field stations on CI cases and agent clearances.						RATING LETTER
SPECIFIC DUTY NO. 5	Maintains background files for use in consultation with FE Division officers on CI problems.						RATING LETTER
SPECIFIC DUTY NO. 6	Prepares for Chief, CI, summaries of counterintelligence incidents which suddenly develop such as arrests, defections, and newspaper exposures.						RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER

SECRET

(When Filled In)

**SECTION C NARRATIVE COMMENTS**

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

FEB 17 2 20 11 '12

See memorandum in lieu of Fitness Report.

**SECTION D CERTIFICATION AND COMMENTS**

**1. BY EMPLOYEE**

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

DATE	SIGNATURE OF EMPLOYEE
------	-----------------------

**2. BY SUPERVISOR**

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

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

**3. BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

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

SECRET

SECRET

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Ann L. GOODPASTURE  
18 October 1970 - 31 October 1971

To the immense regret of this writer Ann Goodpasture is retiring very soon. It would be silly to rate her competitively against any of her colleagues, male or female, young or merely well-preserved. Concerning her fitness be it recorded that she is very fit indeed to perform any of the tasks listed as her current ones or almost any others I can think of at almost any grade. I venture to rate her over-all performance, thirty years of it, as OUTSTANDING. Ann is one of the tough warp-threads on which this organization is woven, and when she retires the fabric of this organization will be weakened.



Chief, CI/OPS/FE

EMPLOYEE SIGNATURE:

*Ann L. Goodpasture*  
Ann L. Goodpasture

16 FEB 1972

Date

COMMENTS OF REVIEWING OFFICIAL:

Miss Goodpasture is indeed a fine officer who consistently turns in a Strong performance when she is not doing an outstanding job. She is an excellent office and project manager who is cost conscious and she is a careful thorough instructor and briefer. Her retirement will leave a great gap in CI/OPS and, as Mr. Johnson has said, in the organization. I hope she gets the official Agency recognition she deserves for the many years she has made substantive contribution to the CS.

*N. Scott Miler*

N. Scott MILER  
Chief, CI Operations

SECRET

17.2.72.

S-E-C-R-E-T

Cable Writing Refresher

Training Certification

TO: Registrar, Office of Training

I certify that I completed the Cable Writing Refresher No. 1  
on 23 April 1956.

Ann L Gooden

Name

WFE

Staff or Division

S-E-C-R-E-T



MAY 1956

S-E-C-R-E-T

mf

TRAINING EVALUATION

COUNTERSPIONAGE OPERATIONS COURSE No. 1

NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
Goodpasture, Ann L.	Female	19 March - 6 April 1956	15
DATE OF BIRTH	LOD DATE	GRADE OR RANK	OFFICE
28 November 1918	February 1944	GS-11	WE/FI
PROMOTED ASSIGNMENT OR PRESENT POSITION			
FI Operations Officer			

- I. Course Objectives: to familiarize the student with the various types of CE operations and with methods and procedures peculiar to CE in the field and at Headquarters; to outline CE objectives, and to increase proficiency in the recognition and exploitation of leads.
  
- II. Course Characteristics: The Counterspyonage Operations Course is of three weeks' duration. The curriculum material is presented by means of lectures, seminars, and directed reading. It is divided into sections as follows:
  - A. Introduction (definition of terms, the CI Staff, operational Security and risk assessment, sources of CE leads, CI reporting and records)
  - B. Interrogation
  - C. Foreign Intelligence Services (with emphasis on currently hostile services including a lecture on CE in Liaison)
  - D. Penetration and Defection
  - E. Double Agent Operations

During the course each student is required to present orally a CE case and to submit a written version of the case. Evaluations are based on problems, the case analysis presented by the student, and objective tests.

S-E-C-R-E-T

III. Evaluation

A. Two double agent problems requiring case analysis. This analysis involves thorough study of the case:

1. To determine areas of missing, inadequate, or questionable information
2. To pick out information which can be checked through other sources
3. To recognize all possible leads
4. To assess the risk involved
5. To propose appropriate action (operational decisions)

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			12*	3	

B. Case analysis (student presentation):

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			10	5*	

C. Objective tests based on all sections of the course:

	Fail	Poor	Satis	Exc	Sup
Ratings in this class		3	8*	4	

This student's rating is indicated by asterisk.

S-E-C-R-E-T

S-E-C-R-E-T

- IV. COMMENTS: Miss Goodpasture's handling of the problems indicated that she is capable of shrewd analysis. She overlooked some points which might have been considered in one problem and dealt with the other problem in too brief fashion, but in general her analysis reflected her actual experience and suggested that she is perhaps stronger in analysis than in making operational decisions. She presented a rather complex case and demonstrated that she not only understood the case but was able to give a clear account of it.

V. EXPLANATION OF ADJECTIVAL RATINGS:

SUPERIOR The student demonstrated outstanding ability or proficiency in meeting this course goal or objective; he indicated an unusually thorough knowledge of the material presented, or, if skills are involved, he demonstrated that he is one of the most effective individuals in this area.

EXCELLENT The student showed unusual competence, skill, or ability in meeting this objective or goal; he demonstrated a thorough grasp of the presented material, or if skills are involved, he demonstrated that he can perform in an extremely effect manner in this area.

SATISFACTORY The student met this objective in a competent and adequate manner; he demonstrated a good understanding and grasp of the information presented, or, if skills are involved, he demonstrated sufficient competence to operate effectively in this area.

POOR Although the student may have met some of the standards set for minimum achievement of this course goal or objective, he demonstrated serious gaps in knowledge or sufficient lack of skill to be of doubtful competence.

FAILURE The student was unable to grasp the concepts or information presented, or demonstrated that he had not acquired the necessary information and skills to operate at even minimum capacity in this area.

FOR THE DIRECTOR OF TRAINING:

*Alfonso Rodriguez*  
Chief Instructor  
COUNTERESPIONAGE OPERATIONS COURSE

*Shown to subject on 7 May 1956.  
F. C. Alaman  
CIN E I F I*

S-E-C-R-E-T

SECRET

CUMULATIVE TRAINING RECORD				DATE 24 Sept. 56 18 Oct. 56		
NAME Ann L. Goodpasture			PROJECTED PERSONNEL ACTION			
			<input checked="" type="checkbox"/> PROMOTION	<input type="checkbox"/> REASSIGNMENT	OTHER (Explain)	
			<input type="checkbox"/> ROTATION	<input type="checkbox"/> TRAVEL		
FROM: IO (PI) GS-11			TO: IO (PI) GS-12		EOD Feb. '44	
X	COURSE	DATE TAKEN	X	COURSE	DATE TAKEN	REMARKS
	BASIC ORIENT. ALSO BIC, BITC, SOC, BTP, PH I	'49		AIR OPS. 1 2 3 4 5		1. CONSTRUCTIVE CREDIT (CC) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS <input type="checkbox"/> BACKGROUND <input type="checkbox"/> EXPERIENCE <input type="checkbox"/> TRAINING.
	CLAND. M & T ALSO OC, PH II			WAR. OPS. 1 2 3 4 5		
	CLAND. OPS. ALSO (AIC) AITC, AOC, CAT, PH III	'49		CLAND. FLD. ACT. 1 2 3 4 5 6		2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.
	RESISTANCE OPS ALSO PH. I-III- III RAFT			SURVIVAL 1 2 3 4 5 6		
	CLAND. SERV. REV.			BASIC PHOTO	46	TRAINING OFFICER COMMENTS: <input checked="" type="checkbox"/> A. THIS (DOES) (NOT) MEET TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION. <input type="checkbox"/> NO FURTHER TRAINING RECOMMENDED AT THIS TIME.
	WORLD COMMUNISM	PPO '51		DOCUMENTATION		
	ANTI-COMM. OPS.			LOCKS	4/4 51	<input type="checkbox"/> B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN "S". THE COMPLETION OF WHICH WILL SATISFY BASIC QUALIFYING STANDARDS.
	ADMIN PROCEDURES	'51		SECRET WRITING	'51	
	OPS. SUPPORT			FLAPS & SEALS		<input type="checkbox"/> C. UNLESS SUBJECT HAS HAD PREVIOUS HQ. OR FIELD EXPERIENCE WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE <input type="checkbox"/> QUALIFYING <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT: <input type="checkbox"/> SOONEST <input type="checkbox"/> UPON RETURN TO HQ.
	TRADECRAFT PHASE ADMIN PHASE.			SMALL ARMS FAM. OTHER TRAINING		
	REPORTS			OSO	47	<input type="checkbox"/> D. WAIVER AND CC. SHOULD BE REQUESTED FOR THOSE COURSES MARKED WITH A "W". <input type="checkbox"/> E. RECOMMENDATIONS FOR ADDITIONAL TRAINING WERE MADE _____ DATE THESE RECOMMENDATIONS HAVE NOT BEEN MET.
	ORDER OF BATTLE					
	COUNTERESPIONAGE	cc 8/55		Double Unit g. 230 p. 56		
	ADV. COUNTER-ESPIONAGE	11/11/55				
	OPS. SECURITY					
	WAR PLANS					
	CLAND. POL. WARF.					
	STAYBEHIND OPS.					
	TECH. DEV. ORIENT.					
	INSTR. TECH.					
	EVASION-ESCAPE					
	SAB. OPS.					
	INVEST. TECH. ALSO CI TECH.					
	ADMIN REFRESHER					
	ROG. IMPROVE.					
	BASIC SUPV.					
	BASIC MGMT.			PRE-TEST		
	BALLOON OPS.			ASSESSMENT		
TO: Personnel Officer,			FROM: Career Management Officer			
The above projected personnel action has been <input checked="" type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.						
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.						
DATE 23 September 1956			SIGNATURE OF CAREER MANAGEMENT OFFICER R. H. [Signature]			

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 A, of Section A below.

SECTION A.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
7. GRADE 8. DATE REPORT DUE IN OP 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
10. TYPE OF REPORT (Check one) INITIAL ANNUAL REASSIGNMENT-SUPERVISOR REASSIGNMENT-EMPLOYEE SPECIAL (Specify)

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:

X THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL. IF INDIVIDUAL IS RATED "1" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM SA COPY ATTACHED TO THIS REPORT.
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)
X I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

B. THIS DATE 7 June 1956 C. TYPED OR PRINTED NAME AND SIGNATURE Thomas F. Thiele D. SUPERVISOR'S OFFICIAL TITLE DC/WE/FI

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 DATE
Posted Post Control 7 June 1956
Reviewed by F.S.

CONTINUED ON ATTACHED SHEET

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

A. THIS DATE 7 June 1956 B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL Francis G. Coleman C. OFFICIAL TITLE OF REVIEWING OFFICIAL C/WE/FI

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.

- 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 WEARINESS.
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)

OFFICE OF PERSONNEL  
15  
OF AM-36  
MAIL ROOM

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

**DIRECTIONS:**

- 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.
- Rate performance on each specific duty considering ONLY effectiveness of performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty. Do not rate as supervisors those who supervise a secretary only.
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:
 

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

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.

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 <b>Makes CE Analysis of Cases</b>	RATING NUMBER <b>6</b>	SPECIFIC DUTY NO. 4 <b>Assists in the Preparation of CE Notebooks</b>	RATING NUMBER <b>5</b>
SPECIFIC DUTY NO. 2 <b>Prepares Case Summaries</b>	RATING NUMBER <b>4</b>	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3 <b>Assists in Reviewing and Releasing Correspondence</b>	RATING NUMBER <b>5</b>	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

**DIRECTIONS:** Stress strengths and weaknesses, particularly those which affect development on present job.

Miss Goodpasture has a natural aptitude for analysis, a shrewd and inquiring mind, and an enthusiasm for FI/CE work. She is markedly interested in CIA and its mission, well-informed, and energetic. She displays an intelligence initiative and makes good use of her extensive agency experience. She has no significant weaknesses, but could use to advantage more experience in case-summary type writing.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

**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.

<b>5</b>	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...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION
----------	--

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION?  YES  NO. IF YES, EXPLAIN FULLY:

Miss Goodpasture has recently accepted a position in NEA which offers her greater opportunity than the job for which this report is made.

S-E-C-R-E-T

TRAINING EVALUATION

COUNTERESPIONAGE OPERATIONS COURSE No. 1

NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
Goodpasture, Ann L.	Female	19 March - 6 April 1946	15
DATE OF BIRTH	EDUCATION	GRADE OR RANK	OFFICE
23 November 1918	February 1944	GS-11	WE/PI
PROPOSED ASSIGNMENT OR PRESENT POSITION			
PI Operations Officer			

- I. Course Objectives: to familiarize the student with the various types of CS operations and with methods and procedures peculiar to CE in the field and at Headquarters, to outline CE objectives, and to increase proficiency in the recognition and exploitation of leads.
- II. Course Characteristics: The Counterespionage Operations Course is of three weeks' duration. The curricula material is presented by means of lectures, seminars, and directed reading. It is divided into sections as follows:
- A. Introduction (definition of terms, the CI Staff, operational Security and risk assessment, sources of CE Leads, CE reporting and records)
  - B. Interrogation
  - C. Foreign Intelligence Services (with emphasis on currently hostile services including a lecture on CE in Liaison)
  - D. Penetration and Defection
  - E. Double Agent Operations

During the course each student is required to present orally a CE case and to submit a written version of the case. Evaluations are based on problems, the case analysis presented by the student, and objective tests.

S-E-C-R-E-T

**III. Evaluation**

- A. Two double agent problems requiring case analysis. This analysis involves thorough study of the case:
1. To determine areas of missing, inadequate, or questionable information
  2. To pick out information which can be checked through other sources
  3. To recognize all possible leads
  4. To assess the risk involved
  5. To propose appropriate action (operational decisions)

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			12*	3	

- B. Case analysis (student presentation):

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			10	5*	

- C. Objective tests based on all sections of the course:

	Fail	Poor	Satis	Exc	Sup
Ratings in this class		3	8*	4	

This student's rating is indicated by asterisk.



S-E-C-R-E-T

- IV. COMMENTS: Miss Goodpasture's handling of the problems indicated that she is capable of shrewd analysis. She overlooked some points which might have been considered in one problem and dealt with the other problem in too brief fashion, but in general her analysis reflected her actual experience and suggested that she is perhaps stronger in analysis than in making operational decisions. She presented a rather complex case and demonstrated that she not only understood the case but was able to give a clear account of it.

V. EXPLANATION OF ADJECTIVAL RATINGS:

SUPERIOR The student demonstrated outstanding ability or proficiency in meeting this course goal or objective; he indicated an unusually thorough knowledge of the material presented, or, if skills are involved, he demonstrated that he is one of the most effective individuals in this area.

EXCELLENT The student showed unusual competence, skill, or ability in meeting this objective or goal; he demonstrated a thorough grasp of the presented material, or if skills are involved, he demonstrated that he can perform in an extremely effective manner in this area.

SATISFACTORY The student met this objective in a competent and adequate manner; he demonstrated a good understanding and grasp of the information presented, or, if skills are involved, he demonstrated sufficient competence to operate effectively in this area.

POOR Although the student may have met some of the standards set for minimum achievement of this course goal or objective, he demonstrated serious gaps in knowledge or sufficient lack of skill to be of doubtful competence.

FAILURE The student was unable to grasp the concepts or information presented, or demonstrated that he had not acquired the necessary information and skills to operate at even minimum capacity in this area.

FOR THE DIRECTOR OF TRAINING:

*James Rodriguez*  
Chief Instructor  
COUNTERESPIONAGE OPERATIONS COURSE

S-E-C-R-E-T

SECRET  
(When Filled In)

FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It serves to provide:  
1. The agency selection board with information of value when considering the appointment 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 the 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 required 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 is aware of the nature of his work.

CODED

13 DEC 1955

Reviewed by PUD

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) GOODPASTURE	(First) Ann	(Middle) L	2. DATE OF BIRTH 28 Nov 1918	3. SEX F	4. CAREER DESIGNATION DI
5. DATE OF ENTRANCE ON DUTY Feb 1944	6. OFFICE ASSIGNED TO DDP	7. DIVISION WE	8. BRANCH FI Staff	11. GRADE GS-11	
9. NATURE OF ASSIGNMENT <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/> FIELD		10. IF FIELD, SPECIFY STATION:		12. DATE THAT THIS REPORT IS DUE 1 December 1955	
13. PERIOD COVERED BY THIS REPORT (Inclusive dates) February 1955-1 December 1955					

SECTION II (To be filled in by Supervisor)

1. CURRENT POSITION OPS, Off. (CE) 0132.52	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
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):	

- A. To help select and to carry out detailed operational reviews and security critiques of operations, particularly those involving the RIS.
- B. To analyze and recommend procedures in connection with operational security problems.
- C. When required, to review and to release Division dispatch traffic.
- D. To serve as the Division's IA defector coordinator.
- E. To assist in processing STD clearances for the Division.
- F. To assist the Division C/FI as required.

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 Dec 7, 1955	NAME AND SIGNATURE OF RATER (Employer's immediate supervisor) Thomas F. White
I HAVE REVIEWED THIS REPORT (Check "X" if any are reflected by attached memorandum)	
THIS DATE 7. XII. 55	NAME AND SIGNATURE OF REVIEWING OFFICIAL (Official next higher in line of authority) Boardman DC/WF

SECRET  
(When Filled In)

OFFICE OF PERSONNEL

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 description is 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.

Dec 13 11 06 AM '55  
MAIL ROOM

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  
(When Filled In)

OFFICE OF PERSONNEL

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

An interest in and capacity for FI/CE work.

DEC 13 11:00 AM '55

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

MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Advanced OE training is planned for her.

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):

None

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

CUMULATIVE TRAINING RECORD					DATE	
NAME <b>OSTAS, Ann L.</b>					<b>10 February 1955</b>	
PROJECTED PERSONNEL ACTION						
PROMOTION		REASSIGNMENT		OTHER (Specify)		
ROTATION		TRAVEL				
FROM: Area 2-8 Off 78-11						
TO: Area 11, Off 05-11 W/ Wash DC MOS						
X	COURSE	DATE-TAKEN	X	OTHER TRAINING COURSES	DATE TAKEN	REMARKS
	BIC(CS), ALSO BIC, BITC, SOC, STP AND BOC	49		050	17	1. CONSTRUCTIVE CREDIT (C.C.) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS <input type="checkbox"/> BACKGROUND <input type="checkbox"/> EXPERIENCE <input type="checkbox"/> TRAINING.
	BTP II, ALSO OC					
	BTP III, ALSO AIC, AITC, AOC AND CAI	49	X	QBR		2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.
	PO, ALSO PN 1, II, III AND RAFT					STAFF TRAINING OFFICE COMMENTS: <input type="checkbox"/> A. THIS <input checked="" type="checkbox"/> DOES <input type="checkbox"/> DOES NOT MEET MINIMUM TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION. <input type="checkbox"/> B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN S, THE COMPLETION OF WHICH WILL SATISFY MINIMUM STANDARDS. <input checked="" type="checkbox"/> C. UNLESS SUBJECT HAS HAD PREVIOUS HQ. OR FIELD EXPERIENCE, WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE <input type="checkbox"/> QUALIFYING; <input checked="" type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	ITC ALSO CI	46				
	TECH					
	ADMIN	51				
	SIC					
	SUP					
	CFA					
	RPTS					
	OB					
	OSC (CE)					
	E & E					
	CPW					
	WP SOC					
	CPO	51				
	STB					
	CEW					
	IT					
	GW					
	SAB					
	AO					
	MO					
	SNR					
	BFOT	46				
	OCC					
	LOCKS					
	S/W	51				
	F B S					
	SAF					
TO: Personnel Officer, V.G. JAR: A					FROM: Career Management Officer	
The above projected personnel action has been <input checked="" type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.						
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.						
DATE					SII	
14 Feb 55						

SECRET

CUMULATIVE TRAINING RECORD					DATE	
NAME: GOOD, Anne D.					17 Jun 53	
PROJECTED PERSONNEL ACTION						
PROMOTION		REASSIGNMENT		OTHER (Explain)		
ROTATION		TRAVEL				
FROM: Avon Ord 088 2-11			TO: T.O. 11			
AOS						
X	COURSE	DATE TAKEN	X	OTHER TRAINING COURSES	DATE TAKEN	REMARKS
	BIC(S), ALSO BIC, BITC, SOC, BTP AND ROC	49		ASO	47	1. CONSTRUCTIVE CREDIT (C.) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS <input type="checkbox"/> BACKGROUND <input type="checkbox"/> EXPERIENCE <input type="checkbox"/> TRAINING.
	BTP III, ALSO OC		X	Q.S. Review		
	BTP III, ALSO AIC, AITC, AOC AND CAI	49				2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.
	PO, ALSO PM I, II, III AND RAFT					STAFF TRAINING OFFICE COMMENTS: <input type="checkbox"/> A. THIS <input type="checkbox"/> DOES <input type="checkbox"/> DOES NOT MEET MINIMUM TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION. <input type="checkbox"/> B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN S. THE COMPLETION OF WHICH WILL SATISFY MINIMUM STANDARDS. <input checked="" type="checkbox"/> C. UNLESS SUBJECT HAS HAD PREVIOUS NO. OR FIELD EXPERIENCE, WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE <input type="checkbox"/> QUALIFYING <input checked="" type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	ITC ALSO CI	51				
	TECH					
	ADMIN	51				
	SIC					
	SUP					
	GFA					
	RPTS					
	OB					
	OSC (CE)					
	E & R					
	CPW					
	WPSOC					
	CPO	51				
	STB					
	CEW					
	IT					
	GW					
	SAB					
	AO					
	MO					
	SUR					
	BFOT	46				
	DOC					
	LOCKS					
	S/W	51				
	F & S					
	SAF					
TO: Personnel Officer, F.C. Jerome					FROM: Career Management Officer	
The above projected personnel action has been <input checked="" type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.						
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.						
DATE: 4 Jun 53					SIGNATURE OF CAREER MANAGEMENT OFFICER	

SECRET

(2-4-49)

SECRET

CUMULATIVE TRAINING RECORD					DATE	
NAME: <b>Miss Ann Goodnature</b>					16 June 1951	
PROJECTED PERSONNEL ACTION						
<input checked="" type="checkbox"/> PROMOTION <input type="checkbox"/> REASSIGNMENT    OTHER: (Explain)						
<input type="checkbox"/> ROTATION <input type="checkbox"/> TRAVEL						
FROM: <b>I.O. CS-9 WH/ Washington</b>			TO: <b>I.O. Call MI/Washington</b>		AOS	
X	COURSE	DATE TAKEN	X	OTHER TRAINING COURSES	DATE TAKEN	REMARKS
	BIC(CS), ALSO BIC, BITC, SOC, BTP AND BOC					1. CONSTRUCTIVE CREDIT (CC) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS: <input type="checkbox"/> BACKGROUND <input type="checkbox"/> EXPERIENCE <input type="checkbox"/> TRAINING.
	BTP II, ALSO OC					
	BTP III, ALSO AIC, BITC, AOC AND CAI					2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.
	PO, ALSO PM I, II, III AND RAFT					
	ITC ALSO CI					STAFF TRAINING OFFICE COMMENTS:
	TECH					
	ADMIN					<input type="checkbox"/> A. THIS <input type="checkbox"/> DOES <input type="checkbox"/> DOES NOT MEET MINIMUM TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION.
	SIC					
	SUP					<input type="checkbox"/> B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN S, THE COMPLETION OF WHICH WILL SATISFY MINIMUM STANDARDS.
	CFA					
	RPTS					<input type="checkbox"/> C. UNLESS SUBJECT HAS HAD PREVIOUS MO, OR FIELD EXPERIENCE, WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE <input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	OB					
	OSC (CS)					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	E R E					
	CPW					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	WPSOC					
	CPO					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	STB					
	CEW					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	IT					
	GW					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	SAB					
	AO					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	MO					
	SUR					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	BFOT					
	DOC					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	LOGRS					
	S/V					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	F B S					
	SAF					<input type="checkbox"/> QUALIFYING, <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
TO: Personnel Officer, <b>Virginia Lynch</b>			FROM: Career Management Officer			
The above projected personnel action has been <input type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.						
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.						
DATE			SIGNATURE OF CAREER MANAGEMENT OFFICER			

*Ann Goodnature*  
SIGNATURE OF STAFF TRAINING OFFICER



*Gene L. Goodpasture*

CONFIDENTIAL

Replaces Form No. 55-2 which may continue to be used.

STATUS AND EFFICIENCY REPORT

(SEE INSTRUCTIONS ON REVERSE SIDE)

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME: *Gene L. Goodpasture* GRADE: *GS-9* SALARY: *\$5310.00* DATE OF ASSIGNMENT: *8 June 1951*

2. DESCRIPTION OF DUTIES SINCE LAST REPORT: (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)  
*No change*

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.  
*None*

4. PROFICIENCY IN FOREIGN LANG.	READING			SPEAKING			UNDERSTANDING		
	EXC.	GOOD	FAIR	EXC.	GOOD	FAIR	EXC.	GOOD	FAIR

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-50 STATE)  
TYPE OF DUTY: *I.O.* LOCATION: *No preference*

(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?

MARITAL STATUS:  YES  NO NUMBER OF DEPENDENTS:  YES  NO EMERGENCY ADDRESSEE:  YES  NO LEGAL ADDRESS:  YES  NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

*25 August 1953*  
DATE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT: DATE YES: *Feb 53* DATE NO: *Aug 53*

OCCASION FOR REPORT: ANNUAL  REASSIGNMENT OF REPORTING OFFICER  PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON  COVERING INITIAL 90 DAYS OF EMPLOYMENT

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES?  YES  NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES?  YES  NO *Intelligence Officer*

DO YOU CONCUR IN EMPLOYEE'S 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? *GS-11; Intelligence Officer*

9. 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.

RATING FACTORS	NOT OBSERVED	UNSAT- ISFAC- TORY	FAIR	GOOD	VERY GOOD	EXCEL- LENT	OUT- STANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE							
B. INTEREST AND ENTHUSIASM IN WORK							
C. SECURITY CONSCIOUSNESS							
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS							
E. ATTENTION TO DUTY							
F. JUDGMENT AND COMMON SENSE							
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE							
H. DISCRETION							
I. INITIATIVE							
J. ABILITY TO HANDLE AND DIRECT PEOPLE							
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)							
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION							
M. TACT							
N. SAGACITY (NON-GUILIBILITY)							
O. LEADERSHIP							
P. PHYSICAL STAMINA							
Q. MENTAL STAMINA							

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.

*This employee should be given duties of a responsible nature which will take advantage of his ability and wide experience with this organization. Such assignment with attendant promotion, is recommended.*

1 September 1953  
DATE

David B. Kewan  
SIGNATURE OF REPORTING OFFICER

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE...

*Handwritten: Intelligence*  
**STATUS AND EFFICIENCY REPORT**  
 (SEE INSTRUCTIONS ON REVERSE SIDE)  
 SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. REVERSE WILL BE USED IF POSSIBLE.

1. NAME AND GRADE: MIDDLE CAP PAYING SALARY \$5310. DATE OF ASSIGNMENT TO PRESENT DUTY 8 June 1951

2. DESCRIPTION OF DUTY (LIST MOST RECENT FIRST, DESCRIBE CONCISELY BUT FULLY)  
No change. Administrative assistant, Substation, Monterrey, Mexico

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.  
None

4. PROFICIENCY IN FOREIGN LANG.	READING		SPEAKING		UNDERSTANDING	
	EXC	GOOD	VERY GOOD	GOOD	EXC	GOOD
<u>None</u>						

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS (IF IN US-SO STATE) TYPE OF DUTY LOCATION  
None

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?

MARITAL STATUS:  YES  NO NUMBER OF DEPENDENTS:  YES  NO EMERGENCY ADDRESSEE:  YES  NO LEGAL ADDRESS:  YES  NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

18 March 1953  
 DATE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR.

7. PERIOD COVERED BY THIS REPORT: DATE FROM 1 July, 52 DATE TO 28 Feb, 53

OCCASION FOR REPORT: ANNUAL  REASSIGNMENT OF REPORTING OFFICER  PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON  COVERING INITIAL 90 DAYS OF EMPLOYMENT

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES?  YES  NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES?  YES  NO IF SO, WHAT DUTY OR DUTIES? Intelligence officer

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2?  YES  NO IF NO, EXPLAIN IN SECTION 11  
 HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT?  YES  NO TO WHAT GRADE AND FOR WHAT POSITION? Intelligence officer

9. 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.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE							✓
B. INTEREST AND ENTHUSIASM IN WORK							✓
C. SECURITY CONSCIOUSNESS							✓
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS							✓
E. ATTENTION TO DUTY							✓
F. JUDGMENT AND COMMON SENSE					✓		
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE					✓		
H. DISCRETION							✓
I. INITIATIVE							✓
J. ABILITY TO HANDLE AND DIRECT PEOPLE	✓						
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)							✓
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION					✓		
M. TACT					✓		
N. SAGACITY (NON-GULLIBILITY)							✓
O. LEADERSHIP	✓						
P. PHYSICAL STAMINA	✓						
Q. MENTAL STAMINA							✓

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY NOT WANT HIM?  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.

Note: This report is occasioned by the resignation of the Chief of Mission, Mexico City, under whose supervision the [redacted] operates. He suggested that the undersigned submit this report as being more familiar with Riggs' work than he is.

18 March 1953  
 DATE

David B. Kewan  
 SIGNATURE OF REPORTING OFFICER

STATUS AND EFFICIENCY REPORT

1947 INSTRUCTIONS ON REVERSE SIDE

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME (PRINTED) LAST FIRST MIDDLE CAP RATING SALARY DATE OF ASSIGNMENT TO PRESENT DUTY  
[Redacted] GS-9 \$5185.00 8 June 1951

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST, DESCRIBE CONCISELY BUT FULLY)  
Administrative Assistant, Monterrey, Mexico. Under general supervision of the Chief of Substation is responsible for all administrative reports, maintenance of files, communications duties, custodian of property, preparation of pouches and performance of such other duties as may be assigned.

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED. None

Table with columns for Proficiency in Foreign Language (Reading, Speaking, Understanding) and rows for French and Spanish.

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-50 STATE) TYPE OF DUTY LOCATION  
Reports Officer Headquarters  
Operations Officer Headquarters

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATEST?  
MARITAL STATUS YES NO NUMBER OF DEPENDENTS YES NO EMERGENCY ADDRESSEE YES NO LEGAL ADDRESS YES NO  
IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO.

*Goodpastor, Ann Lorenz*

1 June 1952  
DATE

[Redacted Signature]

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT DATE FROM DATE TO OCCASION FOR REPORT ANNUAL REASSIGNMENT OF REPORTING OFFICER PROPOSED REASSIGNMENT OF EMPLOYEE COVERING INITIAL 90 DAYS OF EMPLOYMENT

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? IF SO, WHAT DUTY OR DUTIES AND/OR OPERATIONS OFFICER

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ES-11, OPERATIONS OFFICER

9. 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.

Table with columns for Rating Factors (A through Q) and rows for performance ratings (Not Observed, Unsatisfactory, Fair, Good, Very Good, Excellent, Outstanding).

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY PREFER NOT BE SATISFIED PARTICULARLY NOT WANT HIM? TO HAVE HIM? TO HAVE HIM? TO HAVE HIM? 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.  
*Qualifications, experience & general ability have been invaluable in the activation of this small substation.*

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET) 1 June 1952 DATE

David B. Keenan SIGNATURE OF REPORTING OFFICER  
[Redacted Signature] SIGNATURE OF REVIEWING OFFICER

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE SHOWN TO THE EMPLOYEE REPORTED ON

1. NAME (PRINTED) LAST FIRST MIDDLE CAP RATING SALARY DATE OF ASSIGNMENT  
 RIGGS, Robert H. CAF-9 14600.00 June 8, 1951

2. DESCRIPTION OF DUTY SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST; DESCRIBE CONCISELY BUT FULLY)  
 Intelligence Assistant, Monterrey Substation, Monterrey, NL, Mexico

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED: None

4. PROFICIENCY IN FOREIGN LANG.

PERSON LANG.	READING			SPEAKING			UNDERSTANDING		
	ABC	GOOD	FAIR	ABC	GOOD	FAIR	ABC	GOOD	FAIR
French		X				X			X

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-30 STATE) TYPE OF DUTY LOCATION  
 No preference at this time other than present assignment and present location.  
 (LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATEST?

MARITAL STATUS  YES  NO NUMBER OF DEPENDENTS  YES  NO EMERGENCY ADDRESSEE  YES  NO LEGAL ADDRESS  YES  NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

17 October 1951  
DATE

*Robert B. Riggs*  
SIGNATURE OF EMPLOYEE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT: DATE FROM 9 July 51 DATE TO 9 Oct 51

OCCASION FOR REPORT: ANNUAL  REASSIGNMENT OF REPORTING OFFICER  PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON  COVERING INITIAL 90 DAYS OF ASSIGNMENT  at station

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES?  YES  NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES?  YES  NO IF SO, WHAT DUTY OR DUTIES: INTELLIGENCE OFFICER

DO YOU CONCUR IN EMPLOYEE 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? GS-10, INTELLIGENCE OFFICER

9. 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.

RATING FACTORS	NOT OBSERVED	POOR	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE				<input checked="" type="checkbox"/>	
B. INTEREST AND ENTHUSIASM IN WORK					<input checked="" type="checkbox"/>
C. SECURITY CONSCIOUSNESS					<input checked="" type="checkbox"/>
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS					<input checked="" type="checkbox"/>
E. ATTENTION TO DUTY				<input checked="" type="checkbox"/>	
F. JUDGMENT AND COMMON SENSE				<input checked="" type="checkbox"/>	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE				<input checked="" type="checkbox"/>	
H. DISCRETION					<input checked="" type="checkbox"/>
I. INITIATIVE				<input checked="" type="checkbox"/>	
J. ABILITY TO HANDLE AND DIRECT PEOPLE	<input checked="" type="checkbox"/>				
K. PERFORMANCE ON PRESENT DUTIES (ITEM 2)				<input checked="" type="checkbox"/>	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION	<input checked="" type="checkbox"/>				
M. TACT				<input checked="" type="checkbox"/>	
N. SAGACITY (COMMON SENSE)				<input checked="" type="checkbox"/>	
O. LEADERSHIP	<input checked="" type="checkbox"/>				
P. PHYSICAL STAMINA				<input checked="" type="checkbox"/>	
Q. MENTAL STAMINA				<input checked="" type="checkbox"/>	

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.

*Riggs' experience and general ability have been instrumental in organizing new stations. He has willingly assumed increasing duties and administrative functions, leaving the undersigned free for development of new bases.*

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET)

17 October 1951  
DATE  
 (IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

*George M. Villalobos*  
SIGNATURE OF REVIEWING OFFICER

*Conf. Packet*  
**SECRET**

JUN 13 1951

**TO : Chief, FDT**  
**FROM : Chief, Investigative Techniques Section, TRD**  
**SUBJECT: Counterintelligence Techniques Course**

1. Ann Goodpasture was enrolled in the counter-intelligence techniques course for the period 29 May through 5 June 1951. He received instruction in the following elements:

- a. Familiarization with the techniques of long range photography (taking of telephoto pictures) X
- b. Instruction in methods of intensifying and reducing of negatives X
- c. Field expedient for the taking of extremely long range pictures X
- d. Simple technique for producing small images of documents for concealment purposes X
- e. Work with the Speed Graphic camera and accessories X
- f. Practice in the taking of photo-flash pictures X
- g. Work with the Photo-Record and Recordak cameras X
- h. Continued practice in darkroom techniques X
- i. Locking devices; their relative security, methods of picking safes and combination locks X
- j. Instruction and demonstration of microphones and wire-tapping and recording equipment ---
- k. Surreptitious entry methods, opening of sealed documents ---
- l. Fingerprints, possibilities, limitations, and laboratory practice ---
- m. Scientific aids, identification of tool marks, string, paper, etc. ---

2. This student completed all phases of the training in a satisfactory manner.

3. Additional comments: Miss Goodpasture had to leave the course before the end of the second week.

**SECRET**

*R. L. McLesro*  
R. L. McLESRO

(2)

CONFIDENTIAL

TO : Chief, FDT 29 May 1951  
FROM : Chief, Investigative Techniques Section, TRD  
SUBJECT: Basic Photographic Course (Second Week)

1. Miss Ann Goodpasture was enrolled in the Basic Photographic Course (second week) for the period 21 May through 23 May 1951.

2. This course provides intensive practice in all the techniques covered in the first week Basic Photographic Course. The student works under a minimum of supervision and field conditions are simulated as nearly as possible.

3. Other photographic techniques in which this student received training:

4. This student completed all phases of this course in a satisfactory manner.

Although Miss Goodpasture was present for only three days of the second week's course she appeared to have a working knowledge of the work covered.

*R. L. Melberg*  
\_\_\_\_\_  
R. L. MELBERG

CONFIDENTIAL

SECRET

Date 29 May 1951

MEMORANDUM

TO : Chief, Foreign Division T  
FROM : Chief, Communications Division  
SUBJECT: Completion of Communications Training

1. Ann L. Goodpasture has satisfactorily completed the cryptographic and communications security Briefing Course which was given for a specific assignment at Monterrey, Mexico.
2. Student listed above is ~~is~~ qualified to perform cryptographic duties.  
(Comments: Has previous experience. Is capable of performing communications duties with limited supervision or the use of reference materials.)
3. Prior to departure for the field, the above-named person should report to Communications Security Branch, Communications Division, for final briefing. This briefing will require approximately two hours, and must be scheduled in advance at least one week before departure. Appointments can be made by contacting the Communications Security Branch. If training was given outside CIA headquarters, arrangements should be made for a final briefing on the outside.
4. If departure has not occurred within two months after completion of the course, student will be required to return to Training branch, Communications Division, as soon as possible for a review. This review will require approximately 8 hours, and will be repeated at the end of each two-month delay. (The foreign division will be notified when a two-month period has elapsed and arrangements for the review will be made.)
5. It is requested that this office be notified at once, in writing, of any changes in assignment. The training given was specific for the assignment indicated in Paragraph 1 and additional training may be required if the assignment is changed.
6. If the assignment is cancelled, it is requested that this office be notified at once, in writing, and that the student report to Communications Security Branch as soon as possible for a communications debriefing.

FOR THE CHIEF, COMMUNICATIONS DIVISION

Chief,  Branch

CC: CSB

~~XXX~~

~~XXX~~

FORM NO. 35-71  
NOV 1950

SECRET

(45)





SECRET

### TRAINING EVALUATION

1. The official to whom this report is entrusted is personally responsible for it. Although he may, within his discretion show it to other members of his staff, the report should never be shown to the student whom it concerns.

2. The report summarizes the findings, observations, and opinions of the various instructors during the course listed only, with no reference to other facts or findings about the student. More complete data is available in the files of the training division and may be examined after contacting the Records and Scheduling Officer.

STUDENT'S NAME GOODPASTURE, Ann

DATE OF REPORT 1 May 1951

TRAINING COURSE Administration Course #22

DIVISION FDT/OSO GRADE GS-9

TRAINING PERIOD 16 - 28 April 1951

PROJECTED ASSIGNMENT Admin. Ass't - Monterrey, Mexico

1. PERFORMANCE RECORD: The following grades show the achievement of the student in class problems and examinations. The total possible score is broken down to indicate the relative weighting of various factors. The overall adjectival rating is based on the following scale: 0 to 59% unsatisfactory; 60 to 79% Satisfactory; 80 to 89% Excellent; 90 to 100% Superior.

	<u>Possible Score</u>	<u>Achieved Score</u>
Headquarters and Field Problem	100	86
General Exam	100	89
		<u>175</u>

Overall Adjectival Rating - Excellent - 87

2. TRAIT CHARACTERISTICS RECORD. The following indicates the various personality traits as observed by the instructors during the training period. The observations include the student's participation and conduct in training as well as his reactions to various problems and situations. A scale of 0 to 10 is used, 0 indicating that the trait has not been observed, the lower numbers indicating below average, the higher indicating above average.

	<u>Rating</u>
(1) Ability to get along and work with people . . . . .	See Comment
(2) Ability to grasp instructions . . . . .	
(3) Enthusiasm and interest in work . . . . .	
(4) Industriousness . . . . .	
(5) Practical intelligence . . . . .	
(6) Astuteness . . . . .	
(7) Adaptability . . . . .	
(8) Effectiveness . . . . .	
(9) Stability . . . . .	
(10) Initiative . . . . .	
(11) Imagination . . . . .	
(12) Ability to handle and direct people . . . . .	

3. COMMENT. (To be used only in cases of outstanding strengths and weaknesses.) This employee who has been with the Agency since 1944 and has had both Headquarters and Field experience exhibited outstanding cooperation, understanding and adaptability of the highest degree throughout the entire course.

*William S. Renahan*  
CHIEF INSTRUCTOR  
**WILLIAM S. RENEHAN**

APPROVED.

REVIEWED.

VOUCHERED

# REPORT OF EFFICIENCY RATING

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

As of 31 March 1950 based on performance during period from 21 Sept. '49 to 31 March 1950

GOODPASTURE, Ann L.  
(Name of employee)

Intelligence Officer GS-7  
(Title of position, service, and grade)

OSO, FDZ, Div. I  
(Organization—Indicate bureau, division, section, unit, field station)

<p>ON LINES BELOW MARK EMPLOYEE</p> <p>✓ If adequate - If weak + If outstanding</p>	<p>1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A.</p> <p>2. Underline the elements which are especially important in the position.</p> <p>3. Rate only on elements pertinent to the position.</p> <p>a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions.</p> <p>b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i>.</p>	<p>CHECK ONE:</p> <p>Administrative, supervisory, or planning <input checked="" type="checkbox"/></p> <p>All others <input type="checkbox"/></p>
---	---	--

- \_\_\_\_\_ (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) Security
- \_\_\_\_\_ (B)
- \_\_\_\_\_ (C)

STANDARD		Adjective Rating
Deviations must be explained on reverse side of this form		
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	
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance.....	Good	Reviewing official... <u>Excellent</u>
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 \_\_\_\_\_ Chief, Br. I, FLE/SEA 4 April 1950  
(Title) (Date)

Reviewed by Harry W. Linn Deputy Chief, FDZ 12 April 50  
(Title) (Date)

Rating approved by efficiency rating committee \_\_\_\_\_ Report to employee \_\_\_\_\_  
(Date) (Addressing)

ERO-050-Dims 28 May 50

# REPORT OF EFFICIENCY RATING

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

As of 9/21/49 based on performance during period from 3/21/49 to 9/21/49

Ann L. Gendron Intelligence Officer F-2 (Reports)  
(Name of employee) (Title of position, service, and grade)

OSD, COPS  
(Organization—Indicate bureau, division, section, unit, field station)

<p>ON LINES BELOW MARK EMPLOYEE</p> <p><input checked="" type="checkbox"/> If adequate</p> <p><input type="checkbox"/> If weak</p> <p><input checked="" type="checkbox"/> If outstanding</p>	<p>1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 552A.</p> <p>2. Underline the elements which are especially important in the position.</p> <p>3. Rate only on elements pertinent to the position.</p> <p>a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions.</p> <p>b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i>.</p>	<p>CHECK ONE:</p> <p>Administrative, supervisory, or planning <input checked="" type="checkbox"/></p> <p>All others <input type="checkbox"/></p>
--	--	--

- |   |  |
|---|--|
| <p><input type="checkbox"/> (1) Maintenance of equipment, tools, instruments.</p> <p><input type="checkbox"/> (2) Mechanical skill.</p> <p><input type="checkbox"/> (3) Skill in the application of techniques and procedures.</p> <p><input type="checkbox"/> (4) Presentability of work (appropriateness of arrangement and appearance of work).</p> <p><input type="checkbox"/> (5) Attention to broad phases of assignments.</p> <p><input checked="" type="checkbox"/> (6) Attention to pertinent detail.</p> <p><input type="checkbox"/> (7) Accuracy of operations.</p> <p><input checked="" type="checkbox"/> (8) Accuracy of final results.</p> <p><input checked="" type="checkbox"/> (9) Accuracy of judgments or decisions.</p> <p><input checked="" type="checkbox"/> (10) Effectiveness in presenting ideas or facts.</p> <p><input checked="" type="checkbox"/> (11) Industry.</p> <p><input type="checkbox"/> (12) Rate of progress on or completion of assignments.</p> <p><input type="checkbox"/> (13) Amount of acceptable work produced. (Is mark based on production records? (Yes or no))</p> <p><input checked="" type="checkbox"/> (14) Ability to organize his work.</p> <p><input checked="" type="checkbox"/> (15) Effectiveness in meeting and dealing with others.</p> <p><input checked="" type="checkbox"/> (16) Cooperativeness.</p> <p><input checked="" type="checkbox"/> (17) Initiative.</p> <p><input checked="" type="checkbox"/> (18) Resourcefulness.</p> <p><input checked="" type="checkbox"/> (19) Dependability.</p> <p><input type="checkbox"/> (20) Physical fitness for the work.</p> | <p><input type="checkbox"/> (21) Effectiveness in planning broad programs.</p> <p><input checked="" type="checkbox"/> (22) Effectiveness in adapting the work program to broader or related programs.</p> <p><input type="checkbox"/> (23) Effectiveness in devising procedures.</p> <p><input type="checkbox"/> (24) Effectiveness in laying out work and establishing standards of performance for subordinates.</p> <p><input type="checkbox"/> (25) Effectiveness in directing, reviewing, and checking the work of subordinates.</p> <p><input type="checkbox"/> (26) Effectiveness in instructing, training, and developing subordinates in the work.</p> <p><input type="checkbox"/> (27) Effectiveness in promoting high working morale.</p> <p><input type="checkbox"/> (28) Effectiveness in determining space, personnel, and equipment needs.</p> <p><input type="checkbox"/> (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.</p> <p><input type="checkbox"/> (30) Ability to make decisions.</p> <p><input type="checkbox"/> (31) Effectiveness in delegating clearly defined authority to act.</p> |
|---|--|

STATE ANY OTHER ELEMENTS CONSIDERED

- (A) Sense of security
- (B) Skill in English usage
- (C)

STANDARD Deviations must be explained on reverse side of this form	Adjective Rating	Adjective Rating
Plus marks on all underlined elements, and check marks or better on all other elements rated.	Excellent	Rating official <u>EX</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>EX</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 Byron C. Davis Chief, Ev. I, PDZ/SEA 11 October 1949  
(Signature of rating official) (Title) (Date)

Reviewed by George Chief, PDZ 21 Oct 49  
(Signature of reviewing official) (Title) (Date)

Rating approved by efficiency rating committee 22 Oct 49 Report to employee 27 Oct 49  
(Date) (Date) (Adjective rating)

STATUS AND EFFICIENCY REPORT

(SEE INSTRUCTIONS ON REVERSE SIDE)

*Ann G. [unclear]*

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME (PRINTED) LAST FIRST MIDDLE CAP RATING SALARY DATE OF ASSIGNMENT

RIGGS Robert B. 9 \$4,149.60 17 April 47

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)

No change since last efficiency report

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.

None

4. PROFICIENCY IN POSITION LAST

POSITION LAST	READING			SPEAKING			UNDERSTANDING		
	EXC	GOOD	FAIR	EXC	GOOD	FAIR	EXC	GOOD	FAIR
No Change									

5. PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS (IF IN US-30 STATE)

TYPE OF DUTY LOCATION

No preference

(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER? None

MARITAL STATUS  YES  NO NUMBER OF DEPENDENTS  YES  NO EMERGENCY ADDRESSEE  YES  NO LEGAL ADDRESS  YES  NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO, IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

1 June 1948  
DATE

*Robert B. Riggs*  
SIGNATURE OF EMPLOYEE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT OCCASION FOR REPORT

DATE FROM DATE TO ANNUAL  REASSIGNMENT OF REPORTING OFFICER  PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON  COVERING INITIAL 30 DAYS OF EMPLOYMENT

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES?  YES  NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES?  YES  NO IF SO, WHAT DUTY OR DUTIES *Processing CB reports, duties other than field operations*

DO YOU CONCUR IN EMPLOYEE'S 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/OR WHAT POSITION? *Next Grade*

9. 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.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE							
B. INTEREST AND ENTHUSIASM IN WORK							
C. SECURITY CONSCIOUSNESS							
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS							
E. ATTENTION TO DUTY							
F. JUDGMENT AND COMMON SENSE							
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE							
H. DISCRETION							
I. INITIATIVE							
J. ABILITY TO HANDLE AND DIRECT PEOPLE							
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)							
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION							
M. TACT							
N. SAGACITY (NON-GULLIBILITY)							
O. LEADERSHIP							
P. PHYSICAL STAMINA							
Q. MENTAL STAMINA							

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.

(IF ADDITIONAL SPACE IS NEEDED, ATTACH EXTRA SHEETS)

Feb 18 '49  
DATE

*Ann G. [unclear]*  
SIGNATURE OF REPORTING OFFICER



SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED, IF POSSIBLE.

1. NAME (PRINTED) LAST FIRST MIDDLE CAS. RATING SALARY DATE OF ASSIGNMENT TO PRESENT DUTY

RIGGS ROBERT B. 7 6397.20 17 April 1947

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)

Administrative Assistant to Chief of Mission.

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.

NONE

6. PROFICIENCY IN FOREIGN LANG.	READING			SPEAKING			UNDERSTANDING		
	EXC.	GOOD	FAIR	EXC.	GOOD	FAIR	EXC.	GOOD	FAIR
French		X			X			X	

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-SO STATE)

TYPE OF DUTY LOCATION

Indeterminable.

(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?

MARITAL STATUS  YES  NO NUMBER OF DEPENDENTS  YES  NO EMERGENCY ADDRESSEE  YES  NO LEGAL ADDRESS  YES  NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

7 July 1947

DATE

*Robert B. Riggs*  
 Signature of Employee

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT DATE FROM DATE TO OCCASION FOR REPORT

ANNUAL  REASSIGNMENT OF REPORTING OFFICER  PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON  COVERING INITIAL 90 DAYS OF EMPLOYMENT

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES?  YES  NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES?  YES  NO IF SO, WHAT DUTY OR DUTIES

DO YOU CONCUR IN EMPLOYEE'S 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?

9. 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.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE					X		
B. INTEREST AND ENTHUSIASM IN WORK						X	
C. SECURITY CONSCIOUSNESS						X	
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS						X	
E. ATTENTION TO DUTY							X
F. JUDGMENT AND COMMON SENSE						X	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						X	
H. DISCRETION						X	
I. INITIATIVE					X		
J. ABILITY TO HANDLE AND DIRECT PEOPLE					X		
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)						X	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION					Not observed		
M. TACT				X			
N. SAGACITY (NON-GULLIBILITY)					X		
O. LEADERSHIP				X			
P. PHYSICAL STAMINA					X		
Q. MENTAL STAMINA						X	

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

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET)

DATE

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

*Dorothy ...*  
 Signature of Reporting Officer

*W. George ...*  
 Signature of Reviewing Officer

CONFIDENTIAL

TRAINING EVALUATION

1. The official to whom this report is entrusted is personally responsible for it. Although he may, within his discretion, show it to other members of his staff, the report should never be shown to the student whom it concerns.
2. In order to arrive at an unprejudiced and independent evaluation, this report was prepared without any knowledge of Appraisal results.
3. This report summarizes the important facts and the relevant observations which have been discovered about the student by the various instructors during the student's course of training. The more complete data on the student are available in the files of the Training Branch, and may be examined by contacting the Chief of the Staff Training Division.

STUDENT'S NAME Ann L. Goodpasture

BRANCH FBZ, Div. 1

TRAINING PERIOD CSO Class II  
6 Jan to 7 Feb 1947

DATE OF REPORT 13 February 1947

This student does qualify for the projected assignment as administrative assistant. Her understanding of the general aims and nature of intelligence work, of the mission of this organization and of foreign intelligence services is adequate for purposes of her assignment. She shows good judgment and common sense, is observant, methodical, and careful in the collection of her facts, and writes clear and concise reports. Her work in reporting was well above average. Under good supervision she may be capable of handling in addition to her assigned duties, also those of an editorial analyst.

FOR THE ACTING CHIEF, TRB:

*John Gerry*

JOHN GERRY  
Chief, Staff Training Division

Orig: Acting Chief, FBZ  
cc : Chief, Div. 1  
cc : Chief of Operations

ADDRESS  
MANAGER  
BRANCH REGIONAL OFFICE  
FOURTH U. S. CIVIL SERVICE REGION  
402 INDIANA AVENUE N.W.  
WASHINGTON 25, D. C.

UNITED STATES CIVIL SERVICE COMMISSION  
FOURTH UNITED STATES CIVIL SERVICE REGION  
BRANCH REGIONAL OFFICE, WASHINGTON 25, D. C.

IN YOUR REPLY REFER TO  
FILE **4801 IC 17**  
AND DATE OF THIS LETTER

June 6, 1948

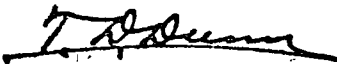
Chief, Civilian Personnel Branch  
Office of Strategic Services  
Washington 25, D. C.

Dear Sir:

As a result of investigation the person named below has  
been rated eligible on suitability.

<u>Name and Address</u>	<u>Position</u>
Miss Ann Lorena Goodpasture c/o Office of Strategic Services Washington 25, D. C.	Clerk Stenographer Regulation IX, section 2b O. S. S. - Outpost (New Delhi, India)

Very respectfully,

  
T. D. Dunn  
Associate Regional Director

cc: Miss Goodpasture

RECEIVED  
OFFICE OF  
CIVILIAN PERSONNEL

JUN 8 3 18 PM '48

RECEIVED



ADDRESS  
BRANCH REGIONAL OFFICE  
FOURTH U. S. CIVIL SERVICE REGION  
48 INDIANA AVENUE N.W.  
WASHINGTON 25, D. C.

UNITED STATES CIVIL SERVICE COMMISSION  
FOURTH UNITED STATES CIVIL SERVICE REGION  
BRANCH REGIONAL OFFICE, WASHINGTON 25, D. C.

IN YOUR REPLY REFER TO  
FILE 4BRO:IC:LN  
AND DATE OF THIS LETTER

June 6, 1948


Chief, Civilian Personnel Branch  
Office of Strategic Services  
Washington 25, D. C.

Dear Sir:

As a result of investigation the person named below has  
been rated eligible on suitability.

<u>Name and Address</u>	<u>Position</u>
Miss Ann Lorene Goodpasture c/o Office of Strategic Services Washington 25, D. C.	Clerk Stenographer Regulation IX, section 2b O. S. S. - Outpost (New Delhi, India)

Very respectfully,

  
T. D. Dunn  
Associate Regional Director

cc: Miss Goodpasture

# REPORT OF EFFICIENCY RATING

ADMINISTRATIVE-UNOFFICIAL ( )  
OFFICIAL ( )  
REGULAR ( ) SPECIAL ( X )  
PROBATIONAL or TRIAL PERIOD ( )

As of 31 March 1945 based on performance during period from 26 Jan 1945 to 31 March 1945

Ann I. Goodpasture Clerk-Steno CAP-5 \$2000.P.S.  
(Name of employee) (Title of position, service, and grade)  
Office of Strategic Services P. & A. New Delhi, India  
(Organization—Indicate bureau, division, section, unit, field station)

<p>ON LINES BELOW MARK EMPLOYEE</p> <p>✓ If adequate</p> <p>- If weak</p> <p>+ If outstanding</p>	<p>1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 2823A.</p> <p>2. Underline the elements which are especially important in the position.</p> <p>3. Rate only on elements pertinent to the position.</p> <p>a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions.</p> <p>b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i>.</p>	<p>CHECK ONE:</p> <p>Administrative, supervisory, or planning <input checked="" type="checkbox"/> <b>Code 24</b></p> <p>All others <input type="checkbox"/></p>
---	---	---

- |  |  |
|--|--|
| <p>✓ (1) Maintenance of equipment, tools, instruments.</p> <p>___ (2) Mechanical skill.</p> <p>✓ (3) Skill in the application of techniques and procedures.</p> <p>✓ (4) Presentability of work (appropriateness of arrangement and appearance of work).</p> <p>___ (5) Attention to broad phases of assignments.</p> <p>✓ (6) Attention to pertinent detail.</p> <p>✓ (7) Accuracy of operations.</p> <p>___ (8) Accuracy of final results.</p> <p>___ (9) Accuracy of judgments or decisions.</p> <p>___ (10) Effectiveness in presenting ideas or facts.</p> <p>✓ (11) Industry.</p> <p>✓ (12) Rate of progress on or completion of assignments.</p> <p>___ (13) Amount of acceptable work produced. (Is mark based on production records? (Yes or no))</p> <p>___ (14) Ability to organize his work.</p> <p>___ (15) Effectiveness in meeting and dealing with others.</p> <p>✓ (16) Cooperativeness.</p> <p>___ (17) Initiative.</p> <p>___ (18) Resourcefulness.</p> <p>✓ (19) Dependability.</p> <p>___ (20) Physical fitness for the work.</p> | <p>___ (21) Effectiveness in planning broad programs.</p> <p>___ (22) Effectiveness in adapting the work program to broader or related programs.</p> <p>___ (23) Effectiveness in devising procedures.</p> <p>___ (24) Effectiveness in laying out work and establishing standards of performance for subordinates.</p> <p>___ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.</p> <p>___ (26) Effectiveness in instructing, training, and developing subordinates in the work.</p> <p>___ (27) Effectiveness in promoting high working morale.</p> <p>___ (28) Effectiveness in determining space, personnel, and equipment needs.</p> <p>___ (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.</p> <p>___ (30) Ability to make decisions.</p> <p>___ (31) Effectiveness in delegating clearly defined authority to act.</p> |
|--|--|

STATE ANY OTHER ELEMENTS CONSIDERED

(A) \_\_\_\_\_

(B) \_\_\_\_\_

(C) \_\_\_\_\_

<p>+5   +4</p>	<p>STANDARD</p> <p>Deviations must be explained on reverse side of this form</p>	<p>Adjective rating</p>
<p>Plus marks on all underlined elements, and no minus marks. <u>E</u></p> <p>Plus marks on at least half of the underlined elements, and no minus marks. _____</p> <p>Check marks or letter on a majority of underlined elements, and any minus marks overcompensated by plus marks. _____</p> <p>Check marks or better on a majority of underlined elements, and minus marks not overcompensated by plus marks. _____</p> <p>Minus marks on at least half of the underlined elements. _____</p>	<p>Adjective rating</p> <p>Excellent</p> <p>Very good</p> <p>Good</p> <p>Fair</p> <p>Unsatisfactory</p>	<p>Rating official <u>E</u></p> <p>Reviewing official <u>E</u></p>

Rated by Joseph R. Coolidge Chief R & A Sec. Det 303 24 April 1945  
(Signature of rating official) (Title) (Date)

Reviewed by E. W. Ryan Major AC 24 April 1945  
(Signature of reviewing official) (Date)

Rating approved by efficiency rating committee 6/1/45 Report to employee Excellent  
(Date) (Adjective rating)

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		
Goodpasture	Ann	Lorene	November 28, 1918	446	14	9768
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)			
051305						

**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)

*Ann L. Goodpasture*

DATE

12 February 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

OFFICE OF PERSONNEL

MAR 15 10 49 AM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

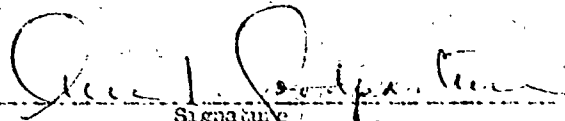
SECRET

STANDARD FORM No. 176-T  
JANUARY 1968  
(For use only until April 14, 1968)  
176-101

CONFIDENTIAL  
(When Filled In)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 7 October 1968, and the information brochure for PCS returns, dated May 1964.

  
Signature

41 Nov 1968  
Date

W. L. ROBERTSON

CONFIDENTIAL  
(When Filled In)

**CONFIDENTIAL**

*(When Filled In)*

INSTRUCTIONS: COMPLETE IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCE AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM SHALL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

NAME OF EMPLOYEE (Last) (First) (Middle)			
GOODPASTURE ANN L			
1. RESIDENCE DATA			
PLACE OF RESIDENCE WHEN APPOINTED		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)	
CELINA TOWN		DALLAS	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE			
SAME			
2. MARITAL STATUS			
CHECK (X) ONE: <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED			
IF MARRIED, INDICATE PLACE OF MARRIAGE			DATE OF MARRIAGE
NA			
IF DIVORCED, PLACE OF DIVORCE DECREE			DATE OF DECREE
NA			
IF WIDOWED, INDICATE PLACE SPOUSE DIED			DATE SPOUSE DIED
NA			
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)			
NA			
3. MEMBERS OF FAMILY			
NAME OF SPOUSE		ADDRESS (No., Street, City, Zone, State)	TELEPHONE NUMBER
NA			
NAMES OF CHILDREN		ADDRESS	SEX AGE
NA			
NAME OF FATHER (Or male guardian)		ADDRESS	TELEPHONE NUMBER
C.H. Goodpasture		PO Box 822, TIPTON, OKLA	NORTH 7-4124
NAME OF MOTHER (Or female guardian)		ADDRESS	TELEPHONE NUMBER
ANN M. Goodpasture			
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES?			
NONE			
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Miss) (Last-First-Middle)			RELATIONSHIP
C.H. Goodpasture			FATHER
HOME ADDRESS (No., Street, City, Zone, State)			HOME TELEPHONE NUMBER
P.O. Box 822 TIPTON OKLA			NORTH 7-4124
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE			BUSINESS TELEPHONE & EXTENSION
IS THE INDIVIDUAL NAMED ABOVE BITTING OF YOUR AGENCY AFFILIATION?			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF?			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE?			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.			
5. VOLUNTARY ENTRIES			
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS			
Riggs NATIONAL BANK, 17th G, WASH D.C.			

CONTINUED ON REVERSE SIDE

**CURRENT RESIDENCE AND DEPENDENCY REPORT**

CONFIDENTIAL  
(When Filled In)

5. (CONTINUED)

IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?

John L. Goodpasture

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. IF "YES", WHERE IS DOCUMENT LOCATED?

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?

Regions Bank

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

NONE

SIGNED AT

DATE

15 Nov 89

SIGNATURE

John L. Goodpasture

CONFIDENTIAL

SECRET

19 February 1959

MEMORANDUM TO:

GOODPASTURE, ANN L.  
[redacted]

SUBJECT:

Commendation for Extra Work in Connection With  
Visit of General Cassidy

1. Please accept my personal thanks for the spirit in which you engaged in long and tedious hours of work in connection with the preparation of the charts for General Cassidy's visit.

2. Because of the voluntary nature of this contribution on your parts, and the inability on my own part to adequately demonstrate the appreciation of our mutual employer in a more practical manner, I am asking Headquarters to place a copy of this letter in your personnel files.

Winston M. Scott

Distribution

Orig - GOODPASTURE  
GUYARD

cc - Station personnel file GOODPASTURE  
cc - Station personnel file [redacted]  
cc - Hqs personnel file GOODPASTURE  
→ cc - Hqs personnel file [redacted]

SECRET

SECRET

CP Copy

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY.	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7 BELOW:			
NAME OF EMPLOYEE (Type)	DATE (from item 1-2)	NAME OF SUPERVISOR (Type)	DATE (from item 1-2)
GODPASTURE, Ann L.	3 Oct 58	Winston M. Scott	3 Oct 58
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7 BELOW:			DATE
		WH/Pers	23 Oct 58
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
28 November 1918	GS-12	Intelligence Officer	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE	7A. EXPECTED DATE OF DEPARTURE FROM FIELD	
KUTIBB	Mexico City	5 May 1959	
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR		7B. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS	
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>CE Officer working on anti-Soviet sensitive operations.  Flaps and Seals and photographic processing.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
<p>CE Officer  Any job for which my past experience and training qualifies me.</p>			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
<p>Three months intensive language training.</p>			



SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)

C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choices) IN THE BOXES BELOW:

RETURN TO MY CURRENT STATION

BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:

1ST. CHOICE \_\_\_\_\_ 2ND. CHOICE \_\_\_\_\_ 3RD. CHOICE \_\_\_\_\_

BE ASSIGNED TO ANOTHER FIELD STATION. WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:

1ST. CHOICE WH Div (post to be selected by BSS) 2ND. CHOICE \_\_\_\_\_ 3RD. CHOICE \_\_\_\_\_

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? INDICATE NUMBER OF WORK DAYS 30

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:

None

12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION.

13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

It is requested that this officer be returned to Mexico City for another two (2) year tour. This officer is one of the most able CE officers COS has known and his transfer from this Station would leave a vacancy very, very hard to fill with an equally capable person. Attempts to arrange other than \_\_\_\_\_ will be made for this next tour.

14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE PERSONNEL OFFICER AT HEADQUARTERS

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

\_\_\_\_\_ recommend additional tour Mexico City

16. NAME OF PERSONNEL OFFICER  
Robert N. DAHLGREN  
DATE 21 October 1958

SIGNATURE  
Robert N. Dahlgren

FOR USE OF CAREER SERVICE

17. EMPLOYEE  HAS  HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT

18. REFERENCE DISPATCH NO. \_\_\_\_\_ CABLE NO. \_\_\_\_\_

19. TYPED OR PRINTED NAME \_\_\_\_\_ 20. SIGNATURE \_\_\_\_\_

21. TITLE \_\_\_\_\_ 22. DATE \_\_\_\_\_

23. COMMENTS I would like to return to Mexico City. I like the people at this Station and the work; however, I am \_\_\_\_\_ which, in my case, I don't feel can be securely stretched over another two-year tour. Since there is no prospect of other cover, I would like to be assigned to another WH Station. In view of my grade and type of experience, I feel that WH Div personnel officer can best determine the location where I could be most useful if such a vacancy exists in WH. My 2nd choice is \_\_\_\_\_ because I have previously worked with the present Chief of Station there.

OFFICE OF PERSONNEL  
OCT 27 10 10 AM '58  
MAIL ROOM

SECRET

SECRET



CENTRAL INTELLIGENCE AGENCY

WASHINGTON 25-D. C.

OFFICE OF THE DIRECTOR

3 APR 1956

MEMORANDUM FOR: Ann L. Goodpasture

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

A handwritten signature in black ink, appearing to read "Harrison G. Reynolds".

Harrison G. Reynolds  
Chairman, CIA Selection Board

Noted:

A handwritten signature in black ink, appearing to read "Ann L. Goodpasture".

Date: 9 April 1956

Career Service Staff  
Office of Personnel

15 MAY 1956

SECRET

SECRET

12 July 54

SECTION I		(To be completed by)		NO		
NAME (Last)	(First)	(Middle)	AGE	GRADE	NO. OF MOS. IN GRADE	CAREER DESIGNATION
GOODPASTURE	Ann	Lo	35	GS-11	1	CID-FI
STAFF OR DIVISION	BRANCH		POSITION TITLE			
			Intel. Officer			
NO. OF MOS. IN PRESENT POSITION	NO. OF MOS. IN OSS		NO. OF MOS. IN CIG		NO. OF MOS. IN CIA	
	20		22		84	
DATA ON ALL PERMANENT DUTY OVERSEAS OR IN U.S. FIELD (Include any TDY during last two years)						
APPROXIMATE DATES OF SERVICE		LOCATION			COMMENTS	
FROM	TO	COUNTRY	STATION	TDY	PCS	
Oct 44	March 46	India Coylon	New Delhi Kandy		X	
		China	Kunming Shanghai		X	
Apr 46	Feb 47	U.S.	Hqtrs		X	
Feb 47	Feb 49				X	
Mar 49	May 51	U.S.	Hqtrs		X	
June 51	Oct 53	Mexico	Monterrey		X	Apr-May 54 TDY Guatemala
Nov 53	Jul 54	U.S.	Lincoln	X		Guatemala City.
INDICATE WILLINGNESS TO SERVE TOUR OF DUTY OVERSEAS PCS						
A <input checked="" type="checkbox"/> YES		B <input type="checkbox"/> ONLY UNDER CERTAIN CONDITIONS			C <input type="checkbox"/> NO	
INDICATE ASSIGNMENT PREFERENCE IF PRECEDING ANSWER IS "A" OR "B"						
PREFERENCE	COUNTRY	STATION	TYPE OF POSITION			
1ST	Germany	No preference	Intel. Off.			
2ND	Any European Country					
3RD	Any Country					
IF ANSWER ABOVE IS "B" STATE CONDITIONS; IF ANSWER ABOVE IS "C" EXPLAIN YOUR REASONS						
INDICATE GEOGRAPHIC AREAS OVERSEAS IN WHICH YOU WILL NOT SERVE AND EXPLAIN REASONS						
None						
INDICATE RELATIONSHIP AND AGE OF EACH DEPENDENT TO BE MOVED OVERSEAS						
None at present time.						
INDICATE KNOWN MEDICAL RESTRICTIONS WHICH THE AGENCY HAS IMPOSED ON YOUR SERVICE						
Hearing impairment which in the past has not prevented overseas duty.						

SECRET

INDICATE ANY UNUSUAL CIRCUMSTANCES CONCERNING DEPENDENTS (old age, chronic illness, need for special educational facilities, etc.) OR ANY UNUSUAL PERSONAL SITUATION WHICH WOULD AFFECT YOUR OVERSEAS ASSIGNMENT

None at present time.

DESCRIBE TYPES OF HEADQUARTERS AND U.S. FIELD POSITIONS FOR WHICH YOU WOULD LIKE TO BE CONSIDERED AND THE ORGANIZATIONAL COMPONENT IN WHICH YOU WOULD LIKE TO SERVE

Intelligence Officer or case officer. I am willing (but not eager) to do administrative work.

REMARKS

DATE

12 July 1954

SIGNATURE OF EMPLOYEE

SECTION II

(To be completed by employee's supervisor)

INDICATE APPROXIMATE TIME (months) WHEN EMPLOYEE CAN BE MADE AVAILABLE FOR OVERSEAS SERVICE

INDICATE APPROXIMATE TIME (months) WHEN EMPLOYEE CAN BE MADE AVAILABLE FOR ANOTHER HEADQUARTERS OR U.S. FIELD ASSIGNMENT

COMMENTS ON AVAILABILITY AND EMPLOYEE'S PREFERENCE FOR NEXT ASSIGNMENT

DATE

SIG.

HC

SUPERVISOR

PRESTON, Administrative Official

PERSONNEL OFFICER WILL FORWARD ORIGINAL TO OFFICE OF PERSONNEL

\*1ST COPY TO APPROPRIATE CAREER SERVICE BOARD

SECRET

\*MAY BE CONTINUED UNDER REMARKS

**SECRET SECURITY INFORMATION**

*FD 250*

PLEASE PRINT INSTRUCTION SHEET BEFORE PREPARING THIS FORM

STATEMENT OF FEDERAL CIVILIAN AND MILITARY SERVICE		OFFICE			DIVISION								
		BRANCH			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.			
Organization		28	Feb	1944	31	12	51	4	10	7			
Executive Office of the President-OEM-War Relocation	Wash., D.C. <i>OK</i>	2	Dec	1943	27	Feb	1944	2	2	1			
Executive Office of the President-OEM-Price Adm.	<i>OK</i>	11	Mar	1942	18	Sept	1943	3	3	1			
								Total Civilian Service			5	7	10
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.				
								Total Military Service					
III. CERTIFICATION													
I hereby certify that the above Civilian and Military service is complete and accurate to the best of my knowledge.													
<i>25 March 1957</i> DATE						 SIGNATURE OF EMPLOYEE							
IV. REMARKS: (CONCERNING ABOVE SERVICE)						V. FOR PERSONNEL OFFICE USE ONLY							
<i>as of 3/10/57 51</i>						TOTAL CREDITABLE SERVICE							
						DAYS		MONTHS		YEARS			
						529		26		10			
MAY BE CONTINUED ON NON-DETACHABLE REVERSE SIDE													

*50D-06/02/41  
 specified 1/25/57  
 [Signature]*

**SECRET SECURITY INFORMATION**

**CENTRAL INTELLIGENCE AGENCY**

**2430 E STREET NW.  
WASHINGTON 25, D. C.**

Date 28 May 1951

Dear Miss Ann Goodpasture

1. This is to notify you that the United States Government, as represented by the Central Intelligence Agency, has accepted your employment effective

Position: Intelligence Officer

Base Salary: \$4600.00

2. You will be:

a. Entitled to annual and sick leave in accordance with Civil Service Commission rules and regulations, or such other provisions of law or regulations as may be established in lieu thereof.

b. Reimbursed for travel expenses in accordance with CIA Regulations or Standardized Government Travel Regulations, as amended.

c. If stationed outside continental United States, granted such monetary allowances as are prescribed by CIA Regulations.

3. As a condition of your employment by the Central Intelligence Agency, you are subject to assignment to tours of duty at posts outside the continental United States. Each time you are so assigned, unless otherwise specified in advance by CIA, you will be required to remain at the post to which assigned for a period of 24 months from the date of arrival thereat, unless sooner transferred, reassigned or separated for reasons beyond your control. If you wish to return to the United States for personal reasons during that period, all travel and transportation costs incident to such return will be borne by you, with no expense to the Government.

4. If this employment is for assignment to an overseas post, it is understood and agreed that, unless earlier separated for reasons beyond your control, you will remain in Government service for 12 months after your arrival at your first overseas post, and if you violate this agreement, any money expended by the United States on account of your travel and the transportation of your immediate family and household goods will be considered a debt due to the United States.

5. Employment is conditioned upon satisfactory completion of the training courses prescribed by CIA and satisfactory performance of duty for a total period of six months from date of employment. In the event

either training or performance of duty is deemed unsatisfactory by CIA, you will be offered other types of employment if available, or your employment will be terminated.

6. Your appointment is for such time as your services may be required and funds are available for the work of CIA. Notice of termination will be given you by procedure similar to that provided by Civil Service rules and regulations.

*Ronald V. Neaseley*

Official authorized to sign letters of appointment.

I accept the above agreement as a condition of my employment by CIA.

*Alan L. Gardner*

Employee

*1 June 1951*

Date

### APPOINTMENT AFFIDAVITS

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

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

(Bureau or division)

WASHINGTON, D. C.

(Place of employment)

I, ANN L. GOODPASTURE, 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\_\_\_\_, 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.)

Ann L. Goodpasture  
(Signature of appointee)

Subscribed and sworn before me this 21st day of March, A. D. 19 49,  
at Washington D. C.  
(City) (State)

Chapter 111, Title II, Sec. 24  
Act of July 26, 1949

Elizabeth Morrison  
(Signature of officer)  
Appointment Clerk  
(T.E.S.)

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)  
 5725 COGN AVE N.W. APT. 19 WASH. D.C.

2. (A) DATE OF BIRTH: Nov 28, 1918 (B) PLACE OF BIRTH (city or town and State or country)  
 CELINA, TENNESSEE, U.S.A.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY: C. F. SCOT PASTOR (B) RELATIONSHIP: FATHER (C) STREET AND NUMBER, CITY AND STATE: 752 E. MAIN ST. Tipton, Okla. (D) TELEPHONE NO.: 125

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PRECEDING 24 MONTHS?  YES  NO  
 If no, 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	RELATIONSHIP	MARRIED (Check one)	SINGLE (Check one)

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS	
			ITEM NO.	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?	X			
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in Item 10.</i>		X		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in Item 10 reason 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 rating, if retired from military or naval service.</i>		X		
8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.</i>		X		
9. SINCE YOUR 17TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)? <i>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.</i>		X		

### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that the appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, 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 other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) *Age.*—If definite age limits have been established for the position, it should be determined that applicant 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 51 constitutes an affidavit 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 probational or permanent appointment in the competitive service, no other member of such family is eligible for probational 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.

AFIDAVIT

STRIKING AGAINST THE FEDERAL GOVERNMENT

WAR DEPARTMENT

OFFICE OF ASSISTANT SECRETARY/SSU

(Dept. or Estab.)

(Bureau or Office)

WASHINGTON, D. C.

(Place of Employment)

I, Ann L. Goodpasture, do hereby swear (or affirm) that 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.

Ann L. Goodpasture  
 (Signature of Employee or Appointee)

Subscribed and sworn to before me this 19th day of July, 1946 at Washington, State of D.C.

M. K. Haller

Act of June 26, 1943, Section 206

M. K. HALLER  
 Admin. Asst  
 SSU, War Dept.

**OATH OF OFFICE, AFFIDAVIT,  
AND  
DECLARATION OF APPOINTEE**  
Research & Analysis  
Far East

Office of Strategic Services..... Military Supplies..... Washington, D. C.....  
(Department or Establishment) (Bureau or Division) (Place of Employment)

**A.  
OATH OF  
OFFICE**

I, Ann L. Goodpasture  
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; 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. ...., dated ..... 19....., 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:

Ann L. Goodpasture  
(Signature of Appointee)

Subscribed and sworn before me this 29th day of February A. D., 19 44.

at Washington, D. C.  
(City) (State)

[SEAL]

Sylvia D. Carlson  
(Signature of Officer)

Notary Public  
(Title)

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

My commission expires: 12/21/46

16-3264-1

February 29, 1944  
(Date of Entrance on Duty)

Clerk-Steno, G&F-4-\$1800 per annum  
(Position to which appointed)

11-28-1918  
(Date of Birth)

### DECLARATION OF APPOINTEE

This form, if required, is to be completed before entrance on duty. Every question must be answered. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. False personation is a criminal offense and will be prosecuted accordingly.

1. Present Address 242 Delaware Ave S.W. Washington D.C.  
(Street and Number) (City and State)

2. Who should be notified in case of emergency? C. J. Goodpicture Father  
Wagon, Oklahoma  
(Name) (Relationship) (Street and Number) (City and State)

3. Does the U. S. Government employ in a civilian capacity any relative of yours (father by blood or marriage) with whom you live or have lived within the past 6 months? Yes or No? NO. If so, for each such relative fill in the blanks below. If additional space is necessary, complete under item 12.

Name	Post-office address (Give street number, if any)	(1) Position and (2) Temporary or not and (3) Department or office in which employed	Relation	Married or single	Age
		1. ....			
		2. ....			
		3. ....			
		1. ....			
		2. ....			
		3. ....			
		1. ....			
		2. ....			
		3. ....			

4. Place of birth Belina, Tennessee, Clay County  
(Town) (State or County)

Indicate "Yes" or "No" answer by placing <b>X</b> in proper column	Yes	No	12. Space for detailed answers to other questions.																						
5. Are you a citizen of the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Item No.</th> <th style="width: 90%;">Write in left column numbers of items to which detailed answers apply</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Item No.	Write in left column numbers of items to which detailed answers apply																				
Item No.	Write in left column numbers of items to which detailed answers apply																								
6. If foreign born, have you furnished proof of naturalization or citizenship to (1) the U. S. Civil Service Commission? (2) this agency in connection with this appointment?	<input type="checkbox"/>	<input type="checkbox"/>																							
7. Since you filed application resulting in this appointment, has there been any change in the status of your citizenship, or of the persons through whom you gained your citizenship?	<input type="checkbox"/>	<input checked="" type="checkbox"/>																							
8. (a) Do you hold any position or office under the United States or any State, Territory, County, or Municipality? If so, state the place, position, and salary under item 12. (b) Are you willing to resign such position or office if it becomes necessary to do so in order to hold the Federal position?	<input type="checkbox"/>	<input checked="" type="checkbox"/>																							
9. Do you receive any pension or other benefit for military or naval service or an annuity from the U. S. or D. C. Government under any Retirement Act? If so, give details under item 12, stating whether you were retired for age, length of service, or disability; amount of retirement pay and under what retirement act and rank, if retired from military or naval service.	<input type="checkbox"/>	<input checked="" type="checkbox"/>																							
10. Since you filed application resulting in this appointment, have you been discharged for misconduct or unsatisfactory service, or forced to resign from any position? If so, give under item 12 where employed, name and address of employer and the reason for discharge in each case.	<input type="checkbox"/>	<input checked="" type="checkbox"/>																							
11. Since you filed application resulting in this appointment, have you been arrested, or summoned into any civil or military court as a defendant, or indicted for or convicted of any offense (felony or misdemeanor)? If so, for each case give under item 12 (1) the date, (2) the name and location of the court, (3) the nature of the offense or violation, and (4) the penalty, if any, imposed, or other disposition.	<input type="checkbox"/>	<input checked="" type="checkbox"/>																							

### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that the appointment would be in conformance with the Civil Service Act, applicable civil-service rules, the War Service Regulations, and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, purchase of office, suitability in connection with any record of recent discharge or arrest, promise to observe provisions regarding political activity, and particularly for the following:

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

(2) Age.—If discrepancy exists between the date of birth and that on application, and if definite age limits have been established for the position, it should be determined that applicant is not outside the range for appointment.

(3) Citizenship.—The responsibility for provisions of appropriation, acts prohibiting or restricting the employment, and lies with the appointing

officer. The Civil Service Commission indicates on applications showing foreign birth that citizenship has been verified. The appointing officer should verify citizenship if the list of eligibles or the letter of authority from the Commission indicates the appointment subject to proof of citizenship or if the application shows foreign birth but does not indicate on its face that citizenship has been proved. If the answer to question 4 of this form shows foreign birth and the application shows birth in the United States, the case should be referred to the Civil Service Commission.

(4) Members of Family.—Section 9 of the Civil Service Act provides that whenever there are otherwise two or more members of the family in the classified service, no other member of such family is eligible for appointment in that service. Minor do not establish a distinct family merely by being an unmarried daughter from that of the parents. Doubtful cases involving more than two members of family, including all pertinent evidence, should be referred to the Civil Service Commission or its duly acting representatives for decision. Under War Service Regulations, the member provision does not apply to temporary appointments for one year or less.

Cler.

FORM 2879A  
AUGUST 1967

UNITED STATES CIVIL SERVICE COMMISSION  
WASHINGTON 25, D.C.

RECEIVED  
2 04 PM  
CIVILIAN PERSONNEL  
OFFICE OF PERSONNEL  
STRATEGIC SERVICES  
1311 Army D-9834  
February 21, 1944

- REAPPOINTMENT FROM
- TRANSFER FROM

War Relocation Authority  
(Office For Emergency Management)  
Washington, D.C.

NAME Ann L. Goodpasture  
 D. O. B. 11/28/18  
 POSIT. \$204.00 per Mo.  
 LOCAT. Placement & Trng. Unit, Pers. Mag. Sec.  
 Washington, D.C.

- REAPPOINTMENT TO
- TRANSFER TO

Office of Strategic Services  
Washington, D.C.

POSIT. Clerk-Stenographer  
 GR & SAL. CAF-4, \$1800 p.a.  
 LOCAT. Research & Analysis Far East  
 Manpower and Military Supply  
 Washington, D.C.

UNDER AUTHORITY DERIVING FROM WAR MANPOWER COMMISSION DIRECTIVE NO. 10 AND EXECUTIVE ORDERS 9243 AND 9063 THE ABOVE TRANSFER OR REAPPOINTMENT IS

AUTHORIZED  
 UNDER WAR SERVICE REGULATION 1K, SECTION 2b, EFFECTIVE ON OR AFTER THE DATE OF THIS NOTICE, AS AGREED UPON BY THE TWO AGENCIES CONCERNED, BUT IN NO CASE LATER THAN 10 DAYS FROM THE DATE OF THIS NOTICE, EXCEPT AT THE OPTION OF THE RECEIVING AGENCY, OR UNLESS OTHERWISE ORDERED BY THE CIVIL SERVICE COMMISSION.  
 SUBJECT TO THE FOLLOWING CONDITIONS (IF ANY): Investigation

DISAPPROVED  
 (A) THE PERSON PROPOSED IS NOT ELIGIBLE  
 (B) SUCH TRANSFER IS CONTRARY TO DIRECTIVES OF THE WAR MANPOWER COMMISSION

CANCELED ON ADVICE FROM REQUESTING AGENCY.

Appointment of the applicant proposed by you is authorized. Your attention is called, however, to the nature of his reply or absence of a reply to question 16 on C.S. Form 57 concerning physical condition.

ENCLOSURE (IF APPROVED UNDER SECTION 41)  
STATEMENT OF REEMPLOYMENT BENEFITS  
TO BE FURNISHED TO EMPLOYEE

WAR TRANSFER UNIT  
U. S. CIVIL SERVICE COMMISSION

**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.

PWB

**SECTION I BIOGRAPHIC AND POSITION DATA**

EMP. SER. NO. 057303	NAME (Last-First-Middle) GOODPASTURE, Ann L.	DATE OF BIRTH 11/28/18	SD D	GRADE 13
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**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/ QTR. 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.				

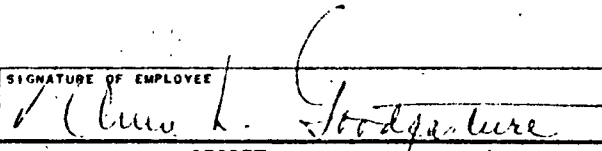
**SECTION III MARITAL STATUS**

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				

**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	SOB ASSIGNMENT
		JUN 14 - 9 22 AM '71					
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"/> 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		RESIDENT 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					
							

**SECRET**

SECRET

LLC

OFFICIAL USE ONLY (until filled 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. 057303	2. NAME (Last First Middle) Goodpasture, Ann L.	3. SEX F	4. DATE OF BIRTH 11/29/18	5. SCHEDULE, GRADE/STEP 13
6. SD D	7. POSITION TITLE Ops Officer	8. OFFICE OF ASSIGNMENT DDP/WH/1	9. LOCATION (Country, City) Headquarters	

**SECTION II** AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
OSS WWII Overseas not included			
<input type="checkbox"/>	PCS	4/47	12/48
Mexico	PCS	?/51	11/53
Guatemala	TDY	4/54	5/54
Mexico	PCS	5/57	10/68
<input type="checkbox"/>	TDY	3/67	4/67

**OVERSEAS DATA**  
**CODED**  
**DATE:** 08 JUL 1969 **INITIALS:** *AK*

**SECTION III** EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR

SECRET

GROUP 1 Excluded from automatic downgrading and declassification



APPLICATION FOR EMPLOYMENT		THIS SPACE FOR OFFICE USE ONLY	
IN THE		PREVIOUSLY CARDED <input type="checkbox"/> ACKNOWLEDGED <input type="checkbox"/>	
INSTRUCTIONS—Answers to all questions must be typed or printed. All questions must be answered fully. If sufficient space has not been provided for your answer to any question, complete your answer under item #37.		INDEXED <input type="checkbox"/> INVESTIGATED <input type="checkbox"/> ACTION CODE <input type="checkbox"/> OTHER <input type="checkbox"/>	
DATE OF APPLICATION		POSITION APPLIED FOR	
THIS SPACE FOR OFFICE USE ONLY		1. NAME (Last) (First) (Middle) (Maiden, if any) <b>GOODPASTURE, Ann Lorena</b>	
		2. HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES", GIVE FULL DETAILS UNDER ITEM #37.	
3a. PERMANENT ADDRESS (Place from which transportation will be provided, if appointed. Street number and name)		8. STATE OF WHICH YOU ARE A LEGAL RESIDENT	
<b>3101 P Street, N.W.</b>		<b>Oklahoma</b>	
3b. CITY, POSTAL ZONE, STATE <b>Washington, 7, D.C.</b>		PRESENT BUSINESS PHONE <b>Executive 6115</b>	
5. PRESENT ADDRESS IF DIFFERENT FROM ABOVE <b>Same as above</b>		PRESENT HOME PHONE <b>Dupont 4854</b>	
6. DATE OF BIRTH (mo. day, year) <b>28 November 1918</b>		7. PLACE OF BIRTH (City, state, or country) <b>Colina, Tennessee</b>	
8a. IF BORN OUTSIDE U.S. HOW WAS CITIZENSHIP ACQUIRED? <b>Not applicable</b>		8b. IF A NATURALIZED CITIZEN, PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE <b>Not applicable</b>	
9. SEX <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE	10. HEIGHT <b>5</b> FT. <b>3</b> IN.	11. WEIGHT <b>115</b> LBS.	12. MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED
13. WHAT IS THE LOWEST BASE SALARY, EXCLUSIVE OF ALLOWANCES YOU WILL ACCEPT? \$ _____ PER ANNUM			
14. WHAT RESTRICTIONS ARE THERE IF ANY ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD? <b>None</b>			
15. FULL NAME OF HUSBAND/WIFE (if wife, maiden name) <b>Not applicable</b>		d. DATE OF BIRTH <b>Not applicable</b>	c. PLACE OF BIRTH (City, state, or country) <b>Not applicable</b>
d. IF BORN OUTSIDE U.S. HOW WAS CITIZENSHIP ACQUIRED? <b>Not applicable</b>		e. IF NATURALIZED, PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE. <b>Not applicable</b>	
16. DEPENDENTS			
NAME		RELATIONSHIP	DATE OF BIRTH
<b>None</b>		<b>Not applicable</b>	<b>Not applicable</b>
17. WHICH DEPENDENTS WOULD YOU WISH TO ACCOMPANY YOU ABROAD? <b>None</b>			
18a. FATHER'S NAME <b>C.H. Goodpasture</b>		b. PLACE OF BIRTH <b>Colina, Tennessee</b>	c. OCCUPATION <b>Retired</b>
d. PRESENT ADDRESS <b>Post Box 822, Tipton, Oklahoma</b>		e. IF BORN OUTSIDE U.S. DID FATHER EVER OBTAIN U.S. CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
19a. MOTHER'S MAIDEN NAME <b>Anna W. Goodpasture</b>		b. PLACE OF BIRTH <b>Rickman, Tennessee</b>	c. OCCUPATION IF ANY <b>None</b>
d. PRESENT ADDRESS <b>Post Box 822, Tipton, Oklahoma</b>		e. IF BORN OUTSIDE U.S. DID MOTHER EVER OBTAIN U.S. CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
20a. CAN YOU TAKE DICTATION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	d. ARE YOU A STENOGRAPHER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	c. CAN YOU TYPE BY TOUCH SYSTEM? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	j. NAME OTHER OFFICE <b>Adding Machine</b>
<b>100</b> W.P.M.	<b>100</b> W.P.M.	<b>65</b> W.P.M.	

21. MILITARY STATUS							
3. IF YOU HAVE BEEN IN THE ARMED FORCES OR IN THE MERCHANT MARINE IN WHAT SERVICE AND BRANCH DID YOU SERVE? (e.g., U.S. Army; Field Artillery) <b>Not applicable</b>			D. SERVICE OR SERIAL NUMBER <b>Not applicable</b>				
C. DATE OF ENTRY ON ACTIVE DUTY <b>Not applicable</b>		D. RATE OR RANK AT TIME OF ENTRY <b>Not applicable</b>	E. DATE OF HONORABLE DISCHARGE OR SEPARATION <b>Not applicable</b>				
7. RATE OR RANK AT TIME OF DISCHARGE OR SEPARATION <b>Not applicable</b>		9. PRESENT RATE OR RANK IF ON ACTIVE DUTY <b>Not applicable</b>					
22a. WHAT PERTINENT FEDERAL CIVIL SERVICE EXAMINATIONS HAVE YOU TAKEN? (Give year, title, and grade received) <b>None</b>							
D. DO YOU HAVE A PERMANENT CIVIL SERVICE STATUS IN THE FEDERAL GOVERNMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			E. IF NOW EMPLOYED IN THE FEDERAL GOVERNMENT GIVE PRESENT GRADE AND DATE OF LAST CHANGE IN GRADE <b>GS-9 Feb 4, 1951</b>				
23. HAVE YOU EVER APPLIED FOR A POSITION UNDER _____ OR TAKEN AN EXAMINATION FOR A POSITION UNDER _____ <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF ANSWER IS "YES" GIVE PARTICULARS UNDER ITEM #37.							
24. HAVE YOU EVER HELD A POSITION UNDER A FOREIGN GOVERNMENT? (Including service in the Armed Services of a Foreign power) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES" GIVE DETAILS UNDER ITEM #37.							
25. OUTLINE YOUR TRAVEL OR RESIDENCE ABROAD GIVING DATES, PURPOSE, AND PLACES. (If not while in the Armed Forces give number, date, and place of issuance of American passport.) <b>War Dept. India, Ceylon, China 1944-1946 SP dated 1944, Washington, D.C.</b> <b>Washington, D.C.</b>							
26. FOREIGN LANGUAGES (Name and indicate the extent of your competence, i.e., Excellent, Good, Fair)							
a. LANGUAGE	b. READ	c. WRITE	d. SPEAK	e. UNDERSTAND			
<b>French</b>	<b>fair</b>	<b>fair</b>	<b>fair</b>	<b>fair</b>			
27. EDUCATION							
a. GRADE SCHOOL — CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8							
	NAME AND ADDRESS	DATES ATTENDED		YEARS COMPLETED	DEGREES CONFERRED	MAJOR SUBJECTS	SEMESTER HOURS CREDIT
b. HIGH SCHOOLS OR PREPARATORY SCHOOLS	<b>Senior High School Tipton, Oklahoma</b>	<b>1932</b>	<b>1936</b>	<b>4</b>	<b>H.S. Diploma</b>	<b>General Arts and Sciences</b>	
c. COLLEGES OR UNIVERSITIES	<b>University of Oklahoma Norman, Oklahoma</b>	<b>1937</b>	<b>1941</b>	<b>4</b>	<b>B.S.</b>	<b>Education, Arts and Sciences</b>	<b>127</b>
d. OTHER EDUCATIONAL INSTITUTIONS OR TRAINING SCHOOLS	<b>Hills' University Oklahoma City, Oklahoma</b>	<b>Sept. 1941</b>	<b>Feb. 1942</b>	<b>½</b>	<b>None</b>	<b>Bus. Admin. Stenotypy</b>	
28. EMPLOYMENT							
INSTRUCTIONS. (In the spaces provided below describe every position which you have held since you first began to work. Start with present position and work back to the first position which you held. Account for all periods of unemployment and state reasons of any unemployment indicated). Use continuation sheet if more space is required.							
PRESENT POSITION							
DATES OF EMPLOYMENT (Month, year) FROM: <b>Mar. 1949</b> TO: <b>March 1951</b>				EXACT TITLE OF YOUR PRESENT POSITION <b>Admin. Assistant</b>		SALARY OR EARNINGS STARTING \$ <b>3978</b> PER YR. PRESENT \$ <b>4600</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) <b>Washington, D.C.</b>				DESCRIPTION OF YOUR WORK <b>General administrative, personnel, and procurement duties. Preparation of reports in accordance with administrative procedures.</b>			
NAME AND ADDRESS OF EMPLOYER <b>CIA</b>							
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>None</b>							
NAME AND TITLE OF YOUR IMMEDIATE SUPERVISOR <b>W.B. Smith</b>				IF CURRENTLY EMPLOYED, DO YOU APPROACH PRESENT EMPLOYER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
REASON FOR DESIRING TO CHANGE EMPLOYMENT							

DATES OF EMPLOYMENT (Month, year) FROM: <b>Mar 1947</b> TO: <b>March 1949</b>		EXACT TITLE OF YOUR POSITION <b>Admin. Assistant</b>		SALARY OR EARNINGS STARTING: <b>2880</b> PER YR. FINAL: <b>4100</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) _____		DESCRIPTION OF YOUR WORK <b>General administrative duties, including preparation of correspondence, administrative reports; handled certain Seaman and Shipping duties; assisted in preparation of pouches and other duties as assigned.</b>			
NAME AND ADDRESS OF EMPLOYER _____		NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>None</b>			
NAME AND TITLE OF IMMEDIATE SUPERVISOR _____		REASON FOR LEAVING <b>Return to U.S.</b>			
DATES OF EMPLOYMENT (Month, year) FROM: <b>Feb 1944</b> TO: <b>March 1947</b>		EXACT TITLE OF YOUR POSITION <b>Admin. Assistant</b>		SALARY OR EARNINGS STARTING: <b>1800</b> PER YR. FINAL: <b>2644</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) <b>Washington, DC, India, Ceylon, China</b>		DESCRIPTION OF YOUR WORK <b>Chief Clerk handling personnel actions, files, information reports, administrative correspondence; preparation of pouches; dictation and stenographic duties.</b>			
NAME AND ADDRESS OF EMPLOYER <b>War Department, Washington, D.C.</b>		NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>1-3</b>			
NAME AND TITLE OF IMMEDIATE SUPERVISOR _____, <b>Section Chief</b>		REASON FOR LEAVING <b>To take above position</b>			
DATES OF EMPLOYMENT (Month, year) FROM: <b>Mar 1942</b> TO: <b>October 1943</b>		EXACT TITLE OF YOUR POSITION <b>Senior Stenographer and Jr. Employee Services Officer</b>		SALARY OR EARNINGS STARTING: <b>1740</b> PER YR. FINAL: <b>2000</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) <b>Washington, DC</b>		DESCRIPTION OF YOUR WORK <b>Employee counselling, aided in case work involving clerical personnel placement problems; stenographic duties, including dictation and transcription of conferences; Maintained accounts for Credit Union, and employee contributions for welfare campaigns.</b>			
NAME AND ADDRESS OF EMPLOYER <b>Executive Office of the President, Office of Emergency Management, Central Personnel and Price Administration</b>		NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>1-3</b>			
NAME AND TITLE OF IMMEDIATE SUPERVISOR _____, <b>Personnel Officer</b>		REASON FOR LEAVING <b>Left DC (temporary illness of parent)</b>			
29. OTHER POSITIONS HELD FOR LESS THAN THREE MONTHS AND PERIODS OF UNEMPLOYMENT. (List—beginning with most recent)					
DURATION		POSITION		NAME AND ADDRESS OF EMPLOYER OR REASON FOR UNEMPLOYMENT	
FROM	TO				
<b>Dec 1943</b>	<b>Jan 1944</b>	<b>Personnel and Placement Clerk</b>		<b>OW/War Relocation Authority Washington, DC</b>	
<b>Sept 1941</b>	<b>Jan 1942</b>	<b>Photographic Technician (part time while in school)</b>		<b>Elko Photographic Finishing Co. Oklahoma City, Oklahoma</b>	
				<b>12.50 per wk</b>	<b>approx 20.00 per wk</b>
30. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES" GIVE FULL DETAILS UNDER ITEM #37.					
31a. HAVE YOU NOW OR HAVE YOU EVER HAD ANY PHYSICAL DEFECTS OR DISABILITIES WHATSOEVER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			31b. HAVE YOU EVER BEEN UNDER TREATMENT FOR A MENTAL OR EMOTIONAL DISORDER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
32. WITHIN THE PAST TWELVE MONTHS, HAVE YOU FREQUENTLY USED INTOXICATING BEVERAGES TO EXCESS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			33. HAVE YOU EVER HAD TUBERCULOSIS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
34. WERE YOU EVER MEDICALLY DISCHARGED FROM THE ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			IF ANY OF YOUR ANSWERS TO ANY OF THE ABOVE IS "YES" GIVE FULL PARTICULARS UNDER ITEM #37. <b>Not applicable</b>		

32. DOES YOUR FINANCIAL POSITION PERMIT DISCHARGE OF ALL DEBTS AND OBLIGATIONS?  YES  NO. IF ANSWER IS "NO" STATE UNDER ITEM #37 THE NAMES OF CREDITORS, AMOUNTS DUE TO EACH, AND DATES ON WHICH THE OBLIGATIONS WERE CONTRACTED.

D. IF NOW RESIDING ABROAD HAVE YOU EVER PAID A U.S. INCOME TAX?  YES  NO. IF ANSWER IS "YES" GIVE YEAR AND PERCENT OF LAST PAYMENT. **Not residing in U.S.**

33. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY POLITICAL PARTY OR ORGANIZATION THAT ADVOCATES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES BY FORCE OR VIOLENCE?  YES  NO. IF ANSWER IS "YES" GIVE FULL DETAILS UNDER ITEM #37.

34. HAVE YOU EVER BEEN ARRESTED OR DETAINED BY CIVIL OR MILITARY AUTHORITIES IN THE UNITED STATES OR IN ANY OTHER COUNTRY (other than for minor traffic violations where the fine did not exceed \$25)?  YES  NO

IF SO, STATE UNDER ITEM #37 THE NAME AND LOCATION OF THE COURT, DATES AND DETAILS OF PROCEEDINGS, AND DISPOSITION.

35. LIST THREE COMPETENT AND RESPONSIBLE PERSONS IN THE UNITED STATES NOT RELATED TO YOU BY BLOOD OR MARRIAGE WHO ARE PARTICULARLY QUALIFIED TO SUPPLY DEFINITE INFORMATION REGARDING YOUR CHARACTER AND ABILITY (do not give names of supervisors listed in answer to questions no. 28 or 29).

NAME	ADDRESS	OCCUPATION
		U.S. Govt.
Dr. I. R. Howard		Surgeon
Hubert H. Humphrey		U.S. Senator

36. MENTION HERE ANY SPECIAL QUALIFICATIONS OR ACHIEVEMENTS NOT COVERED ELSEWHERE IN THIS APPLICATION. INCLUDE SUCH ITEMS AS ANY BOOKS OR ARTICLES YOU HAVE WRITTEN, SPECIAL RESEARCH WORK, TECHNICAL SKILLS, MONOGRAPH OR PROFESSIONAL SOCIETY MEMBERSHIPS, AND ANY OTHER INFORMATION YOU CONSIDER PERTINENT. YOU MAY INCLUDE ANY PERTINENT RELIGIOUS, CIVIC, WELFARE, OR ORGANIZATIONAL ACTIVITY WHICH YOU HAVE PERFORMED EITHER WITH OR WITHOUT COMPENSATION, SHOWING THE NUMBER OF HOURS PER WEEK AND NUMBER OF WEEKS PER YEAR IN WHICH YOU WERE ENGAGED IN SUCH ACTIVITY.

37. USE THIS SPACE FOR COMPLETING ANSWERS TO ANY OF THE FOREGOING QUESTIONS, NUMBERING ANSWERS TO CORRESPOND WITH QUESTIONS. USE EXTRA SHEETS OF PAPER IF NECESSARY.

23. In October 1945 transferred by Executive order to Department of State, IRIS/Kunming, China; however, transfer cancelled in December 1945 and remained with War Department, Shanghai.

28. Under present position am included in the provisions of the U.S. Retirement Act.

#### CERTIFICATION

False Statement on this Application is Cause for Dismissal.

I DO SOLEMNLY AFFIRM THAT THE INFORMATION CONTAINED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE

NAME AS USUALLY WRITTEN AND WHERE IT WILL BE USED AS OFFICIAL SIGNATURE

### APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: This application form is to be filled out by you, the applicant, and submitted to the Civil Service Commission, or to the examining officer, for consideration for employment. It is to be filled out in ink. If you are applying for a position in the Civil Service, you must also fill out the application form required for the position named in the announcement. Be sure to mail to the office address for the position named in the announcement. Note the dates with which you file this application or any change of your address.

1. Name of examination or kind of position applied for: \_\_\_\_\_

2. Official purpose if mentioned in examination announcement: \_\_\_\_\_

3. Place of employment applied for: \_\_\_\_\_

4. Sex:  Male  Female

5. Street and number or R. F. number: **1514-17th St., N.W.**  
City or post office (including postal zone), and State: **Washington, D.C.**

6. Capital of State, Territory, or District: \_\_\_\_\_ Office phone No.: **DE 0300** Home phone: \_\_\_\_\_

7. Place of birth (city and State, if born outside U.S., name city and country): **Galva, Tennessee**

8. Date of birth (month, day, year): **28 November 1918**

9. Age last birthday: **30**

10.  Male  Female

11.  Married  Single

12. Height without shoes: **5 feet 2 1/2 in.** Weight: **104 pounds**

13. 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 in grade: **temp CAF-9 Dec 14, 1947**

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

Applied  Material  Special request  
 Not applied  Submitted  Returned

App. Review

Approved

OPTION	GRADE	EARNED RATING	PROMISES	AUGM. RATING
			<input type="checkbox"/> 5 points (max.)	
			<input type="checkbox"/> 10 points	
			<input type="checkbox"/> Write or Waiver	
			<input type="checkbox"/> Death	
			<input type="checkbox"/> Being re-evaluated	

INITIALS AND DATE

Indicate "Yes" or "No" answers by marking X in proper column

	YES	NO
15. (a) Would you accept short-term appointment if offered for—		
1 to 3 months?	<input checked="" type="checkbox"/>	
3 to 6 months?		
6 to 12 months?		
(b) Would you accept appointment if offered—		
in Washington, D. C.?	<input checked="" type="checkbox"/>	
anywhere in the United States?	<input checked="" type="checkbox"/>	
outside the United States?	<input checked="" type="checkbox"/>	

16. (c) If you will accept appointment in certain locations ONLY, give acceptable income: \_\_\_\_\_

(a) What is the lowest entrance salary you will accept? \$ \_\_\_\_\_ per year.  
You will not be considered for positions paying less.

(b) If you are willing to travel, specify:  Occasionally  Frequently  Annually

16. EXPERIENCE - You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to determine your qualifications for the position for which you are applying. If the spaces provided below describe EVERY position you have held, use a separate sheet for EACH position. You may also include any pertinent religious, civic, business or organizational activity which you have performed, either with or without compensation, including the number of hours per week and weeks per year in which you were engaged in such activity. Start with your PRESENT position and work back, mentioning the full periods of unemployment. Indicate clearly the principal tasks which you performed in each position. Describe your performance in the Armed Services in case of Military Experience.

(a) If you were ever employed in any position under a name different from that shown in Item 4 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

**PRESENT POSITION**

Date of employment (Month, year): From: <b>November 1946</b> To present time	Exact title of your present position: <b>Administrative Assistant</b>	Salary or earnings: Starting \$ _____ per _____ Present \$ _____ per _____
Place of employment (city and State): <b>Combay, India</b>	Description of your work: <b>General administrative and routine consular duties.</b>	
Name and address of employer (firm, organization, or person): If Federal, name Department, Bureau or establishment, and division: <b>American Consulate General</b>		
Kind of business or organization (e.g., all include all insurance agency, title of body, etc.): <b>U.S. Foreign Service</b>		
Number and kind of employees supervised of you: <b>none</b>		
Name and title of immediate supervisor: <b>Lennox C. Fogg, Vice Consul</b>		
Reason for desiring to change employment: <b>Return to U.S.</b>		

Dates of employment (month, year) From <b>June 46</b> To <b>Nov 46</b> Place of employment (city and State) <b>Washington, D.C.</b> Name and address of employer (firm, organization, or person) If Federal name department, bureau or establishment, and division <b>SSU-CIG Registry</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.) <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor <b>Mrs. C. Gilbert, Chief, Registry</b> Reason for leaving: <b>transfer</b>	Exact title of your position <b>Reference Clerk</b> Salary or earnings: Starting \$ _____ per _____ Final \$ <b>2770</b> per <b>yr</b>
Dates of employment (month, year) From <b>October 45</b> To <b>May 46</b> Place of employment (city and State) <b>Shanghai, China</b> Name and address of employer (firm, organization, or person) If Federal name department, bureau or establishment, and division <b>IRIS-SSU</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.) <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor <b>C. H. Wilbur, Chief, IRIS and Col. R. J. Delaney</b> Reason for leaving: <b>Transfer</b>	Exact title of your position <b>Reference Clerk</b> Salary or earnings: Starting \$ _____ per _____ Final \$ <b>2560</b> per <b>yr</b>
Dates of employment (month, year) From <b>February 44</b> To <b>September 45</b> Place of employment (city and State) <b>Washington, D.C.</b> <b>New Delhi, India, Ceylon &amp; Kunming, China</b> Name and address of employer (firm, organization, or person) If Federal name department, bureau or establishment, and division <b>OSS-S&amp;A-CBI</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.) <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor <b>Geo. Greene, Cora DuBois &amp; Col. Joseph Spencer</b> Reason for leaving: <b>Chiefs of R&amp;A</b> <b>Transfer</b>	Exact title of your position <b>Clerk and Stenographer</b> Salary or earnings: Starting \$ _____ per _____ Final \$ <b>2560</b> per <b>yr</b>
Dates of employment (month, year) From <b>11 Mar 42</b> To <b>February 44</b> Place of employment (city and State) <b>Washington, D.C.</b> Name and address of employer (firm, organization, or person) If Federal name department, bureau or establishment, and division <b>CEM-Price Admin. &amp; WRA Personnel</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.) <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor <b>R.C. Prosky, Chief, Employee Services Section</b> Reason for leaving: <b>Transfer</b>	Exact title of your position <b>Jr. Employee Services Officer</b> Salary or earnings: Starting \$ _____ per _____ Final \$ <b>2000</b> per _____ Description of your work <b>&amp; Personnel Clerk 1620</b> General employee services functions for Personnel Division, CEM-Price Admin. General personnel clerk for WRA (OEM)

If more space is required, use a continuation sheet (Standard Form No. 50) or a sheet of paper the same size as in a prior item. Write on each sheet your name, address, date of birth, and classification title. Attach to inside of this application. Prior employment during college not applicable.

QUALIFICATIONS & EXPERIENCE

12 Nov. 1946

**NAME:** Ann Lorene GOODPASTURE

**PERSONAL:** Date of Birth - 20 November 1918  
Place of Birth - Celina, Tennessee  
Legal Residence - Oklahoma

**PARENTAGE:** Father: C. H. Goodpasture, Born 12 February 1894  
Citizenship - U.S. by Birth  
Mother: Anna W. Goodpasture, Born 21 February 1891  
Citizenship - U.S. by Birth

**EDUCATION:** 1928-30 Grammar School - Tennessee & Oklahoma  
1930-32 Ward Jr. High School, Tipton, Oklahoma  
1932-36 Tipton Sr. High School, Tipton, Oklahoma  
1937-41 University of Oklahoma, Norman, Oklahoma BS 1941  
9/41 - 2/42 Hill's University, Oklahoma City. Special courses  
no degree conferred

**EXPERIENCE:** 1937-41 - University of Oklahoma. Secretarial & clerical duties -  
part-time while attending school \$20-30 month  
9/1941-2/1942 - Elko Photographic Finishing Co., Oklahoma City.  
Secretary and Photographic technician - part-time while  
in school. \$60-35. month  
3/1942-1/1944 - Office for Emergency Management, Central Personnel  
and Price Administration. Steno & Jr. Employee Services  
Officer. \$1440-2000. yr  
2/1944-Present - Office of Strategic Services, Far East Division,  
RAA Branch. Secretary to Chief, East Asia Economics  
Section to Nov. 44, Washington, DC. \$1800. yr

New Delhi, India; Kandy, Ceylon; Kunning, China  
Secretary & Chief Clerk to Chief, OSS/RAA, IB and China  
Theaters to Oct. 1945 \$2000-2300 yr

Kunning, China; Shanghai, China  
Secretary & Chief Clerk to Chief, IRIS/CI, Dept. of State  
to December 1945. \$2320. yr

Shanghai, China; Washington, DC  
RD, OASW; SSU. Reference Clerk, Order of Battle Section,  
SI, Shanghai and Registry, SI, Washington. \$2320-2770. yr.

**LANGUAGES:** French, Speak, Write, Read fair

**TRAVEL:** Nov. 1944-Sept. 1945, India & Ceylon (2 months temporary duty in  
Ceylon - Jun, July 1945).  
Sept. 1945 - March 1946, China

17. **PRIMARY EXPERIENCE** - List in order of time the first ten (10) most important assignments of your primary experience. If you have more than ten, list the ten most important. If you have not had ten assignments, list all. In the service, write in item (a) "No other than service schools" and indicate in item (c) all assignments in duty assignment, giving date of such assignment.

(a) First Special Service School attended: Location: Dates attended (month, year): From: _____ To: _____ Rating received at end of this training:	(b) What were you taught in first special service school?
(c) Duty assignment after this training (give all important changes in duty assignment whether or not you attended a Service School): Dates of duty assignment (month, year): From: _____ To: _____	(d) What did you do during this duty assignment?
(e) Second Special Service School attended: Location: Dates attended (month, year): From: _____ To: _____ Rating received at end of this training:	(f) What were you taught in second special service school?
(g) Duty assignment after this training: Dates of duty assignment (month, year): From: _____ To: _____	(h) What did you do during this duty assignment?

List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.

18. **EDUCATION** - Circle highest grade completed. 1 2 3 4 5 6 7 8 9 10 11 12

Mark (a) the appropriate box to indicate satisfactory completion of:

Elementary School  Junior High School  Senior High School

(a) Name and Location of College or University: **University of Oklahoma, Norman, Oklahoma**

(b) Dates attended and location of last high school attended: **Tipton, Okla. Tipton High School**

(c) List your studies in high school which apply to postsecondary:

**No specialized curriculum**

Name and Location of College or University	Dates Attended	Years Completed		Degrees Conferred		Semester Hours Credit
		From	To	Title	Date	
University of Oklahoma, Norman, Oklahoma	1937	1941	x 4	B.S.	1941	127
Hills University, Okla. City	9/41	2/42		-	-	

(a) List Your Chief Undergraduate College Subjects	Semester Hours	(b) List Your Chief Graduate College Subjects	Semester Hours
English	16-20	Bus. Ad. & Stenotypy	
Commercial Arts	50		
Education	24		

(a) Other training, such as vocational, business, study courses given through the Armed Forces Institute (give name and location of school, or in-service training in a Federal agency):

**none**

Subjects Studied	Dates Attended		Years Completed	
	From	To	Day	Night

19. Indicate your knowledge of foreign languages:

Language	READING		SPEAKING		UNDERSTANDING	
	Ext. Good	Fair	Ext. Good	Fair	Ext. Good	Fair
French		X		X		X

21. Are you or has anyone ever been a licentiate or certificate holder of any trade or profession (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)?

Yes  No Give kind of license and State: **Teacher**

First license or certificate (year): **Life certificate obtained 1941**

(a) How was your knowledge of foreign languages acquired?

**Formal instruction**

(b) If you have traveled or resided in any foreign countries, indicate (1) names of countries (2) dates and length of time spent there and (3) reason or purpose (e.g., business, education, recreation):

**See experience. Oct 48 - 6 Dec 48 travelled to US via Europe stopping all countries enroute - purpose: visit.**

20. List any special skills you possess and machines and equipment you can use, such as operation of short-wave radio, multi-line computer, key punch, turret lathe, scientific or professional devices:

Approximate number of words per minute in typing: **2** shorthand: **2**



23. REFERENCES - List three persons living in the United States or Territories of the United States who are NOT relatives of you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed on Form 104 (Page 2 of 2).

FULL NAME	BUSINESS OR HOME ADDRESS (Give complete address, including street and number)	BUSINESS OR OCCUPATION
1. H.B. Smith	2450 E. Street, N.W. D.C.	UC GOVT
2. Edward Saunders	Same	US GOVT
3. Mrs. D. Johnson	Same	US GOVT

24. May inquiry be made of your present employer regarding your character, qualifications, etc.?  Yes  No

Indicate "Yes" or "No" answer by placing X in proper column	YES	NO	Indicate "Yes" or "No" answer by placing X in proper column	YES	NO
25. Are you a citizen of the United States?	X		35. Have you any physical defect or disability whatsoever? If your answer is "Yes" give complete details in Item 36.		X
26. Do you advocate or have you ever advocated or do 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 38.		X	36. (a) Were you ever in the United States Military or Naval Service during time of War?		X
27. Within the past 12 months, have you habitually used intoxicating beverages to excess?		X	(b) Is the word "honorable" or the word "satisfactory" used in your discharge or separation papers to show the type of your discharge or separation?		
28. Since your 16th birthday, have you ever been convicted, or fined, or imprisoned, or placed in probation, or have you ever been ordered to deposit bail, for the violation of any law, police regulation or ordinance (including minor traffic violations for which a fine of \$25 or less was imposed)? If your answer is "Yes" list all such cases under Item 39 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 appointed your case may be taken.		X	(c) Was service performed on an active full-time basis with full military pay and allowances?		
29. 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 30 the name and address of employer, date, and reason in each case.		X	(d) Date of entry or entries into service. Date of separation or separations.		
30. Do you receive an annuity from the U. S. or D. C. Government under any retirement act or any pension or other compensation for military or naval service? If your answer is "Yes" give in Item 30 reason 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 rating if retired from military or naval service.		X	Branch of service (Army, Navy, M. C., C. G., etc.) Serial No. (If none, give grade or rating at time of separation)		
31. Are you an official or employee of any State, Territory, county or municipality? If your answer is "Yes" give details in Item 30.		X	IF YOUR ANSWERS TO THIS QUESTION (No. 36) INDICATE THAT YOU ARE ENTITLED TO VETERAN PREFERENCE, SUCH PREFERENCE WILL BE CREDITED IN THE EXAMINATION. IF APPOINTED YOU WILL BE REQUIRED TO FURNISH TO THE APPOINTING OFFICE PRIOR TO ENTRY ON DUTY, OFFICIAL EVIDENCE OF SEPARATION FROM YOUR LAST PERIOD OF ACTIVE SERVICE IN THE ARMED FORCES OF THE UNITED STATES DURING TIME OF WAR. DO NOT SUBMIT PROOF OF DISCHARGE OR SEPARATION WITH THIS APPLICATION.		
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 31 or EA-11 such relative (1) full name, (2) present address, (3) relationship, (4) department or agency by whom employed, and (5) kind of appointment.		X	Indicate "Yes" or "No" answer by placing X in proper column		
33. Have you ever had a nervous breakdown? If your answer is "Yes" give complete details in Item 34.		X	37. (a) If you served in the U. S. Military or Naval Service during peacetime ONLY, did you participate in a campaign or expedition and receive a campaign badge or service ribbon?		
34. Have you ever had tuberculosis? If your answer is "Yes" give complete details in Item 34.		X	(b) Are you a disabled veteran?		
35. Give the serial numbers to other questions (inicate item numbers to which answers apply).			(c) Are you the unmarried widow of a veteran?		
ITEM No.			(d) Are you the wife of a veteran who has service-connected disability?		
			IF YOUR ANSWERS TO QUESTION 37 (a), (b), (c) OR (d) IS "YES" AND YOU WISH TO CLAIM VETERAN PREFERENCE, ATTACH TO THIS APPLICATION VETERAN PREFERENCE CLAIM (VA) SERVICE CONNECTION FORM 14, TOGETHER WITH THE NECESSARY PROOF SPECIFIED THEREIN.		
			<b>THIS SPACE FOR USE OF APPOINTING OFFICE ONLY</b>		
			The information contained in the answers to Question 26 above has been verified by comparison with the discharge certificate on _____ 19____.		
			Agency	Title	

If more space is required use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this page.

**FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW (U. S. CODE TITLE 18 SECTION 901)**

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: \_\_\_\_\_ Signature of applicant: \_\_\_\_\_  
(Sign your name in INK (use given name only) (Do not use initials, nicknames, or aliases.) If female, prefix Miss or Mrs. and if married use your own given name.)

9-57208-2

# APPLICATION FOR FEDERAL EMPLOYMENT

**INSTRUCTIONS**—Answer every question fairly and completely. Typewrite or print in INK. If you are applying for a position, read the announcement carefully and know its directions. Mail this application to the office specified in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

**1. Name of examination, or kind of position applied for:**

**2. Optional subject (if mentioned in examination announcement):**

**3. Place of employment applied for:**

**4. Name (First name, Middle (Maiden, if any), Last)**  
**ANN LORENE GOODPASTURE**

**5. Street and number or R. D. number:**  
**1514 - 17th St., N. W., Apt. 111**  
 City or post office (including postal name), and State:  
**Washington, D. C.**

**6. Local or voting residence, State, Office phone No., Home phone**  
**OKLAHOMA Ext. 2215 DE 0300**

**7. Place of birth (city and State, if born outside U. S., name city and country)**  
**CELINA, TENNESSEE**

**8. Date of birth (month, day, year):** **28 NOV 1918**

**10. Age last birthday:** **27**

**11.  Male  Female**

**12.  Married  Single**

**13. Height without shoes:** **5 feet 2 inches** **Weight:** **115 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 in grade:  
**CAF-5, 1 March 1945**

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

Material Entered register:  
 Appor.  Submitted  
 Non-appe  Exempt

Notations: \_\_\_\_\_ App. Review: \_\_\_\_\_

Approved:

OPTION	GRADE	EARNED RATING	PREFER-ENCE	AVANG. RATING
			<input type="checkbox"/> 5 points (tent.)	
			<input type="checkbox"/> 10 points	
			<input type="checkbox"/> Wife or Widow	
			<input type="checkbox"/> Dead	
			<input type="checkbox"/> Being investigated	

INITIALS AND DATE

Indicate "Yes" or "No" answer by placing "X" in proper column	YES	NO
<b>18. (a) Would you accept short-term appointment if offered, for—</b>		
1 to 3 months?		
3 to 6 months?		
6 to 12 months?	<input checked="" type="checkbox"/>	
<b>(b) Would you accept appointment if offered—</b>		
in Washington, D. C.?	<input checked="" type="checkbox"/>	
anywhere in the United States?	<input checked="" type="checkbox"/>	
outside the United States?	<input checked="" type="checkbox"/>	

**18. (c) If you will accept appointment in certain locations ONLY, give acceptable locations.**

**(d) What is the lowest entrance salary you will accept: \$ \_\_\_\_\_ per year.**  
 You will not be considered for positions paying less.

**(e) If you are willing to travel, specify:**  
 Occasionally  Frequently  Continuity

**19. EXPERIENCE.**—You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to determine your qualifications for the position for which you are applying. In the spaces provided below describe EVERY position you have held. Use a separate block for EACH position. You may also include any part-time job, civic, welfare or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Start with your PRESENT position and work back, accounting for all periods of unemployment. Explain clearly the principal tasks which you performed in each position. Describe your experience in the Armed Services in question 17 (Military Experience).  
 (a) If you were ever employed in any position under a name different from that shown in Item 4 of this application, give under "Description of your work" for each position the name used.  
 (b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

**PRESENT POSITION**

Date of employment (Month, year) From: <b>May 1946</b> To present time	Exact title of your present position: <b>Reference Clerk</b>	Salary or earnings: Starting \$ _____ per _____ Present \$ <b>2770</b> per <b>ANNUUM</b>
Place of employment (city and State): <b>Washington, D. C.</b>	Description of your work: <b>Indexing and logging incoming classified reports on Far East. Processing obsolete and outdated field and Hqtrs document files.</b>	
Name and address of employer (firm, organization or person) If Federal, name department, bureau or establishment, and division: <b>WD, OSAN, SSU, Registry</b>		
Kind of business or organization (e. g., wholesale a. t. insurance agency, mfg. of locks, etc.): <b>U. S. Government</b>		
Number and kind of employees supervised by you: <b>1 - Reference clerk</b>		
Name and title of immediate supervisor: <b>Mrs. C. J. Gilbert, Actg. Chief.</b>		
Reason for desiring to change employment: <b>Liquidation of Agency</b>		

16 CONTINUED

Date of employment (Month, year) <b>From Dec 45</b> <b>April 46</b> Place of employment (city and State) <b>Shanghai, China</b> Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division: <b>War Dept. OASW. Hq. SSU/CT</b> Kind of business or organization (e. g., wholesale silk, insurance agency, city of locks, etc.) <b>U.S. Government</b> Number and kind of employees supervised by you:  Name and title of immediate supervisor: <b>Capt. Wayne Richardson, Chief</b> <b>Lt. Col. R.J. Delaney, CO</b> Reason for leaving: <b>Deactivation of SSU/CT</b>	Exact title of your position: <b>Secretary - Research Assistant</b> Salary or earnings: Starting \$ <b>2320</b> per Final \$ <b>2430</b> per annum Description of your work: <b>Secretarial duties, assisted in composing classified Order of Battle reports. Set-up biographical file of military personalities. Spotted troop movements on situation maps.</b>
Date of employment (Month, year) <b>From Sept 45</b> <b>Dec 45</b> Place of employment (city and State) <b>Kunming and Shanghai, China</b> Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division: <b>State Dept./IRIS/CT</b> Kind of business or organization (e. g., wholesale silk, insurance agency, city of locks, etc.) <b>U.S. Government</b> Number and kind of employees supervised by you: <b>1 - 3 EM clerks &amp; typists</b> Name and title of immediate supervisor: <b>Lt. Col. J.E. Spencer, Chief/R&amp;A</b> <b>Mr. C.M. Wilbur, Chief, IRIS/CT</b> Reason for leaving: <b>Deactivation of IRIS/CT. Transfer to SSU.</b>	Exact title of your position: <b>Secretary and Chief Clerk</b> Salary or earnings: Starting \$ <b>2320</b> per Final \$ <b>2320</b> per annum Description of your work: <b>Responsible for secretarial and general administrative duties for R&amp;A Branch - after 1 Oct 45; IRIS/State Dept. Separate Registry and document library. Allocation of typing and clerical duties to EM clerks &amp; typists. Reproduction of R&amp;A analytical reports and dissemination to State Dept. Washington and appropriate Consulates. Prepared periodic reports to State, Washington; Consulate-General, Shanghai; and SSU/CT. Requisitioning and accountability for expendable &amp; non-expendable property for IRIS.</b>
Date of employment (Month, year) <b>From Dec 44</b> <b>Sept. 45</b> Place of employment (city and State) <b>New Delhi, India &amp; Kandy, Ceylon</b> Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division: <b>OSS - R&amp;A Branch - IS Theater</b> Kind of business or organization (e. g., wholesale silk, insurance agency, city of locks, etc.) <b>U.S. Government</b> Number and kind of employees supervised by you: <b>1 - 3 clerks and typists</b> Name and title of immediate supervisor: <b>Capt. J. R. Coelidge, Chief, R&amp;A/ISB</b> Reason for leaving: <b>Transfer requested by China Theater.</b>	Exact title of your position: <b>Secretary and Chief Clerk</b> Salary or earnings: Starting \$ <b>2000</b> per Final \$ <b>2320</b> per annum Description of your work: <b>Duties same as above except R&amp;A was under jurisdiction of OSS rather than Dept. of State (2 months temporary duty in Ceylon, June - July, 1945; immediate supervisor: Mtes. Cara DuBeis)</b>
Date of employment (Month, year) <b>From Feb 44</b> <b>Dec 44</b> Place of employment (city and State) <b>Washington, D. C.</b> Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division: <b>OSS-R&amp;A - East Asia Economics Sect.</b> Kind of business or organization (e. g., wholesale silk, insurance agency, city of locks, etc.) <b>U. S. Government</b> Number and kind of employees supervised by you: <b>1 Clerk typist</b> Name and title of immediate supervisor: <b>G.H. Greene, Jr., Section Chief</b> Reason for leaving: <b>Transfer to Far East.</b>	Exact title of your position: <b>Secretary to Section Chief</b> Salary or earnings: Starting \$ <b>1800</b> per Final \$ <b>1800</b> per Description of your work: <b>Responsible for performance and allocation of all secretarial and clerical duties pertaining to work of East Asia Economics Section. Responsible for files, correspondence, periodic reports, etc.</b>

If more space is required, use a continuation sheet (Form No. 58) or a sheet of paper the same size as this sheet. Write on each sheet your name, address, date of birth, and occupation title. Attach to this sheet.

16-4722-1

CONTINUATION SHEET

For Question 16, "Application for Federal Employment," Standard Form No. 57

Fill in this form only when necessary for completion of Question 16, "Experience," on Standard Form No. 57. Enclose unattached, with your application. Typewrite or write legibly in INK.			1. Date of this continuation sheet	
2. Name (First name) (Middle) ( Maiden, if any) (Last)	3. Date of birth	4. Name of examination		
YIX ANN LOUISE GOODPASTURE	28 Nov. 1918			

Dates of employment: (Month, year) From: <b>March 1942</b> To: <b>Jan 1944</b>		Exact title of your position: <b>Jr. Employee Services Officer</b>		Salary or wage per annum Starting: \$ <b>1440</b> Final: \$ <b>2000</b>
Place of employment (city and State): <b>Washington, D. C.</b>		Description of your work: <b>Began as Clk-atoms in Central Personnel/CEM. Various stenographic and clerical duties. Transferred to Price Administration to assist in setting up Employee Services program under Employee Relations Division, Dec 43 - Jan 44 was Placement and Training Clerk for War Relocation Authority (Also originally under CEM).</b>		
Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <b>OFFICE FOR EMERGENCY MANAGEMENT</b>		Kind of business or organization (e. g., wholesale silk, insurance agency, etc.): <b>Government</b>		
Number and kind of employees supervised by you: <b>1 CAP-3</b>		Name and title of immediate supervisor: <b>PROBY, WEN CAP-311 Chief/Employee Services.</b>		
Reason for leaving: <b>Transfer</b>				
Dates of employment: (Month, year) From: <b>Sept 41</b> To: <b>Feb 42</b>		Exact title of your position: <b>Secretary &amp; Photographic Technician</b>		Salary or wage per mo. Starting: \$ <b>50</b> Final: \$ <b>85</b>
Place of employment (city and State): <b>Oklahoma City, Oklahoma</b>		Description of your work: <b>Part-time employment at company while attending school.</b>		
Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <b>ELKO PHOTOGRAPHIC FINISHING CO.</b>		Kind of business or organization (e. g., wholesale silk, insurance agency, etc.): <b>Commercial Photographic Finishing</b>		
Number and kind of employees supervised by you: <b>1 to 15 unskilled technicians</b>		Name and title of immediate supervisor: <b>Mr. Gee, Dempsey, Gen'l Mgr.</b>		
Reason for leaving: <b>Full time employment in D.C.</b>				
Dates of employment: (Month, year) From: <b>1937</b> To: <b>June 41</b>		Exact title of your position: <b>Secretary - clerk</b>		Salary or wage per mo. Starting: \$ <b>20</b> Final: \$ <b>30</b>
Place of employment (city and State): <b>Norman, Oklahoma</b>		Description of your work: <b>On University pay-roll while attending University. Part-time employment in offices of Faculty members, library and University Press.</b>		
Name and address of employer (firm, organization, or person). If Federal, name department, bureau or establishment, and division: <b>University of Oklahoma</b>		Kind of business or organization (e. g., wholesale silk, insurance agency, etc.): <b>University</b>		
Number and kind of employees supervised by you: <b>None</b>		Name and title of immediate supervisor: <b>Mrs. Peters, Dean, FA.</b>		
Reason for leaving: <b>End of school</b>				

**17. MILITARY EXPERIENCE** - In order to determine the placements of war veterans detailed information is required in the Armed Services File. In this service, write in Item (a) "No. of assignments" at service schools" and indicate in Item (c) all changes in duty assignment, showing dates of each assignment.

<p>(a) First Special Service School attended:</p> <p>Location: _____</p> <p>Dates attended (month, year): _____</p> <p>From: _____ To: _____</p> <p>Rating received at end of this training: _____</p>	<p>(b) What were you taught in First Special Service School? _____</p> <p>_____</p> <p>_____</p>
<p>(c) Duty assignment or rating after this training (give all important changes in duty assignment whether or not you attended a Service School): _____</p> <p>Dates of duty assignment (month, year): _____</p> <p>From: _____ To: _____</p>	<p>(d) What did you do during this duty assignment? _____</p> <p>_____</p> <p>_____</p>
<p>(e) Second Special Service School attended:</p> <p>Location: _____</p> <p>Dates attended (month, year): _____</p> <p>From: _____ To: _____</p> <p>Rating received at end of this training: _____</p>	<p>(f) What were you taught in Second Special Service School? _____</p> <p>_____</p> <p>_____</p>
<p>(g) Duty assignment after this training: _____</p> <p>Dates of duty assignment (month, year): _____</p> <p>From: _____ To: _____</p>	<p>(h) What did you do during this duty assignment? _____</p> <p>_____</p> <p>_____</p>

List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.

**18. EDUCATION** - Circle highest grade completed.

1 2 3 4 5 6 7 8 9 10 11 / 12

Mark (x) the appropriate box to indicate satisfactory completion of:

Elementary School  Junior High School  Senior High School

(a) Give name and location of last high school attended: **TIPTON SR. HIGH SCHOOL, Tipton, Oklahoma**

(b) Subjects studied in high school which apply to position desired: \_\_\_\_\_

(c) Name and Location of College or University	Major	Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit
		From—	To—	Day	Night	Title	Date	
University of Oklahoma, Norman	Arts & Science	1937	1941	4		B.S.	June 41	127
Hills University, Okla. City	Business	9/41	2/42	1/2				

(d) List Your Chief Undergraduate College Subjects	Semester Hours	(e) List Your Chief Graduate College Subjects	Semester Hours
Arts & Sciences (Commercial)	50	Business Administration	
English	20	Typing - Secretarial Science	
Education	24		
History	12		

(f) List your chief subjects given through the Armed Forces Institute (show name and location of school), or "in-service training" in a Federal agency:	Subjects Studied	Dates Attended		Years Completed	
		From—	To—	Day	Night

**19. Indicate your knowledge of foreign languages**

Language	READING			SPEAKING			UNDERSTANDING		
	Exp.	Good	Pos.	Exp.	Good	Pos.	Exp.	Good	Pos.
French			X			X			X

21. 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.)

Yes  No Give kind of license and State: **Teacher**

First license or certificate (year): **1941 (Life)**

Latest license or certificate (year): \_\_\_\_\_

(a) How was your knowledge of foreign languages acquired? **School**

(b) If you have traveled or resided in any foreign countries, indicate (1) names of countries, (2) date and length of time spent there and (3) reason or purpose (e. g., business, education, recreation):

**Given in Item 16 this application**

**20. List any special skills you possess and machines and equipment you can use, such as operation of short-wave radio, multith, computer, key-punch, turret loathe, scientific or professional devices:**

**Typewriter, duplicating machines, stenotype**

Approximate number of words per minute in type: **60**, shorthand **100**



Standard Form No. 57  
Revised April 9, 1942  
Issued July 1942  
U. S. CIVIL SERVICE COMMISSION  
S. C. Form No. 332

### APPLICATION FOR FEDERAL EMPLOYMENT

**INSTRUCTIONS**—Answer every question in full and completely. Type or write legibly in BLACK INK to assure clear photographic copies for appointing agencies. If you are applying for a specific United States Civil Service Examination, read the Examination Announcement carefully. Follow all directions, and mail this application to the office named therein. If not, mail with an explanation in letter to the U. S. CIVIL SERVICE COMMISSION, WASHINGTON, D. C., unless otherwise directed. Notify same office of any change of address.

APP. NO.

1. Name of examination, if any, or name of position applied for	AV	This space for U. S. Civil Service Commission	U. S. Civil Service Commission
2. Place of examination (if a written test), or place of employment applied for (City and State)			
3. Optional subject (if mentioned in examination announcement)			

4. Mr.  Mrs.  Miss  **Ann Lorene Goodpasture**  
(First name) (Middle name) (Last name) (Residence, if any) (Last)

5. **247 Delaware Ave., Apt. 308, S. W.**  
**Washington, D. C.**  
(City and State)

6. Date of birth (month, day, year) **11-28-1918** 7. Age last birthday **25** 8. Date of this application: **1-1944**

9. Legal or voting residence: State **Oklahoma**

10. Telephone numbers **RE 7500**  
**Ext. 71452**  
(Residence phone) (Business phone)

11. (a) Check one: (b) Check one:  Widowed  Single  Separated  Married  Divorced

12. Height, with shoes **5 ft 1 in.** Weight **110** lb

13. Where were you born? **Colina, Tennessee**

C. S.			
C.			
F. & E.			
P. & D.			
M.			

Preference:  Allowed  Adm'd exam.  
 Veteran  Approved by  
 Disability  Exam. date  
 Wife  Exam. date  
 Widow  Not Ex.  
 Disabled  Date Req.  
 Closed  Material att'd.  
 Material filed.  
 Indian  Material ref.

Indicate "Yes" or "No" answer by placing X in proper column	Yes	No	Indicate "Yes" or "No" answer by placing X in proper column	Yes	No
14. Are you a citizen of the United States? <small>Unless otherwise instructed, naturalized citizens must submit, along with this application, Naturalization Certificate (or other foreign-born documentary proof of citizenship. Documents will be returned.)</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. (a) Were you ever in the U. S. military or naval service? <small>If so, give branch of service and date of last discharge: Army, Navy, Marine, Coast Guard, Date</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Have you ever been arrested, or summoned into court as a defendant, or indicted, or convicted or fined or imprisoned, or placed on probation, or had any case against you been filed, or have you ever been ordered to deposit collateral for alleged breach or violation of any law or rule or regulation or ordinance which ever? If so, list all cases, without any exception whatsoever, under Item 45, page 4, giving in each case (1) the date, (2) your age at the time, (3) the place where the alleged offense or violation occurred, (4) the name and location of the court, (5) the nature of the offense or violation, (6) the penalty, if any, imposed, or other disposition. The above question includes arrests by military or naval authorities and disciplinary action imposed by courts martial as well as in civil cases. If arrested, your fingerprints will be taken.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(b) Were all discharges granted under honorable conditions? (c) Have you already established military preference with the Civil Service Commission? <small>If so, check kind of preference below: Veteran, Disabled, Wife of disabled veteran, Widow of veteran.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16. Have you any physical defect or disability whatsoever? (b) Have you ever had a nervous breakdown? <small>If your answer to either (a) or (b) is yes, give full particulars under Item 45, page 4.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If you are applying for a specific examination, and wish to claim veteran preference in connection with it, attach U. S. C. (Preference) Form 14, together with the evidence prescribed therein.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17. 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? <small>If so, give complete details under Item 45.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	23. Have you registered under the Selective Service Act? <small>If so, give address and number of local board.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18. Have you ever been discharged for misconduct or unsatisfactory service, or forced to resign from any position? <small>If so, state (under Item 45) when and where employed and give the name and address of your employer and the reason for your discharge or forced resignation in each case.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	If classified give your classification and your order number.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Within the past 12 months, have you used intoxicating beverages? <small>If so, specify: Occasionally, Habitually, In excess</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. (a) Are you now a member of any branch of military or naval reserve? <small>If so, give name of organization.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Are any members of your family or relatives (either by blood or by marriage), employed by the United States Government, excluding persons in the armed forces? <small>If so, give name, address, relationship, and branch of service of each such relative under Item 45.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(b) Are you now on active duty?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21. Are you NOW employed by the Federal Government? (a) If so <b>War Relocation Authority</b> <b>Barr Building, Washington, D. C.</b> (b) If you now are or have ever been so employed, give dates: from (Month) <b>19</b> (Year) to (Month) <b>19</b> (Year)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. Give number of persons completely dependent on you, other than husband or wife <b>NONE</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			26. Would you accept short term appointment? <small>If so, for: 3 months, 6 months, 1 year</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			27. (a) Would you accept appointment anywhere offered in the United States? <small>Give location preferences.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			(b) Would you accept appointment outside the United States? <small>Give locations acceptable.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			(c) Would you accept appointment in Washington, D. C.? <small>If so, and if you are applying for a specific examination, under the examination announcement to see if the Certificate of Reserve (U. S. C. Form 12) is to be submitted. Proof of residence is required for many kinds of positions.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			28. What is the lowest entrance salary you will accept? \$ <b>1700 to 2000</b> yr. <small>You will not be considered for positions paying less.</small>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			29. If you are willing to travel, specify: <input checked="" type="checkbox"/> Occasionally <input type="checkbox"/> Frequently <input type="checkbox"/> Constantly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			30. How much notice will you require to report for work?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Print or type your name here as in item 4 **Miss Ann Lorena Goodpasture**

31. (a) Have you ever filed applications for any Federal civil service examinations? (If so list them below) Yes No

Title of examinations	Examined in what class	Month and year	Results

(b) Have you passed any State or other civil service examination (other than the above) within the last 5 years? (If so give details under item 45) Yes No

32. EDUCATION (a) Circle highest grade completed: elementary or high school 1 2 3 4 5 6 7 8 9 10 (11) Did you graduate? Yes No

Name and location of school	Dates attended		Years completed		Degrees conferred		Semester hours credit
	From	To	Day	Night	Title	Date	
(b) College or university <b>University of Oklahoma Norman, Oklahoma</b>	<b>1937</b>	<b>1941</b>	<b>4</b>		<b>B.S.</b>	<b>1941</b>	<b>127</b>

(c) Other: **Business University Oklahoma City, Oklahoma** **Business Administration Accounting and Stenotypy** States

List your four chief undergraduate subjects	Semester hrs.	List your four chief graduate subjects	Semester hrs.
<b>Commercial &amp; Advertising</b>	<b>50</b>	<b>Business Administration</b>	
<b>English</b>	<b>20</b>	<b>Accounting</b>	
<b>Psychology</b>	<b>12</b>	<b>Stenotypy</b>	
<b>History</b>	<b>12</b>		

33. Indicate your knowledge of foreign languages.	READ			SPEAK			UNDERSTAND			34. Are you now a licensed member of any trade or profession (such as electrician, radio operator, pilot, lawyer, CPA, etc.)? <span style="float:right">Yes No</span>
	Ext	Good	Fair	Ext	Good	Fair	Ext	Good	Fair	
<b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>			<b>X</b>

If not, have you ever been licensed? **Instructor, Okla.**  
 Give kind of license and State **1941**  
 Earliest license (year) **1941**  
 Most recent license (year) **1941**

35. REFERENCES: List five persons, who are not related to you by blood or marriage, who live in the United States, and who are or have been mainly responsible for giving direction of your work, or who are in a position to judge your work critically in those occupations in which you regard yourself as best qualified.

Full name	Address (with telephone address, mailing street and number)	Business or occupation
<b>Hall</b>	<b>Elko Photographic Finishing Co.</b>	<b>Oklahoma City, Oklahoma</b>
<b>W. C. Prosky</b>	<b>Office of Price Administration</b>	<b>Washington, D. C.</b>
<b>W. Howard</b>	<b>OPA Economist</b>	<b>Washington, D. C.</b>
<b>H. Sanders</b>	<b>Tipton, Oklahoma</b>	<b>Pres. First Nat'l Bank</b>

36. May inquiry be made of your present employer regarding your character, qualifications, etc.? X Yes No

37. EXPERIENCE In the space furnished below give a record of every employment, both public and private, which you have had since you first began to work. Start with your present position and work back to the first position you held, accounting for all periods of unemployment. Describe your field of work and position, and, except for employments held less than three months, give your duties and responsibilities in such detail as to make your qualifications clear. Give name you used on pay roll if different from that given on this application.

PRESENT POSITION	Place	Exact title of your position	Salary Starting \$
	<b>Washington, D. C.</b> From <b>Dec. 1, 1943</b> to <b>Date</b> 19 <b>  </b> (Month) (Year) (Month) (Year) Name of employer: <b>  </b> Address: <b>  </b> Kind of business or organization: <b>  </b> Number and class of employees you supervised: <b>  </b> Name and title of your immediate supervisor: <b>  </b>	<b>See attached sheet</b> Duties and responsibilities: <b>  </b> Machines and equipment you used: <b>  </b>	Per <b>  </b> Final \$ <b>  </b>

DO NOT WRITE IN THIS SPACE



Place **Washington, D. C.**  
 From **June 43** To **Sept. 43**  
 Name of employer: **OPA**  
 Address **Washington, D. C.**  
 Kind of business or organization: **Government**  
 Number and class of employees you supervised: **1 CAF-3**  
 Name and title of your immediate supervisor: **Ruth C. Prosky, Supervisor, Employee Services Section, Personnel Division**  
 Reason for leaving: **Other's illness (needed at home)**

Exact title of your position: **Jr. Employee Ser. Officer, Financial Advisor** Salary Starting: **2000.** Per Yr. Final: **2000.**  
 Duties and responsibilities: **Advisor on all financial activities pertaining to collection and disbursement of funds for all campaigns for personnel of OPA. Responsible for setting up accounts, handling of cash, and submitting reports. Under bond. (Emergency Loan Fund of approx. \$1500; Recreation Fund \$1000. (employee contributions); War Savings Bonds (pay roll and cash); Group Hospitalization collections, \$800. monthly; Asst. Treas. of OPA Credit Union. Responsible for 3 bank accounts. Investigated insurance & credit companies. Wrote reports and memoranda. Typewriter, adding machine & Calculator**  
 Machines and equipment you used: **Excellent efficiency rating**

Place **Washington, D. C.**  
 From **Oct. 42** To **June 43**  
 Name of employer: **OPA**  
 Address **Washington, D. C.**  
 Kind of business or organization: **Government**  
 Number and class of employees you supervised: **1 CAF-3**  
 Name and title of your immediate supervisor: **Ruth C. Prosky**  
 Reason for leaving: **Promotion**

Exact title of your position: **Transportation Officer, Employee Services Clerk** Starting: **\$1800.** Per Yr. Final: **2000.**  
 Duties and responsibilities: **Employee Relations duties involving interviewing, organization of various agency campaigns, responsible for safe, setting up and maintaining accounts for above mentioned funds. Transportation Officer - organized car clubs (500) certified applicants for supplemental rations. Wrote reports and memoranda. Worked with various sections of agency (Administrative Officers) in selecting representatives for promoting agency campaigns & war bonds sales. Administrative Assistant to Head of Section.**  
 Machines and equipment you used: **Typewriter, adding machine, & calculator**

Place **Washington, D. C.**  
 From **April 42** To **Oct. 42**  
 Name of employer: **same as above**  
 Address  
 Kind of business or organization:  
 Number and class of employees you supervised:  
 Name and title of your immediate supervisor:  
 Reason for leaving: **Promotion**

Exact title of your position: **Personnel Clerk** Salary Starting: **\$1620** Per Yr. Final: **\$1800**  
 Duties and responsibilities: **Transportation Officer for OPA personnel in organization of car clubs. Responsible for planning and setting up of war bonds pay roll allotment plan. Disseminated information regarding all agency campaigns, such as Community War Fund, Red Cross, United R. Relief, etc. Wrote reports and memoranda. Various bookkeeping and accounting assignments. Excellent efficiency rating**  
 Machines and equipment you used: **Typewriter, adding machine & calculator**

Place **Washington, D. C.**  
 From **March 42** To **April 42**  
 Name of employer: **OEM-OPA**  
 Address **Washington, D. C.**  
 Kind of business or organization: **Government**  
 Number and class of employees you supervised: **none**  
 Name and title of your immediate supervisor: **Ruth Prosky**  
 Reason for leaving: **Promotion**

Exact title of your position: **Clerk** Salary Starting: **\$1440** Per Yr. Final: **\$1620**  
 Duties and responsibilities: **General personnel clerk. Performed various clerical and secretarial duties in the personnel section.**  
 Machines and equipment you used: **Typewriter & Stenotype**

If more space is required, use a Continuation Sheet (Standard Form No. 58) or a sheet of paper, size 8 x 10 1/2 inches. Write on each sheet your name, full address, date of birth, and examination title (if any). Enclose, unattached, with application. O-35094-1



**CONTINUATION SHEET**

For Question 37, "Application for Federal Employment," Standard Form No. 57

Fill in this form only when necessary for completion of "Record of Previous Employment" question on Standard Form No. 57. Enclose, unattached, with your application. Type or use BLACK ink and print. USE ONE SIDE ONLY.

Title of examination (if submitted as an application for same):

1. Date of birth (Month, day, and year)

3. Applicant's first, middle, and last names and full address

11-28-1918

Miss Ann Lorene Goodpasture

Place Oklahoma City, Oklahoma  
 From Sept., 1941 To Feb., 1942

Name of employer  
Elko Photo Finishing Company  
 Address Oklahoma City, Oklahoma

Kind of business or organization  
Private industry  
 Number and class of employees you supervised 1 to 15  
 Name and title of your immediate supervisor  
Geo. Dempsey, Manager

Reason for leaving came to Washington

Place  
 From 19 To 19  
 Name of employer:

Address  
 Kind of business or organization  
 Number and class of employees you supervised  
 Name and title of your immediate supervisor

Reason for leaving  
 Place Norman, Oklahoma  
 From 19 To 19  
 Name of employer:

Address Norman, Oklahoma  
 Kind of business or organization  
Fine Arts Department  
 Number and class of employees you supervised none  
 Name and title of your immediate supervisor Mrs. Peters

Reason for leaving end of school  
 Place  
 From 19 To 19  
 Name of employer:

Address  
 Kind of business or organization  
 Number and class of employees you supervised  
 Name and title of your immediate supervisor

Reason for leaving  
 Machines and equipment you used

Exact title of your position Secretary Salary Starting \$ 60.00  
& Photographic Finishing Per mo. Final \$ 85.00

Duties and responsibilities Bookkeeper, pay roll clerk, and secretary to manager. During his absence was in complete charge of office (approximately 35 to 40 employees who did photographic finishing). During rush weeks, I worked overtime as a photographic printer, enlarger, or at any place where the workload was particularly heavy. (I have had my own darkroom laboratory since a child so that I was quite familiar all types of photographic finishing). I figured time cards weekly and made out pay roll. Kept

Exact title of your position  
 Salary Starting \$  
 Per Final \$

Duties and responsibilities  
the accounts for approximately 300 drug stores and other firms which acted as representatives of the finishing company in sending films for processing and developing. Prepared monthly statements for each organization. This was in addition to the other office accounts.

Machines and equipment you used  
 Exact title of your position  
 Salary Starting \$ 15.  
Office Clerk Per mo. Final \$ 20.

Duties and responsibilities  
General office work while attending college. Graduated from the University of Oklahoma in 1941. I do not recall the exact dates which I worked. A substantial part of my school expenses was paid by work at the University and also typing of theses. Also was a free lance photographer. Average combined earnings per month from 1937 to 1941 were approximately \$30.

Machines and equipment you used  
 Exact title of your position  
 Salary Starting \$  
 Per Final \$

Duties and responsibilities

Machines and equipment you used

Attachment

Present Position:

At the present time I am working in two places: one position is with the War Relocation Authority in the Placement and Training Unit of the Personnel Management Section which consists principally of clerical duties; the other position is with Congressional Intelligence, a private news service, the work consists of preparing for publication various legislative reports, press releases and current congressional information. The combined salaries amount to \$204. per month.

The Civil Service position which I now have is a grade CAF-3 \$1620. Although I am now doing personnel work, I do not feel that I am utilizing to the fullest extent my experience and educational qualifications and would be interested in transferring to any position for which I am qualified. I would prefer a position with a salary which would not necessitate my being on two jobs at one time.

I have no objection to a secretarial position if it is of a responsible nature, however I feel that I am better qualified for a Junior Administrative, Personnel or clerical accounting position.

**PERSONAL HISTORY STATEMENT**

**SECRET**

**INSTRUCTIONS:** 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 A SEPARATE SHEET OF PAPER FOR EXTRA DETAILS ON ANY QUESTION OR QUESTIONS FOR WHICH YOU DO NOT HAVE SUFFICIENT ROOM. ATTACH TWO RECENT PASSPORT SIZE PICTURES TO THIS FORM. STATE TAKEN WRITTEN ON THE BACK OF EACH. TYPE, PRINT OR WRITE CAREFULLY. ILLEGIBLE OR INCOMPLETE FORMS WILL NOT RECEIVE CONSIDERATION.

HAVE YOU READ AND UNDERSTOOD THE ABOVE INSTRUCTIONS? YES  NO

**SECTION 1: PERSONAL BACKGROUND**

NAME: FIRST MIDDLE LAST  
 MR.  MISS  MRS.  **Ann Lorene Goodpasture**

NICKNAMES: **none** OTHER NAMES THAT YOU HAVE USED: **Not applicable**

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? **nil** HOW LONG? **nil**

IF LEGAL CHANGE, GIVE PARTICULARS (WHERE, WHEN AND BY WHAT AUTHORITY): **not applicable**

DATE OF BIRTH: **Nov. 28, 1918** PLACE OF BIRTH: **Celina** CITY: **Tennessee** STATE: **U.S.A.** COUNTRY:

PRESENT CITIZENSHIP: **American** ACQUIRED BY: BIRTH  MARRIAGE  NATURALIZATION

NATURALIZATION CERTIFICATE: NUMBER **not applicable** DATE ISSUED: **nil** NAME OF COURT: **nil**

LOCATION OF COURT: **Not applicable** CITY: STATE: COUNTRY:

PREVIOUS CITIZENSHIP: **Not applicable** DATE HELD: FROM: **nil** TO: **nil**

OTHER CITIZENSHIPS (GIVE PARTICULARS): **None**

STEPS TAKEN TO CHANGE PRESENT NATIONALITY (GIVE PARTICULARS): **None**

LAST U.S. PASSPORT: NUMBER **SP-713** DATE: **March 1947** PLACE OF ISSUE: **Washington, D.C., USA**

ALL OTHER U.S. PASSPORTS YOU HAVE HAD (GIVE APPROXIMATE DATES): **Special Passport issued 1944 at Washington D.C., USA number unknown**

PASSPORTS OF OTHER NATIONS: **None**

IF BORN OUTSIDE U.S.: DATE OF ARRIVAL IN THIS COUNTRY: **Not applicable** PORT OF ENTRY: **nil** PASSPORT OF COUNTRY: **nil**

LAST U.S. VISA: NUMBER **nil** TYPE: **nil** DATE: **nil** PLACE OF ISSUE: **nil**

**SECTION 2. PHYSICAL DESCRIPTION**

AGE: **29** SEX: **female** HEIGHT: **5'2 1/2"** WEIGHT: **98 lbs.** EYES: **brown** HAIR: **brown**

COMPLEXION: **fair** SCARS: **scar on right thumb (broken nail)** BUILD: **small**

OTHER DISTINGUISHING FEATURES: **None**

**SECRET**



<b>SECTION 3. MARITAL STATUS</b>									
MARRIED <input type="checkbox"/>	WIDOWED <input type="checkbox"/>	SEPARATED <input type="checkbox"/>	DATE OF SEPARATION OR DIVORCE				PLACE		
SINGLE <input checked="" type="checkbox"/>	DIVORCED <input type="checkbox"/>								
REASON FOR SEPARATION OR DIVORCE: <b>not applicable</b>									
NOTE: IF YOU HAVE BEEN MARRIED MORE THAN ONCE-USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND AND GIVE DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES: <b>not applicable</b>									
NAME OF WIFE OR HUSBAND		FIRST	MIDDLE (FOR WIFE, MAIDEN)	LAST			DATE OF MARRIAGE		
PLACE OF MARRIAGE			(HIS OR HER) ADDRESS BEFORE MARRIAGE		STREET AND NUMBER		CITY	STATE	COUNTRY
LIVING <input type="checkbox"/>	DECEASED <input type="checkbox"/>	DATE OF DECEASE		CAUSE					
PRESENT OR LAST ADDRESS		STREET AND NUMBER			CITY		STATE	COUNTRY	
DATE OF BIRTH		PLACE OF BIRTH			CITY		STATE	COUNTRY	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED	CITY		STATE	COUNTRY	
OCCUPATION				LAST EMPLOYER					
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER			CITY		STATE	COUNTRY	
DATE OF MILITARY SERVICE		FROM:	TO:		BRANCH OF SERVICE		COUNTRY		
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)									
<b>SECTION 4. CHILDREN OR DEPENDENTS (INCLUDE PARTIAL DEPENDENTS) none</b>									
NAME				RELATIONSHIP				AGE	
CITIZENSHIP		ADDRESS STREET AND NUMBER			CITY		STATE	COUNTRY	
NAME				RELATIONSHIP				AGE	
CITIZENSHIP		ADDRESS STREET AND NUMBER			CITY		STATE	COUNTRY	
NAME				RELATIONSHIP				AGE	
CITIZENSHIP		ADDRESS STREET AND NUMBER			CITY		STATE	COUNTRY	
<b>SECTION 5. PARENTS</b>									
NOTE: FOR STEPFATHER, STEPMOTHER AND/OR GUARDIAN, GIVE THE SAME INFORMATION AS REQUIRED BELOW ON SEPARATE SHEET									
NAME OF FATHER		FIRST	MIDDLE	LAST			LIVING <input checked="" type="checkbox"/>		DECEASED <input type="checkbox"/>
		C.	H.	Goodpasture					
DATE OF DECEASE		CAUSE							
		<b>not applicable nil</b>							
PRESENT OR LAST ADDRESS		STREET AND NUMBER			CITY		STATE	COUNTRY	
		North Main			Tipton		Oklahoma	USA	
DATE OF BIRTH		PLACE OF BIRTH			CITY		STATE	COUNTRY	
1890 and 1900 (?)		Celina Tennessee						USA	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED	CITY		STATE	COUNTRY	
American		by birth		birthplace					
OCCUPATION				LAST EMPLOYER					
Real Estate				self					
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER			CITY		STATE	COUNTRY	
		North Main			Tipton		Oklahoma	USA	
<b>SECTION 5. PARENTS (CONTINUED) (PAGE 3)</b>									

<b>SECTION 5. PARENTS (CONTINUED) (PAGE 2)</b>						
DATE OF MILITARY SERVICE:	FROM:	TO:	BRANCH OF SERVICE:	COUNTRY:		
	not applicable					
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)						
not applicable						
NAME OF MOTHER:		FIRST	MAIDEN	LAST		LIVING <input checked="" type="checkbox"/> DECEASED <input type="checkbox"/>
Ann		Went	Goodpasture			
DATE OF DECEASE	CAUSE					
not applicable	nil					
PRESENT OR LAST ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
	no. 022		Tipton	Oklahoma	USA	
DATE OF BIRTH	PLACE OF BIRTH		CITY	STATE	COUNTRY	
between 1890 and 1900 (e)	Hickman		Tennessee		USA	
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY	
American	by birth	birthplace				
OCCUPATION	LAST EMPLOYER					
none	not applicable					
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
	not applicable					
GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)						
none						
<b>SECTION 6. BROTHERS AND SISTERS (INCLUDING HALF-, STEP-, AND ADOPTED BROTHERS AND SISTERS)</b>						
NAME		FIRST	MIDDLE	LAST		LIVING <input type="checkbox"/> DECEASED <input type="checkbox"/>
Robert		J.	Goodpasture			
PRESENT ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
			Tipton	Oklahoma	USA	
NAME		FIRST	MIDDLE	LAST		LIVING <input type="checkbox"/> DECEASED <input type="checkbox"/>
G.		M.	Goodpasture		USA	
PRESENT ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
			Tipton	Oklahoma	USA	
NAME		FIRST	MIDDLE	LAST		LIVING <input type="checkbox"/> DECEASED <input type="checkbox"/>
PRESENT ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
<b>SECTION 7. PARENTS-IN-LAW</b>						
not applicable						
NAME OF FATHER-IN-LAW		FIRST	MIDDLE	LAST		LIVING <input type="checkbox"/> DECEASED <input type="checkbox"/>
DATE OF DECEASE	CAUSE					
PRESENT OR LAST ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
DATE OF BIRTH	PLACE OF BIRTH		CITY	STATE	COUNTRY	
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY	
OCCUPATION	LAST EMPLOYER					
NAME OF MOTHER-IN-LAW		FIRST	MAIDEN	LAST		LIVING <input type="checkbox"/> DECEASED <input type="checkbox"/>
DATE OF DECEASE	CAUSE					
PRESENT OR LAST ADDRESS	STREET AND NUMBER		CITY	STATE	COUNTRY	
DATE OF BIRTH	PLACE OF BIRTH		CITY	STATE	COUNTRY	
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY	
OCCUPATION	LAST EMPLOYER					

**SECTION 8. RELATIVES** *None*

NOTE: INDICATE BELOW THE RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO LIVE ABROAD, ARE UNDER THE INFLUENCE OF A FOREIGN POWER, ARE NOT CITIZENS OF THE UNITED STATES, OR ARE MARRIED TO NON-CITIZENS.

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NOTE: INDICATE BELOW THE RELATIVES BY BLOOD OR MARRIAGE, IN MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE (UNITED STATES OR FOREIGN) *None*

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

**SECTION 9. EDUCATION**

SCHOOL	ADDRESS	CITY	STATE	COUNTRY
<i>Griffin School</i>		<i>Colina</i>	<i>Tennessee</i>	<i>USA</i>

DATES ATTENDED	FROM	TO	DEGREE
	<i>1925</i>	<i>1928</i>	

SCHOOL	ADDRESS	CITY	STATE	COUNTRY
<i>Junior and High School</i>		<i>Lang &amp; Tipton</i>	<i>Oklahoma</i>	<i>USA</i>

DATES ATTENDED	FROM	TO	DEGREE
	<i>1928</i>	<i>1936</i>	<i>HS Diploma</i>

COLLEGE	ADDRESS	CITY	STATE	COUNTRY
<i>University of Oklahoma</i>	<i>Norman Oklahoma</i>	<i>Oklahoma</i>	<i>USA</i>	

DATES ATTENDED	FROM	TO	DEGREE
	<i>1937</i>	<i>1941</i>	<i>Bachelor of Science</i>

COLLEGE	ADDRESS	CITY	STATE	COUNTRY
<i>Hill's University</i>		<i>Oklahoma City Okla.</i>	<i>Okla.</i>	<i>USA</i>

DATES ATTENDED	FROM	TO	DEGREE
	<i>1941</i>	<i>1941</i>	<i>Graduate work in reporting and stenograph.</i>



<b>SECTION 10. SELECTIVE SERVICE</b> US <i>NOT applicable</i>			
CLASSIFICATION	ORDER NUMBER	APPROXIMATE INDUCTION DATE	BOARD NUMBER
ADDRESS OF BOARD	STREET AND NUMBER	CITY	STATE
IF DEFERRED, STATE REASON			
<b>SECTION 11. MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE - UNITED STATES OR FOREIGN</b> <b>NO. 10</b>			
COUNTRY	SERVICE	SERVICE DATES	NO.
GRADE	SERIAL NUMBER	TYPE OF DISCHARGE	
LAST STATION		COMMANDING OFFICER	
REMARKS:			
<b>SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (USE ADDITIONAL SHEET IF NECESSARY)</b>			
NOTE: INCLUDE BELOW PERIODS OF UNEMPLOYMENT AND CASUAL EMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. INCLUDE LAST 5 POSITIONS AND COVER AT LEAST 15 YEARS.			
EMPLOYER		JOB TITLE	
University of Oklahoma		Professor/transposing & secretarial	
ADDRESS	STREET AND NUMBER	CITY	STATE
	Norman, Oklahoma		
YOUR DUTIES AND SPECIALITY		NAME OF SUPERVISOR	
secretarial and transposing of music		Mrs. Peters, Dean, Fine Arts	
DATES COVERED	FROM:	TO:	SALARY
	1937	1941	\$30-35
			PER
			per mo.
REASONS FOR LEAVING			
Graduated from University			
EMPLOYER		JOB TITLE	
Ella Photo Engraving Company		Photo technician	
ADDRESS	STREET AND NUMBER	CITY	STATE
		Oklahoma City, Okla	
YOUR DUTIES AND SPECIALITY		NAME OF SUPERVISOR	
General Office and photo technician		Geo. Dempsey, Mgr.	
DATES COVERED	FROM:	TO:	SALARY
	Sept 1942	Feb 1942 parttime	30.
			PER
			mo.
REASONS FOR LEAVING			
part time employment while going to University			
EMPLOYER		JOB TITLE (present)	
U.S. Government		Administrative Assistant	
ADDRESS	STREET AND NUMBER	CITY	STATE
		Wash. D.C., India, Ceylon, China	
YOUR DUTIES AND SPECIALITY		NAME OF SUPERVISOR	
Secretarial and administrative		) listed in See Section 13) order.	
DATES COVERED	FROM:	TO:	SALARY (present) PER
	Mar. 1942	date	4149.60 (temp.) annum
REASONS FOR LEAVING			
still here			
EMPLOYER		JOB TITLE	
ADDRESS	STREET AND NUMBER	CITY	STATE

SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (CONTINUED FROM PAGE 3)				
YOUR DUTIES AND SPECIALITY			NAME OF SUPERVISOR	
DATES COVERED	FROM:	TO:	SALARY	PER
REASONS FOR LEAVING				
EMPLOYER			JOB TITLE	
ADDRESS STREET AND NUMBER		CITY	STATE	KIND OF BUSINESS
YOUR DUTIES AND SPECIALITY			NAME OF SUPERVISOR	
DATES COVERED	FROM:	TO:	SALARY	PER
REASONS FOR LEAVING				
EMPLOYER			JOB TITLE	
ADDRESS STREET AND NUMBER		CITY	STATE	KIND OF BUSINESS
YOUR DUTIES AND SPECIALITY			NAME OF SUPERVISOR	
DATES COVERED	FROM:	TO:	SALARY	PER
REASONS FOR LEAVING				
EMPLOYER			JOB TITLE	
ADDRESS STREET AND NUMBER		CITY	STATE	KIND OF BUSINESS
NOTE: IN SPACE BELOW GIVE DETAILS CONCERNING ANY POSITION FROM WHICH YOU MAY HAVE BEEN DISCHARGED OR WHICH YOU MAY HAVE LEFT UNDER CIRCUMSTANCES WHICH WERE NOT ENTIRELY FAVORABLE. <i>None</i>				
DETAILS:				
SECTION 13. CHARACTER REFERENCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHERE POSSIBLE)				
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>R. C. Prosky</i>	<i>Office for Emergency Management, Wash., D.C.</i>			
<i>Geo. Greene c/o Natl City Bank of N.Y.</i>	<i>55 Wall St., New York, N.Y.</i>			
<i>Cora DuBois</i>	<i>Department of State, Washington, D.C.</i>			
<i>Lt. Col. J. F. Spencer</i>	<i>University of Southern Calif., Los Angeles.</i>			
<i>C. H. Wilbur</i>	<i>Department of State, Washington, D.C.</i>			
SECTION 14. SOCIAL ACQUAINTANCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHERE POSSIBLE)				
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>M. McFarland</i>	<i>Office of Senator Tobey, US Senate, Wash D.C.</i>			
<i>J. Blades</i>	<i>IRO, 1344 Conn Ave., N.W., Wash., D.C.</i>			
<i>Dr. I. P. Howard</i>	<i>c/o USPHS, Savannah, Georgia</i>			
<i>Hubert Humphrey</i>	<i>Office of Mayor, Minneapolis, Minn.</i>			
<i>John McDonald</i>	<i>J.H. McDonald Insurance Co., Tipton, Oklahoma</i>			
SECTION 15. NEIGHBORS-THREE IN THE UNITED STATES (AT YOUR LAST NORMAL ADDRESS)				

SECTION 15. NEIGHBORS—THREE IN THE UNITED STATES (AT YOUR LAST NORMAL ADDRESS)					
NAME	ADDRESS STREET AND NUMBER	CITY	STATE		
M. Maurer	1514 17th St. N.W.	Wash., D.C.	USA		
L. Herber	1514 17th St. N.W.	Wash., D.C.	USA		
A. Haynes	1514 17th St. N.W.	Wash., D.C.	USA		
SECTION 16. MISCELLANEOUS					
DID YOU EVER HAVE OR DO YOU NOW HAVE MEMBERSHIP IN, OR SUPPORT ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
IF ANSWER IS "YES", EXPLAIN BELOW:					
DO YOU USE, OR HAVE YOU USED, INTOXICANTS? I have.					
HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENCE, AND DISPOSITION OF CASE. No.					
HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
IF ANSWER IS "YES", GIVE DETAILS BELOW:					
SECTION 17. FINANCIAL BACKGROUND					
ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> IF ANSWER IS "NO", STATE SOURCES OF OTHER INCOME.					
NAMES OF BANKS WITH WHICH YOU HAVE ACCOUNTS					
First National Bank, Tipton, Oklahoma, USA					
National City Bank of New York at Bombay, India.					
HAVE YOU EVER BEEN IN BANKRUPTCY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF ANSWER IS "YES", GIVE PARTICULARS:					
SECTION 18. CREDIT REFERENCES—THREE IN THE UNITED STATES					
NAME	ADDRESS STREET AND NUMBER	CITY	STATE		
First National Bank		Tipton	Oklahoma		
NAME	ADDRESS STREET AND NUMBER	CITY	STATE		
Union Trust Company	14th & G sts N.W.	Wash., D.C.	USA		
NAME	ADDRESS STREET AND NUMBER	CITY	STATE		
Mrs. R. Trafton	Resident Mgr., Copley Courts	Wash., D.C.			
SECTION 19. RESIDENCES FOR PAST 15 YEARS					
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY
1933	1937	Tipton, Okla., Colina and Nashville, Tenn.			
1937	1941	722 Chatauqua St. & U. of O. Norman	Oklahoma	USA	
1941	1942	512 N.W. 9 Street	Oklahoma City, Okla	USA	

(CONTINUED TO PAGE 8)

PAGE 7



SECTION 23. GENERAL QUALIFICATION

INDICATE ANY SPECIAL KNOWLEDGE OR TRAINING YOU HAVE, ALSO, SET FORTH ANY QUALIFICATIONS AS A RESULT OF TRAINING OR EXPERIENCE, WHICH WOULD FIT YOU FOR A PARTICULAR POSITION.

SECTION 24. SPORTS AND HOBBIES

photography, horseback riding, music, chess.

SECTION 25. EMERGENCY ADDRESSEE

either /parents' address or

NAME C.H. Sanders		RELATIONSHIP	
ADDRESS First National Bank	CITY Tipton	STATE Oklahoma	TELEPHONE

SECTION 26. INFORMATION AND FINAL COMMENTS

NOTE: YOU ARE INFORMED THAT CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED, AND YOU ARE INVITED TO MAKE ANY CHANGES (OR ADDITIONS) IN YOUR STATEMENTS THAT YOU MAY THINK ADVISABLE.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, EITHER DIRECTLY OR INDIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION, IF SO, DESCRIBE, IF NOT, ANSWER, "NO".  
None that I recall

SECTION 27. CERTIFICATION

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

SIGNED AT  DATE 25 February 1948

City State

Witness Signature of Applicant





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

DATE 1 AUG 1971 BK