

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

FILE TITLE/NUMBER/VOLUME: FLORES, DANIEL
OP FILE

INCLUSIVE DATES: _____

CUSTODIAL UNIT/LOCATION: _____

ROOM: _____

DELETIONS, IF ANY: MATERIAL AFTER 1967

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL

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NOV 1967

FLORES DANIEL

DOB

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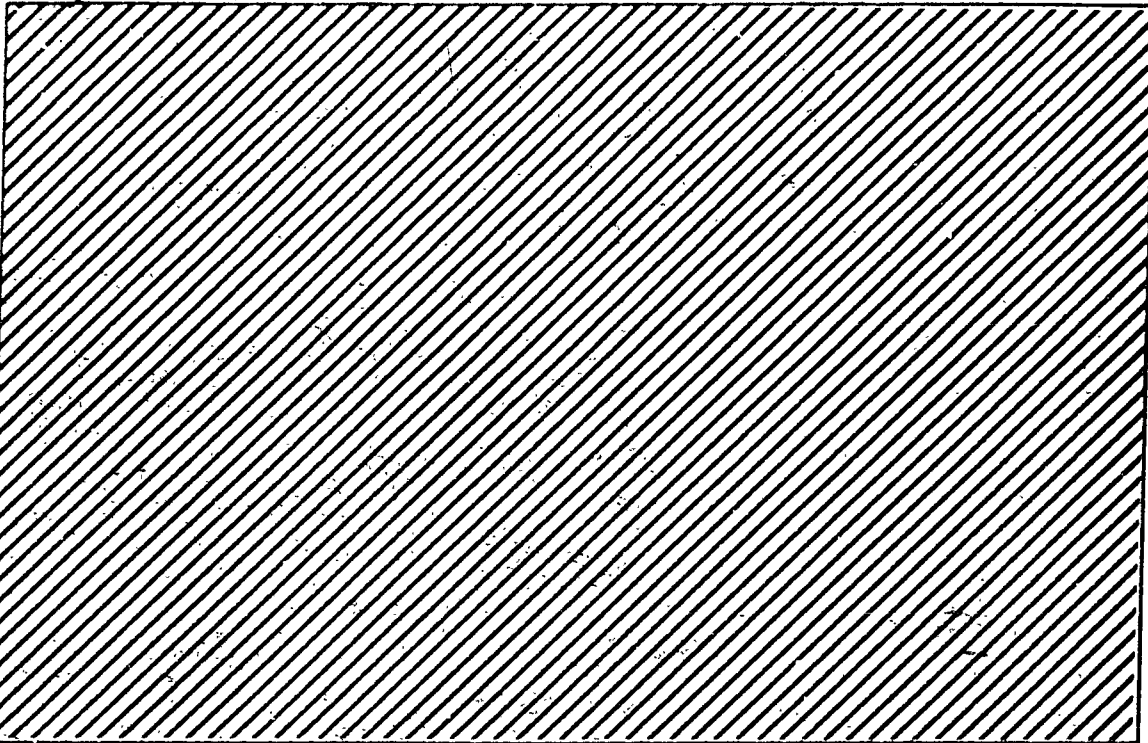
DELETIONS, IF ANY: MATERIAL AFTER 1967

DATE RECEIVED	DATE RETURNED	REVIEWED BY (PRINT NAME)	SIGNATURE OF REVIEWING OFFICIAL

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FILE NUMBER
FLORES DANIEL
FILE NAME
DOE

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle) FLORES, Daniel	NAME AND RELATIONSHIP OF DEPENDENT self	CLAIM NUMBER 79 0606
--	--	-------------------------

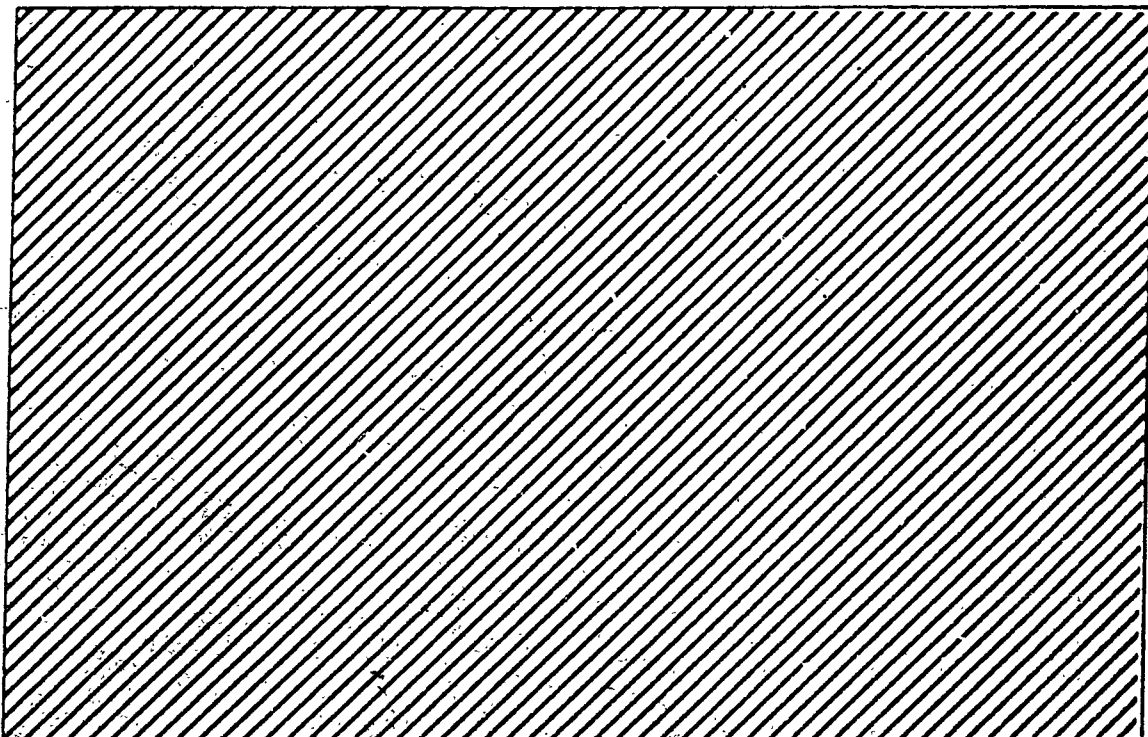
There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 1/4/79.

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 7 Jun 1979	SIGNATURE OF BIC REPRESENTATIVE Arthur L. Hardt
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
FLORES, Daniel	Self	78-0668

There is on file in the Personal Affairs 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 4/12/78.

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 BSO REPRESENTATIVE
6/6/78	Ernest L. Baritt

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(If Not Filled In)

81 JAN 1978

REQUEST FOR PERSONNEL ACTION		DATE PREPARED 27 January 1978	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) Flores, Daniel		
3 NATURE OF PERSONNEL ACTION Reassignment		4 EFFECTIVE DATE REQUESTED MONTH: 02 DAY: 11 YEAR: 78	5 CATEGORY OF EMPLOYMENT Regular
6 FUNDS V TO V CF TO V	V TO CF CF TO CF	7 PAN AND NSCA 8035 0990 0000	8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Foreign Field Mexico City, Mexico Station		10 LOCATION OF OFFICIAL STATION Mexico City, Mexico	
11 POSITION TITLE Operations Officer		12 POSITION NUMBER GK76	13 CAREER SERVICE DESIGNATION DOG
14 CLASSIFICATION SCHEDULE (GS, LB, IN.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 13 2	17 SALARY OR RATE 26887
18 REMARKS Reassigned from position FS35 CMS/MSB <i>[Signature]</i> <i>This action reflects WGT- 1/29/78</i>			
18A SIGNATURE OF REQUESTING OFFICIAL J. Halpin		DATE SIGNED 1/27/78	18B SIGNATURE OF OFFICE OF PERSONNEL CMS L3
DATE SIGNED 1/29/78			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 51620 ALPHABETIC: LA	22 STATION CODE 45075
23 INTEGRAL CODE 3	24 HOURS CODE	25 DATE OF BIRTH	26 DATE OF GRADE
27 DATE OF LEI	28 SITE EMPLOY	29 SPECIAL REFERENCE	30 RETIREMENT DATA
31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA	33 SECURITY REG. NO.	34 SEC
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY
39 FEDERAL HEALTH INSURANCE	40 SOCIAL SECURITY NO.	41 PERIODS (FEDERAL GOVERNMENT SERVICE)	42 LEAVE CAT
43 FEDERAL TAX DATA	44 STATE TAX DATA	45 POSITION CONTROL CERTIFICATION 1-27-78 AED	46 OFF APPROVAL Ann E. O. Ksok
47 DATE APPROVED 1-31-78		48 OF APPROVAL	

FORM 1152 USE PREVIOUS EDITION

SECRET

FORM 1152 USE PREVIOUS EDITION

11

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UP *See* FILED

REQUEST FOR PCS OVERSEAS EVALUATION				1 REQUEST DATE (DD/M/YY)	2 APPLICANT HAS APPLICANT SEEN BY OMS	3 DEPENDENT(S)	4 EMPLOYEE
1 NAME (Last, First, Middle)		8 GRADE		9 AFFILIATION CODE	10 DIRECTORATE/OFFICE DIVISION	11 EMP ID#	12 POSITIONAL TITLE
Flores, Daniel		13 All		DDO/LA		5270	Ops Officer
14 DEPENDENT NAME (L, F, M)				15 SOC SEC NO	16 DOB (DD/M/YY)	17 SEX	18 RELATIONSHIP
							19 DEPENDENT PREVIOUSLY SEEN BY OMS (Yes/No)
20 REQUESTED ACTION (more than one action is acceptable)							
APPLICANT:		PRE EMPLOYMENT...		EOD			
ASSIGNMENTS:		O/S PCS		STATION		ETD/ETA (DD/M/YY)	
		x		Mexico City		14 Oct 77	
		O/S TDY		POSITION		Ops Officer	
		O/S RETURNEE		FITNESS FOR DUTY		OTHER (specify):	
		O/S TDY STANDBY		RETURN TO DUTY			
		O/S PLANNING		SPECIAL TRAINING			
SEPARATION		RETIREMENT		MDR/CIARDS		MDR/CSC	
ROUTINE		REGULAR ANNUAL		EXECUTIVE ANNUAL		MPT/PHE	
21 COMMENTS							
Assignment to Tokyo, Japan has been cancelled. Subject is now being considered for Mexico City.							
22 REQUESTING DIRECTORATE/OFFICE DIV				23 ROOM/BLDG	24 EXTENSION	25 SIGNATURE OF REQUESTING OFFICER	
DDO/LA/PERS				313113 Hqs	5270		
26 OFFICE OF SECURITY DISPOSITION							
27 OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION							
<p>QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS</p> <p>Jane Murs <i>Jane Murs</i> 7 OCT 1977</p> <p>Chairman, Overseas Candidate Review Panel</p>							
<input type="checkbox"/> UNCLASSIFIED		<input type="checkbox"/> INTERNAL USE ONLY		<input type="checkbox"/> CONFIDENTIAL		<input type="checkbox"/> SECRET	

FORM 2698 (REV. 10-1-77) (GPO: 1977-208-200)

8 - OMSAS (when applicable)

SECRET
(When Filled In)

28 1977

REQUEST FOR PERSONNEL ACTION					DATE PREPARED				
1 SERIAL NUMBER 036130					2 NAME (Last-First-Middle) FLORES, DANIEL				
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT SYSTEM			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 10 77		5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS V TO V CP TO V		V TO CP X CP TO CP		7 PAY AND NICA 7135-4534-0000		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643, Sect. 203			
9 ORGANIZATIONAL DESIGNATIONS DDO/LA				10. LOCATION OF OFFICIAL STATION WASH., D.C.					
11. POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION DQG				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) 45		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 13		17 SALARY OR RATE \$			
18 REMARKS SUBJECT REMOVED FROM SYSTEM IN ACCORDANCE WITH HN 20-763.									
18A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTERSEE CODE	24 MOOTHS CODE	25 DATE OF BIRTH	26 DATE OF GRADN	27 DATE OF LEI
28 WTE EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-FC 2-CPUB 3-FER 4-BOE		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 LAW BSL PROF. TEMP	39 FEGLI HEALTH INSURANCE CODE CODE A-SELECTED 1-PIC 2-REG/OPT 3-UNAVAILABLE		40 SOCIAL SECURITY NO	
41 PERIODS (CIVILIAN GOVERNMENT SERVICE) CODE 0-NO PREVIOUS SERVICE 1-NO DELAY IN SERVICE 2-DELAY IN SERVICE (LESS THAN 3 YEARS) 3-DELAY IN SERVICE (MORE THAN 3 YEARS)			42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE MO TAX EXEMPTIONS 1-FPS 2-BO		44 STATE TAX DATA FORM EXECUTED CODE MO TAX EXEMPTIONS 1-FPS 2-BO		45 POSITION CONTROL CERTIFICATION	
3-24 77				MAR 1977		Firm Vanney		2 Mar 77	

FORM 1152 USE PREVIOUS EDITION

SECRET

FORM 1152 USE PREVIOUS EDITION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED			
1 SERIAL NUMBER 036130										2 NAME (Last-First-Middle) Flores, Daniel		15 February 1977	
3 NATURE OF PERSONNEL ACTION Reassignment					4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 26 77			5 CATEGORY OF EMPLOYMENT Regular					
6 FUNDS		V TO V		V TO CP		7. FAN AND NSCA 7135-4534 0000		8 LEGAL AUTHORITY (Completed by Office of Personnel)					
CF TO V		X		CF TO CP		9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Cuba Operations Group EA Area					10 LOCATION OF OFFICIAL STATION Washington, D. C.		
11 POSITION TITLE Operations Officer					12. POSITION NUMBER (13) FS35		13 CAREER SERVICE DESIGNATION DQG						
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 13 1		17 SALARY OR RATE \$24,308						
18. REMARKS Reassigned from DDO/LA Position CQ 66 CMS/MSB <i>S. Valenti</i> 2-17-77													
19A SIGNATURE OF REQUESTING OFFICIAL <i>J. Halpin</i> J. Halpin CLAPERS				DATE SIGNED 15Feb77		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Joseph J. Smith</i> CMS/13				DATE SIGNED 2-24-77			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 51500 LA		22 STATION CODE 75013	23 INTEGRITY CODE	24 HQ/RTS CODE	25 DATE OF BIRTH		26 DATE OF GRADE MO DA YR		27 DATE OF LEI MO DA YR		
28 BTE EXPIRES MO DA YR		29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-ELC 2-OPSM 3-FLCA 4-ROSE		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO DA YR		EOD DATA →		33 SECURITY REQ. NO	34 SSI		
35 VET PREFERENCE CODE 0-NONE 1-5 YR 2-10 YR		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY EMP, RTSP PROV, TRSP		39 HIGH HEALTH INSURANCE CODE 0-WAIVER 1-BES 2-BIG-OPT 3-UNAVAILABLE		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 EXEMPTED CODE NO TAX EXEMPTIONS 1-NR 2-RR		44 STATE TAX DATA FORM EXEMPTED CODE NO TAX EXEMPTIONS 1-NR 2-RR		45 POSITION CONTROL CERTIFICATION DATE APPROVED 01 MAR 1977 <i>[Signature]</i>					
1152 USE PREVIOUS EDITION													
SECRET													
12. REPORT CL BY 007AJ3													

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION	DATE PREPARED 19 January 1977
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1 SERIAL NUMBER 036130 ✓	2 NAME (Last-First-Middle) Flores, Daniel ✓
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3 NATURE OF PERSONNEL ACTION PROMOTION	4 EFFECTIVE DATE REQUESTED MONTH: 01 DAY: 30 YEAR: 77	5 CATEGORY OF EMPLOYMENT Regular
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6 FUNDS V TO V C TO V						7. PAN AND NSCA 7135 45340000	8 (LEGAL AUTHORITY (Complied by Office of Personnel))
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9. ORGANIZATIONAL DESIGNATIONS DDO/LA Division ✓ Cuba Operations Group ✓ WII Area ✓	10 LOCATION OF OFFICIAL STATION Washington, D.C.
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11 POSITION TITLE Operations Officer ✓ (13)	12 POSITION NUMBER CQ66	13 CAREER SERVICE DESIGNATION DQG ✓
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14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15 OCCUPATIONAL SERIES 0136.01 ✓	16 GRADE AND STEP 13 1	17 SALARY OR RATE \$24,508
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18 REMARKS
FROM: GS-12/4, \$22,485
for 12/4

18A SIGNATURE OF REQUESTING OFFICER <i>John Malpin</i> John Malpin, PERS	DATE SIGNED 19 Jan 77	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Michael...</i>	DATE SIGNED 21 Jan 77
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES	22 SERVICE CODE	23 RETIREMENT CODE	24 REGIONS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
22	10	51500 LA	75013			08/04/35	01/30/77	01/30/77
28 OFFERED	29 OFFERED	30 OFFERED	31 OFFERED	32 OFFERED	33 OFFERED	34 OFFERED	35 OFFERED	36 OFFERED
37 OFFERED	38 OFFERED	39 OFFERED	40 OFFERED	41 OFFERED	42 OFFERED	43 OFFERED	44 OFFERED	45 OFFERED

John Malpin *Michael...* 21 Jan 77

Handwritten initials

SECRET
(When Filled In)

19 NOV 1976

REQUEST FOR PERSONNEL ACTION		DATE PREPARED 10 November 1976
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1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) Flores, Daniel
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3 NATURE OF PERSONNEL ACTION Reassignment	4 EFFECTIVE DATE REQUESTED MONTH: 12 DAY: 04 YEAR: 76	5 CATEGORY OF EMPLOYMENT Regular
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6 FUNDS V TO V CP TO V	V TO CP X CP TO CP	7. PAN AND NSCA 7135-4534 0000	8 (LEGAL AUTHORITY (Completed by Office of Personnel))
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9 ORGANIZATIONAL DESIGNATIONS DDO/LA Division Cuba Operations Group WH Area	10 LOCATION OF OFFICIAL STATION Washington, D. C.
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11. POSITION TITLE Operations Officer (12)	12 POSITION NUMBER CQ67	13 CAREER SERVICE DESIGNATION DQG
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14 CLASSIFICATION SCHEDULE (GS, LS, PA...) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 12 8	17 SALARY OR RATE 50485 23/804
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18 REMARKS

Reassigned from DDA/OTR Position BD 33

Concur: Hugh McClafferty 10 Nov 76 (telecord)

OTR/PERS

CMS/MSB *Il Valent*, CMS/MSB 11-16-76

18A SIGNATURE OF REQUESTING OFFICIAL <i>John F. Halpin</i> John F. Halpin C/LA/PERS	DATE SIGNED 10 Nov 76	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Gregory A. ...</i> Gregory A. ...	DATE SIGNED 11/15/76
--	---------------------------------	---	--------------------------------

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODES NUMERIC: 51500 ALPHABETIC: LA	22 STATION CODE 75013	23 UTILITY CODE	24 ROOMS CODE	25 DATE OF BIRTH 12/24/35	26 DATE OF GRADE	27 DATE OF LEI	
28 RETIREMENT DATA	29 VETERAN DATA	30 DEPARTMENT DATA	31 SEPARATION DATA	32 LOCATION/REGISTRATION DATA	EOO DATA →			33 SECURITY	34 SAS
35 NET PREFERENCE	36 LEVY COMP DATA	37 LEVY COMP DATA	38 CARRIED LATTER	39	40	41	42	43	
44	45	46	47	48	49	50	51	52	

53	54	55	56
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EYES ONLY

20 OCT 1976

MEMORANDUM FOR: Chairman, GS-12 Evaluation Board

FROM : Raymond A. Warren
Chief, Latin America Division

SUBJECT : Recommendation for Promotion to
Grade GS-13, Daniel Flores

1. Mr. Daniel Flores was recently assigned to OTR as an operations instructor to capitalize on his fine operational record which he developed during his two field assignments in [redacted] and in [redacted] and his most recent operational assignment with LA/COG. His overall performance has clearly been characterized by exceptional proficiency and he has been rated by his most recent supervisor as "outstanding" for his handling of a sensitive [redacted] case and his development and pursuit of [redacted] operational leads. Mr. Flores has definite growth potential and clearly meets or exceeds the criteria for promotion to Grade GS-13, a promotion which is most strongly recommended.

2. During the past year Mr. Flores was responsible for handling a very sensitive, and [redacted] asset. This asset is probably one of the "messiest and disorganized individuals" with whom a case officer in this Agency has had to contend. However, Mr. Flores clearly demonstrated his fine handling abilities in his manipulation and exploitation of this agent. As a result of his guidance and his ability to effectively debrief this person, Mr. Flores was able to make this asset one of our most productive [redacted] sources. During the last year this source [redacted] on subject matter which often commanded attention at the highest levels of our government.

3. Mr. Flores has shown a remarkable growth potential during the last year. He is determined, persistent, serious, and commendably aggressive. He is mature, self-assured, and his operational decisions are sound. His managerial skills are in keeping with his operational potential. He was often called

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EYES ONLY

E2 IMPDET
CL BY 025231

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EYES ONLY

upon in the last twelve months to act as Chief of his section, a GS-14 position. He demonstrated sound leadership qualities by stimulating interest and enthusiasm in his staff. His operational programs were aggressive and imaginative. Mr. Flores' supervisory talents combined with his excellent professional skills portend a continuing and successful career in this Agency.

4. While assigned to LA/COG, Mr. Flores was involved in the spotting, assessing, developing access to, and eventually pitching a [redacted] who was the [redacted] in a Latin American country. The recruitment pitch was not successful but the details of this operation were handled in the most professional manner. Mr. Flores developed more leads to [redacted] and [redacted] of [redacted] during this period than any other LA/COG operations officer. He has native fluency in Spanish and feels "at home" operating in the field. While in LA/COG Mr. Flores was called upon to do a considerable amount of TDY travel since he was on call to meet his [redacted] asset anytime, any place whenever the agent [redacted] of [redacted]. In addition to these travels, Mr. Flores did a lot of traveling seeking out and debriefing potential access agents. During this last year he clearly demonstrated his ability to function independently and to assume responsibilities usually reserved for officers much more senior in grade and experience.

5. Mr. Flores was assigned in July 1976 to OTR on a two-year rotational assignment as an operations instructor. Upon completion of this assignment, Mr. Flores will return to this Division to assume responsibilities, either at Headquarters or in the field, commensurate with his demonstrated operational and managerial talents. In recognition of Mr. Flores' outstanding agent handling skills, his overall professional competency, and his obvious growth potential, it is strongly recommended that Mr. Flores be promoted to Grade GS-13.


Raymond A. Warren

SECRET
EYES ONLY

SECRET

21 September 1976

MEMORANDUM FOR: Chief, OTR/LTD

FROM : Walter R. Cox
Chief, ALT Unit

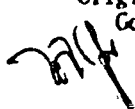
SUBJECT : Completion of Training Report
Trainee: Daniel Flores
Training Program:

1. For your information and for documentation in Daniel Flores' official personnel file, this memorandum certifies that he received the five-day SAI Persuasion Skills course at an NOCB in Arlington, Virginia, between 11 and 17 August 1976. The instructor was Mr. George Steitz.

2. Briefly, the SAI course is a program in human relations and communications effectiveness on the interpersonal level. It provides the trainee with a framework for analyzing problems usually encountered in supervisory or in agent development, recruitment, and handling situations and with a system for presenting his ideas in a way standing the best chance for success in gaining a target individual's willing acceptance. Flores was an active and most interested participant throughout the program and achieved a good understanding of the basic principles involved. A copy of his course critique is attached for your information.

3. Since Flores is an ALT Instructor, we plan to dispense with the formality of a post-training questionnaire.


Walter R. Cox


Originated by:
George W. Steitz

F-2 Impdet.
Classified by 024097.

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CTR/ALT
Staff

Trainee: Mr. Daniel Flores
Instructor: Mr. Steitz

August 1976 -

To assist us in making decisions about future SAI training or application, your answers to the following questions will be most appreciated.

1. Do you feel SAI training was helpful to you? (If you choose to do so, please explain why or how.) This course was extremely useful to me. One of the main features of the course -- how to perceive the other person's objectives before your own -- was of particular interest because, as an instructor it will be one of the main tools I will use in evaluating the level of understanding of each trainee. This experience will also be very helpful to me in my career as a case officer. I can think of several instances where SAI could have helped me turn several failures (recruitment pitches) into successes.

2. Did SAI training provide you with any concepts or tools which can be applied in a practical way to your work problems? To your personal life? Any examples you care to mention?

The benefits that this course will provide for me in my job as an instructor are clear. I am absolutely certain that putting the SAI concept into practice will bring forth not only self satisfaction but career benefits as well. This will also be very helpful to me in my personal life. I can see now that some of the concepts will be put to work immediately.

3. What elements, segments, or aspects of the SAI training were of the most interest or use to you?

The greatest revelation from an operational point of view, was the clarification of perhaps an erroneous idea we have about obtaining our intelligence objectives. I always operated under the belief that the most important thing in my work was to attain my objectives, i.e. the recruitment of an agent. SAI revealed that this is true but it also revealed that it is more important to first consider the target's (agent's) objectives. Once we do this our chances (in my opinion after taking SAI) success would probably increase by at least 90 per cent. If I were to stress one point it would be that more emphasis be placed on dealing with the target's rather than the CO's objectives.

4. Would you recommend SAI training for other of our personnel?

I am sure that many people would be recommended for this training and that all would benefit from it. However, I would strongly recommend that personnel officers be given SAI as a prerequisite to their jobs. It would certainly help them in dealing with large numbers of different people.

5. What other components or categories of personnel do you believe would benefit from SAI training to a degree making it worthwhile for them to receive it?

6. Please comment, if you have any definite opinion, on the duration and pace of the training: too long/short? too fast/slow? The pace of the course was excellent. However, adding one or two more days would certainly help in putting the SAI concepts into practice by the trainee himself. That is, perhaps a live exercise with a person who is not aware of the training situation. A trainee could be tasked to elicit information from an unwitting participant. The use of videotapes and/or movies would help in testing the trainees perceptiveness through the course.

7. Any other comments you may wish to make:

A brief comment about the instructor. He was definitely responsible for the success of the course. Mr. Steitz showed excellent knowledge of the SAI material and throughout the course kept the student's interest alive by showing tremendous enthusiasm in what he was teaching. The end result of the professionalism that Mr. Steitz demonstrated in the class is reflected in the comments stated here and in the confidence he instilled in me personally.

8. On a scale of 1 to 5, how would you rate SAI training in relation to other training you have received from the Agency? Please encircle applicable number:

Non-Essential	Slightly Helpful	Generally Helpful	Very Helpful	Essential
1	2	3	4	5
				X

C-nomen

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 25 June 1976	
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, Daniel			
3. NATURE OF PERSONNEL ACTION Reassignment <i>Change of Function?</i>			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 21 76		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS V TO V CF TO V		7. FAN AND NTCA 0175-3010 0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDA/OTR Functional Training Division Operations Training Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Instructor-Ops			12. POSITION NUMBER BD33		13. CAREER SERVICE DESIGNATION DQB
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 1712.32		16. GRADE AND STEP 12 3	
17. SALARY OR RATE \$ 20678		18. REMARKS CONCUR: <i>[Signature]</i> LA/PERS 20678206 Acknowledge of category <i>[illegible]</i> payroll security CONCUR: <i>[Signature]</i> DDO/MSB/MPC B Dir MT DQB 10 DQG			
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> Harry E. Fitzwater, DTR		DATE SIGNED 25 June 76		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i> DDO/CMG/12	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC ALPHABETIC 17500 OTR		22. STATION CODE 75013	23. EMPLOYEE CODE
24. HIRING DATE	25. SPECIAL DISTRICT	26. RETIREMENT DATA	27. SEPARATION DATA CODE	28. POSITION CANCELLATION DATA	29. SECURITY RISK
30. VET PREFERENCE	31. DATE COMP DATA	32. LONG COMP DATA	33. MERIT CATEGORY	34. PHYS. HEALTH REPORTABLE	35. SOCIAL SECURITY NO.
36. PERIODS EXCLUDED GOVERNMENT SERVICE	37. LEAVE CAT	38. PERIODS FOR DATA	39. PERIODS FOR DATA	40. PERIODS FOR DATA	41. PERIODS FOR DATA
42. APPROVALS (APPROVALS, COOPERATION) <i>[Signatures]</i>					

SECRET

FORM 100-100-100-100

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED					
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) FLORES, DANIEL					
3 NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="checkbox"/> STATUS			4 EFFECTIVE DATE REQUESTED MONTH: 09 DAY: 14 YEAR: 75		5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS V TO V C TO V		7. FAN AND NYCA 6135-4534-0000		8 LEGAL AUTHORITY (Completed by Office of Personnel)					
9 ORGANIZATIONAL DESIGNATIONS DDO/LATIN-AMERICA DIVISION CUBA OPERATIONS GROUP OPS BRANCH			10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.						
11 POSITION TITLE OPERATIONS OFFICER (14)			12 POSITION NUMBER CQ65		13 CAREER SERVICE DESIGNATION DQB				
14 CLASSIFICATION SCHEDULE (G.S. E.B. etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12 2					
17 SALARY OR RATE \$ 19,078									
18 REMARKS									
18A SIGNATURE OF REQUESTING OFFICIAL H.L. BERTHOLD, C/LA/PERS			DATE SIGNED 26 AUG 75		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>				
DATE SIGNED <i>[Signature]</i>									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE 56	20 EMPLOY CODE 10	21 OFFICE CODES 51500 LA	22 STATION CODE 10813	23 INITIALS CODE	24 MODIFIER CODE	25 DATE OF BIRTH 09/24/35	26 DATE OF GRACE MO DA YR	27 DATE OF LEI MO DA YR	
28 SET LEADER	29 SPECIAL EMPLOYEE	30 SET-LEADER DATE	31 SEPARATION DATE CODE	32 CORRECTION (AMENDMENT) DATE	EGD DATA →			33 SECURITY DS NO	34 SS
35 SET REFERRED	36 SET COMP DATE	37 LEAD COMP DATE	38 (SERIAL) CATEGORY	39 REG. PLATS (PAGES)	40 SECURITY CODE				
41 PERIODS (1-4) AS SET REFERRED (SERIAL)						42 LEAD SER	43 (SERIAL) LEAD DATE	44 (SERIAL) LEAD DATE	45 (SERIAL) LEAD DATE
46 (SERIAL) LEAD DATE						47 (SERIAL) LEAD DATE	48 (SERIAL) LEAD DATE	49 (SERIAL) LEAD DATE	50 (SERIAL) LEAD DATE
46 (SERIAL) LEAD DATE						47 (SERIAL) LEAD DATE	48 (SERIAL) LEAD DATE	49 (SERIAL) LEAD DATE	50 (SERIAL) LEAD DATE

SECRET

14-00000

D-NO

SECRET
(If Now Filled In)

REQUEST FOR PERSONNEL ACTION DATE PREPARED
10 SEPTEMBER 1974

1 SERIAL NUMBER 036130
2 NAME (Last-First-Middle) FLORES, DANIEL

3 NATURE OF PERSONNEL ACTION REASSIGNMENT
4 EFFECTIVE DATE REQUESTED MONTH 09 DAY 15 YEAR 74
5 CATEGORY OF EMPLOYMENT REGULAR

6 FUNDS
7 PAN AND NSCA 5135 4534 0000
8 LEGAL AUTHORITY (Completed by Office of Personnel)

9 ORGANIZATIONAL DESIGNATIONS
DDO/WH DIVISION
WH/COG
OPS BRANCH
10 LOCATION OF OFFICIAL STATION
WASH D.C.

40

11 POSITION TITLE OPS OFFICER
12 POSITION NUMBER 1159
13 CAREER SERVICE DESIGNATION DQB

14 CLASSIFICATION SCHEDULE (GS, LR, etc.) GS
15 OCCUPATIONAL SERIES 0136.01
16 GRADE AND STEP 12 1
17 SALARY GRADE \$17,497

18 REMARKS
From position 1134
~~Wash, D.C.~~
Wash, D.C.

19a SIGNATURE OF REQUESTING OFFICIAL H.E. BEUTHOLD D/WH/PERS
DATE SIGNED 12 SEP 74
19b SUPERVISOR'S APPROVING OFFICER [Signature]
DATE SIGNED 16 Sept 74

SPACES BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

Grid for personnel data including fields for OFFICE, EMPLOY, OFFICE CODES, STATION, ATTACHED, NUMBER, BAR OF REF., BAR OF GRAM, DATE OF HI, etc. Includes handwritten entries like '37 10', '5135001', '1 08 04 '35', and 'FOD DATA'.

42

20 SEP 74
21 [Signature]
22 [Signature]

SECRET

SECRET
(If Not Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED							
1 SERIAL NUMBER										11 July 74							
2 NAME (Last-First-Initial)																	
036130 J Flores, Daniel J																	
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT									
Reassignment						MONTH DAY YEAR 07 22 74		Regular									
6 FUNDS		V TO V		V TO CP		7. PAN AND NSCA		8 LEGAL AUTHORITY (Completed by Office of Personnel)									
CF TO V		X		CF TO CP		5 0135-4534 0000											
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION											
DDO/WH Division WH/COG Ops Support Branch						Washington, D.C.											
11. POSITION TITLE						12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION									
Ops Officer						1134		DQB									
14 CLASSIFICATION SCHEDULE (GS, FS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP		17 SALARY OR RATE									
GS			0136.01			12 1		\$ 17,497 ✓									
18 REMARKS																	
From Lima, Peru 57085 * Lima, Peru																	
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED							
H. L. Berthold, C/WH/PERS				11 July 74		Daniel J. Shelton				7/18/74							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODES		22 STATION CODE		23 INTERAG CODE		24 MOBILE CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LST	
37 10		51500		ALPHABETIC		75012				1		08 24 35					
28 BIRTH DATE		29 SPECIAL DETAILS		30 GATHERING DATA		31 SEPARATION DATA		32 CORRECTION/REGISTRATION DATA		FOD DATA →		33 SECURITY REG NO		34 SSN			
35 NET PERFORMING		36 SERV COMP DATA		37 LOAN COMP DATA		38 LABOR CATEGORY		39 HEALTH INSURANCE		40 SOCIAL SECURITY NO							
41 PREVIOUS EMPLOYMENT SERVICE		42 LEAVE LST		43 PROBATIONARY PERIOD		44 PROBATIONARY PERIOD		45 HEALTH INSURANCE		46 SOCIAL SECURITY NO							
48 APPROVAL (Signature)						49 APPROVAL (Signature)						DATE APPROVED					
[Signature]						[Signature]						1/3/74					

FORM 1137

SECRET

CLASSIFIED BY 9-4145

GROUP 1 EXCLUDED

EXPIRES 31 JUL 78

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 18 June 1974											
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES DANIEL															
3 NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 23 74		5 CATEGORY OF EMPLOYMENT REGULAR												
6 FUNDS V TO V CP TO V		V TO CP X CP TO CP		7 PAY AND GRADE 413570XY 0000		8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 SECT. 203											
9 ORGANIZATIONAL DESIGNATIONS DDO/WH <i>Division</i>				10 LOCATION OF OFFICIAL STATION LIMA, Peru													
11 POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION D												
14 CLASSIFICATION SCHEDULE (GS, FS, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 12		17 SALARY OR RATE \$											
18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.																	
19A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		19B 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 ALPHABETIC		22 STATION CODE		23 OFFICER CODE		24 MONTHS LEAVE		25 DATE OF BIRTH MO DA YR 3 08 04 35		26 DATE OF GRADE MO DA YR		27 DATE OF LEI MO DA YR	
28 NET PAYMENTS		29 SPECIAL REFERENCE		30 RETIREMENT DATA CODE 2		31 SEPARATION DATA CODE		32 CANCELLATION DATA MO DA YR		33 SECURITY REG NO		34 MS		35 EOD DATA			
36 NET PAYMENTS		38 SERV COMP DATA		37 LONG COMP DATA		39 LEAVE CATEGORY		40 HEALTH INSURANCE		41 SOCIAL SECURITY NO							
42 PERIODS (EXCLUDING LEAVES BY MONTH)		43 LEAVE CAT		44 AGENCY TAX DATA		45 STATE TAX DATA		46 STATE TAX DATA		47 STATE TAX DATA		48 STATE TAX DATA		49 STATE TAX DATA		50 STATE TAX DATA	
51 EMPLOYEE CONTRIBUTION CONTRIBUTION								52 DATE APPROVED				53 DATE APPROVED					

See memo signed by
D/Personnel dated 6/18/74

1152 USE PREVIOUS EDITIONS
FORM (1-71)

SECRET

FORM 1000 (1-71)

SECRET
(When Filled In)



REQUEST FOR PERSONNEL ACTION

DATE PREPARED
19 NOVEMBER 1973

6-53

1 SERIAL NUMBER **036130** 2 NAME (Last-First-Middle) **FLORES DANIEL**

3 NATURE OF PERSONNEL ACTION
PROMOTION

4 EFFECTIVE DATE REQUESTED
MONTH **11** DAY **25** YEAR **73**

5 CATEGORY OF EMPLOYMENT
REGULAR

6 FUNDS

V TO V	V TO CF
CF TO V	X CF TO CF

7 FAN AND NECA
4135 1084 0000

8 LEGAL AUTHORITY (Completed by Office of Personnel)

9 ORGANIZATIONAL DESIGNATIONS
**DDO/WII DIVISION
FOREIGN FIELD
BR 3 - LIMA, PERU STATION**

10 LOCATION OF OFFICIAL STATION
LIMA, PERU

11 POSITION TITLE
OPS OFFICER (12)

12 POSITION NUMBER
0136

13 CAREER SERVICE DESIGNATION
D

14 CLASSIFICATION SCHEDULE (G, I.B, etc.)
GS

15 OCCUPATIONAL SERIES
0136.01

16 GRADE AND STEP
12 1

17 SALARY OR RATE
\$ 17497

18 REMARKS
From: GS-11.4
HOME BASE: WII ** Lima Peru*

Erving V. Blanford
11/19/73

18A SIGNATURE OF REQUESTING OFFICIAL
Jane Wurz
Jane Wurz, AC/WII/Pers

DATE SIGNED
19 Nov 73

18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER
[Signature]

DATE SIGNED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC 51160 ALPHABETIC WII	22 STATION CODE 0136	23 INTELL CODE	24 MONTHS CODE 3	25 DATE OF BIRTH MO 03 DA 10 YR 1935	26 DATE OF GRADE MO 11 DA 19 YR 73	27 DATE OF LEI MO 11 DA 19 YR 73
28 WTS EXPIRES MO. DA YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA TYPE MO DA YR	33 SECURITY REG NO.	34 SEX	EOD DATA →	
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/BSSV PROV/TEMP CODE	39 FEGLI/HEALTH INSURABLE CODE	40 SOCIAL SECURITY NO.			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-90 DAYS IN SERVICE 2-90-180 DAYS IN SERVICE (LESS THAN 3 YEARS) 3-90-180 DAYS IN SERVICE (MORE THAN 3 YEARS)	42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE 1-FPS 2-BO	44 STATE TAX DATA NO TAX EXEMPTIONS FORM EXECUTED 1-FPS 2-BO					
45 POSITION CONTROL CERTIFICATION 1-23-73	46 O.P. APPROVAL <i>[Signature]</i> 29 NOV 1973	DATE APPROVED 23 Nov 73						

FORM 1152

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-0331

11 2 APR 68

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 23 Nov 71	
1. SERIAL NUMBER 036130 ✓		2. NAME (Last-First-Middle) FLORES, DANIEL ✓					
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 28 71		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V CF TO V		V TO CF X CF TO CF		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH <i>Division</i> FOREIGN FIELD BRANCH 3 - LIMA, PERU STATION				10. LOCATION OF OFFICIAL STATION LIMA, PERU			
11. POSITION TITLE OPS OFFICER (12)				12. POSITION NUMBER 0136		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 3		17. SALARY OR RATE \$ 13,457 ✓	
18. REMARKS From GS 10. 3 *LIMA, PERU.							
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i>			DATE SIGNED 23 Nov 71		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED 11/23/71
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 51760 WH		22. STATION CODE 57035	23. INTEGRAL CODE	24. BODIES CODE 3	25. DATE OF BIRTH MO. DA. YR. 02/04/33
26. DATE OF GRADE MO. DA. YR. 11/25/71	27. DATE OF LET MO. DA. YR. 11/30/71	28. SPECIAL RESERVE 1-ESC 2-ORGR 3-TICA 4-ROGR		29. RETIREMENT DATA CODE		30. SEPARATION DATA CODE	31. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.
32. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	33. SERV COMP DATE MO. DA. YR.		34. LONG COMP DATE MO. DA. YR.		35. CAREER CATEGORY CODE 1-REG 2-PROV/TIMP		36. FEGLI/HEALTH INSURANCE CODE 0-WAIVER 1-REG 2-REG/OPY 3-IRRELIABLE
37. SOCIAL SECURITY NO	38. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-50 MONTHS SERVICE 2-60 MONTHS SERVICE (LESS THAN 3 YEARS) 3-60 MONTHS SERVICE (MORE THAN 3 YEARS)	39. LEAVE CAT CODE	40. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO		41. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO		42. SOCIAL SECURITY NO
43. POSITION CONTROL CERTIFICATION <i>[Signature]</i> 11-26-71				44. O P APPROVAL <i>[Signature]</i>		DATE APPROVED 11/23/71	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

101

SECRET
(When Filled In)

**FILE
PUNCHED
BY**

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39	PERU	40-42
09	24	71					1	PERU	570

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREAS	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. **178740** DOCUMENT DATE/PERIOD **9/10/71**

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 9/14/71	SIGNATURE <i>R. S. ...</i>
C & L DIVISION CY88.		
C & T DIVISION		

**THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER**

SECRET
EYES ONLY

18 NOV 1971
Approved by CS Career
Service Panel
[Signature]

17 AUG 1971

MEMORANDUM FOR: Secretary, CSCS Panel A

SUBJECT : Recommendation for Promotion to Grade
GS-11, Daniel Flores

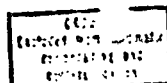
1. It is recommended that Mr. Daniel Flores be promoted from GS-10 to GS-11.

2. Mr. Flores is 36 years old and joined the Agency in March 1962. He has successively been a file clerk, translator, intelligence assistant, career trainee and operations officer. He worked part time for several years so that he could obtain his BA degree from American University. This he did in 1967 with his specialty being Latin American Affairs.

3. Mr. Flores, who is bilingual in English and Spanish, has just completed his first overseas tour as an operations officer in Guayaquil, Ecuador. It is on the basis of his very fine performance during this tour that this promotion request is based. Also as a result of his record in Guayaquil, he has been assigned to Lima Station as an operations officer in a position which is rated as GS-13.

4. The Chief of Base, Guayaquil, and the Chief of Station, Quito, both have rated Mr. Flores as "Strong" in his fitness reports and both have stated that his performance in Guayaquil merited a Quality Step Increase. This QSI request is currently being processed and is based on the outstanding job Mr. Flores did in connection with a very sensitive [redacted] operation. He planned the [redacted] aspects, supervised the installation, located the [redacted] recruited the [redacted] and processed all the intelligence which was produced. The intelligence derived from this source has been of consistently high quality and the operation has been described by the Chief of Station, Quito, as the best and most productive of all the operations in Ecuador. Throughout all aspects of the operation, Mr. Flores maintained tight control on its security and avoided any problems in this respect.

SECRET
EYES ONLY



SECRET
EYES ONLY

-2-

5. By his performance in Guayaquil, Mr. Flores has demonstrated that he has found his proper role as an operations officer and that he has potential for growth in this area of endeavor. WII Division strongly recommends that he be promoted to GS-11.

William V. Proctor
William V. Proctor
Chief
Western Hemisphere Division

SECRET
EYES ONLY

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED
1. SERIAL NUMBER 036130	2. NAME (Last-First-Middle) FLORES DANIEL				7 September 1971
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 / 14 / 71	5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V CF TO V		V TO CF X CF TO CF		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084	8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 LIMA, PERU STATION			10. LOCATION OF OFFICIAL STATION LIMA, PERU		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0136	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS	15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 10 3	17. SALARY OR RATE \$ 12235	
18. REMARKS <p><i>From DDP/WH #0376</i> <i>Vice Donald Venute</i> <i>Approved 259a attached.</i></p> <p>From 259a: Mr. Flores' Spanish capabilities are native reading and high speaking which more than meet the language requirements of intermediate reading and speaking for the Station.</p> <p style="text-align: right; border: 1px solid black; border-radius: 50%; padding: 5px;"><i>HB:WH</i></p>					
18A. SIGNATURE OF REQUESTING OFFICIAL <i>Henry L. Berthold</i>		DATE SIGNED 9/17/71		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Daniel Flores</i>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 51000 607		22. STATION CODE 57015	23. INTEGRAL CODE
24. BTE EXPIRES MO. DA. YR. XX/XX/XX	25. SPECIAL REFERENCE	26. RETIREMENT DATA CODE		27. SEPARATION DATA CODE	28. CORRECTION LABELLATION DATA EOD DATA →
29. VET PREFERENCE CODE	30. SERV COMP DATE MO. DA. YR.	31. LONG COMP DATE MO. DA. YR.	32. CAREER CATEGORY CODE	33. FEGLI HEALTH INSURANCE CODE	
34. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE			35. LEAVE CAT CODE	36. FEDERAL TAX DATA CODE	
37. POSITION CONTROL CERTIFICATION			38. DATE OF APPROVAL		39. DATE APPROVED

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

21 JULY 1970

1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL
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3 NATURE OF PERSONNEL ACTION PROMOTION	4 EFFECTIVE DATE REQUESTED MONTH: 07 DAY: 26 YEAR: 70	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS V TO V CF TO V X	V TO CF CF TO CF	7 FINANCIAL ANALYSIS NO CHARGEABLE 1135 0884	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 STATION BASE	10 LOCATION OF OFFICIAL STATION
--	---------------------------------

11 POSITION TITLE OPS OFFICER (09)	12 POSITION NUMBER 0376	13 CAREER SERVICE DESIGNATION D
---------------------------------------	----------------------------	------------------------------------

14 CLASSIFICATION SCHEDULE (GS, EB, SN.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 10 2	17 SALARY OR RATE \$ 11,231
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18 REMARKS

* PRA NTE TWO YEARS IN ACCORDANCE WITH HR 20-17d(1)(a).
FORMERLY A GS-9-3, \$10539

18A SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD	DATE SIGNED 21 July 70	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	DATE SIGNED
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES	22 STATION CODE	23 HIRING CODE	24 REGION CODE	25 DATE OF BIRTH	26 PART OF GRADE	27 DATE OF LEI
28 SPECIAL AGENT	29 SPECIAL AGENT	30 SPECIAL AGENT	31 SPECIAL AGENT	32 SPECIAL AGENT	33 SPECIAL AGENT	34 SPECIAL AGENT	35 SPECIAL AGENT	36 SPECIAL AGENT
37 SPECIAL AGENT	38 SPECIAL AGENT	39 SPECIAL AGENT	40 SPECIAL AGENT	41 SPECIAL AGENT	42 SPECIAL AGENT	43 SPECIAL AGENT	44 SPECIAL AGENT	45 SPECIAL AGENT

FOOD DATA

1112

SECRET

SECRET
EYES ONLY

Approved for Career
Security Panel
27 JUN 1970

2 JUN 1970

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

SUBJECT : Recommendation for Promotion to Grade
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-9 to GS-10. Mr. Flores has been in his present grade since April 1969.

2. Mr. Flores joined the Agency in 1962. Initially he was employed on a part-time basis in the WH Division while attending American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the WH Division, he was selected for assignment as an operations officer at the [redacted] Base, where he arrived in May 1969.

3. Mr. Flores has made a most impressive beginning in [redacted]. He has adapted to new tasks and a new environment with a mature assurance and a professional approach. Shortly after arrival in [redacted] the Base was temporarily depleted of other officers. Mr. Flores carried out the duties of acting Chief of Base in a most commendable manner. His fluency in Spanish and his Latin background have been definite assets in the performance of his duties. His performance to date has demonstrated that he handles his agents securely and productively. Both Mr. Flores and his wife have been well accepted within the local community and they carry out their representational duties very effectively.

4. Mr. Flores has proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level higher than his present grade and a promotion at this time is strongly recommended.

William V. Broe
William V. Broe
Chief
Western Hemisphere Division

SECRET
EYES ONLY

DISPATCH

CLASSIFICATION
SECRET

TO: Chief, WI Division

FROM: Chief of Station, Quito

FROM: Chief of Base, [redacted]

SUBJECT: ADMINISTRATIVE/PERSONNEL - Promotion for [redacted]

ACTION REQUIRED - REFERENCES

ACTION REQUIRED: See Below

Approved by CS Career
Service Panel
17 JUL 1970

JAMES FLORES

During the visit of the Chief, WID to the Base last November 1969 he mentioned to the COS, Quito and the COB that the promotion for ^{Flores} [redacted] (from GS-9 to GS-10) would be forthcoming; he also said this to ^{Flores} [redacted] during a private meeting. Thus far, however, there has been no notice of the promotion action. The COB assumes that the delay is related in some way to the dates set for meeting of the promotion panel for ^{Flores} [redacted] grade. If this assumption is not correct, however, and some further action by the Base is necessary in addition to the recommendation contained in ^{Flores} [redacted] last Fitness Report, the COB would appreciate being advised.

[Signature]
1st Robert L. Fambriani

Distribution:
Orig. & 2 - C/WID
2 - COS, Quito

DISPATCH TO

DISPATCH SYMBOL AND NUMBER

DATE

HEST-1474

26 May 1970

CLASSIFICATION

POST FILE NUMBER

SECRET
SECRET

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

9 APRIL 1969

1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL
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3 NATURE OF PERSONNEL ACTION	4 EFFECTIVE DATE REQUESTED MONTH: 04, DAY: 10, YEAR: 69	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS	7 FINANCIAL ANALYSIS NO CHARGEABLE 9135 0884	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 STATION Base	10 LOCATION OF OFFICIAL STATION Ft. Belknap
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11 POSITION TITLE OPS OFFICER	12 POSITION NUMBER 0376	13 CAREER SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (GS, F.R., etc.) GS	15 OCCUPATIONAL SERIES 0138.01	16 GRADE AND STEP CG 2	17 SALARY OR RATE \$ 8744
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18 REMARKS
 X ALL SICK AND LEAVE HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE
 X MARITAL STATUS: MARRIED

DATE SIGNED	18a SIGNATURE OF CAREER SERVICE APPROVING OFFICER X5013	DATE SIGNED
-------------	--	-------------

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 55	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 51700, ALPHABETIC: JWH	22 STATION CODE 19559	23 INTEGRIS CODE	24 MOOTPS CODE 3	25 DATE OF BIRTH MO: 08, DA: 4, YR: 35	26 DATE OF GRADE MO: , DA: , YR:	27 DATE OF LET MO: , DA: , YR:
28 RET EXPIRES MO: , DA: , YR:	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA	EOD DATA	33 SECURITY REG NO	34 SER	
35 RET PREFERENCE CODE: 0-NONE, 1-5 YR, 2-10 YR	36 SERV COMP DATE MO: , DA: , YR:	37 LONG COMP DATE MO: , DA: , YR:	38 CAREER CATEGORY CODE: , PAY PLAN:	39 FICA HEALTH INSURANCE CODE: , B-WAIVE: , HEALTH INS CODE:	40 SOCIAL SECURITY NO			
41 PERIODS FULFILLED GOVERNMENT SERVICE CODE: 0-NONE, 1-50 YEARS, 2-50 TO 99 YEARS, 3-100 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	46 OP APPROVAL C42469/WR Came B. Russell	DATE APPROVED C42469
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SECRET
(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 3 April 1969	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL				
3 NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO BY FUNDS, AND CHANGE OF SERVICE DESIGNATION			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 06 69		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CF TO V	X V TO CF	CF TO CF	7 FINANCIAL ANALYSIS NO CHARGEABLE 9135 0884		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDP7WH FOREIGN FIELD BRANCH #3			10 LOCATION OF OFFICIAL STATION STATION BASE		
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER (07) 0376	13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (G.S. LB, etc.) GS	15 OCCUPATIONAL SERIES 0136,01	16 GRADE AND STEP 09 2	17 SALARY OR RATE \$ 8744		
18 REMARKS APPROVED 259a ATTACHED. FROM: DDP/WH/Branch 4/Pos. 1441. GS-08, step 2, \$7956/annum. I CONCUR IN CHANGE OF SERVICE DESIGNATION FROM SJ TO D: <i>(Signed on original) 3 Apr 69</i> CONCUR: Arthur McNeil (initials) OTR/PERS					
18A SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD		DATE SIGNED 3 APR 69	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Arthur McNeil</i>		DATE SIGNED 4 APR 1969
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 20	20 EMPLOY CODE 10	21 OFFICE CODING SYMBOLIC ALPHABETIC 5170 WH		22 STATION CODE A559	23 INT-GRADE CODE
24 HOOURS CODE 3	25 DATE OF BIRTH MO DA YR 08/04/35		26 DATE OF GRADE MO DA YR 04/06/69		27 DATE OF LET MO DA YR 04/06/67
28 NTE EXPRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE MO DA YR EOD DATA	
33 NET PREFERENCE CODE	34 SERV COMP DATE MO DA YR	35 LONG COMP DATE MO DA YR	36 CAREER CATEGORY LAB RESP PROB TEMP CODE	37 FEGLI HEALTH INSURANCE CODE	38 SOCIAL SECURITY NO
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXEMPTED CODE		44 STATE TAX DATA FORM EXEMPTED CODE
45 POSITION CONTROL CERTIFICATION	46 OF APPROVAL <i>[Signature]</i>			DATE APPROVED 4 APR 69	

55

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37

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION	DATE PREPARED 23 SEPTEMBER 1968
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1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL
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3 NATURE OF PERSONNEL ACTION REASSIGNMENT	4 EFFECTIVE DATE REQUESTED MONTH: 10 DAY: 06 YEAR: 68	5 CATEGORY OF EMPLOYMENT REGULAR
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6 FUNDS XX V TO V CF TO V	7 FINANCIAL ANALYSIS NO CHARGEABLE 9235 0620	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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6
31

9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 4 SECTION	10 LOCATION OF OFFICIAL STATION WASH., D. C.
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11 POSITION TITLE Ops Officer CAREER TRAINING	12 POSITION NUMBER 1441	13 CAREER SERVICE DESIGNATION SJ
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14 CLASSIFICATION SCHEDULE (GS, J, R, etc.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 08 2	17 SALARY OR RATE \$7,956
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18. REMARKS

FROM: DDS/OTR/CAREER TRAINING PROGRAM/0748

Security
CONCUR: OTR/CTP

1 - Finance
1 - Security

18A SIGNATURE OF REQUESTING OFFICER HENRY L. BERTHOLD C/WH/PERSONNEL	DATE SIGNED 24 Sep 68	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER Arthur T. McNeill, C/CTP	DATE SIGNED
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 51450 ALPHABETIC: WH	22 STATION CODE 9235	23 INTEGREE CODE	24 HQ/PTS CODE 1	25 DATE OF BIRTH MO: 08 DA: 10 YR: 135	26 DATE OF GRADE MO: DA: YR:	27 DATE OF LES MO: DA: YR:	
28 BTE EXPRES MO DA YR		29 SPECIAL REFERENCE 1-01 2-02 3-03 4-04	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA MO DA YR	EOD DATA →		33 SECURITY REG NO.	34 SEX
35 VET PREFERENCE CODE 0-None 1-1 YR 2-10 YR		36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY LAW RES PROP TYP	39 FEDERAL HEALTH INSURANCE CODE CODE 0-BAIPE 1-YES	40 SOCIAL SECURITY NO			

41 PERIODS (FEDERAL GOVERNMENT SERVICE) CODE 0-NO PERIODS SERVICE 1-00 YEARS 0 MONTHS 2-00YR 0 MONTHS (UP TO 3 YEARS) 3-00YR 0 MONTHS (MORE THAN 3 YEARS)	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO	44 STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	45 POSITION CONTROL CERTIFICATION	46 APPROVAL DATE
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Arthur T. McNeill

Henry L. Berthold

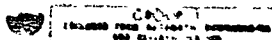
SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED									
1 SERIAL NUMBER 736130				2 NAME (Last-First-Middle) FLORES, Daniel									
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE REQUESTED MONTH: 05 DAY: 15 YEAR: 68		5 CATEGORY OF EMPLOYMENT REGULAR								
6 FUNDS XX V TO V CF TO V		7 FINANCIAL ANALYSIS NO. CHARGEABLE 8275 2100		8 LEGAL AUTHORITY (Completed by Office of Personnel)									
9 ORGANIZATIONAL DESIGNATIONS DCG/OTR CAREER TRAINING PROGRAM			10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.										
11 POSITION TITLE CAREER TRAINEE			12 POSITION NUMBER 0748		13 CAREER SERVICE DESIGNATION SJ								
14 CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS		15 OCCUPATIONAL SERIES 0090.01		16 GRADE AND STEP 08 2		17 SALARY OR RATE \$ 7630							
18 REMARKS													
18A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER Arthur T. McNeill Arthur T. McNeill, C/CTP		DATE SIGNED 6/13/68						
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 08300 ALPHABETIC: CTP		22 STATION CODE 75013	23 INTEGRAL CODE	24 NOTES CODE /		25 DATE OF BIRTH MO: 08 DA: 04 YR: 35		26 DATE OF GRADE MO: DA: YR:		27 28% OF LES MO: DA: YR:	
28 WFE EXP-RES MO: DA: YR:		29 SPECIAL REFERENCE	30 RETIREMENT DATA CODE		31 SEPARATION DATA CODE	32 CORRECTION CANCELLATION DATA TYPE: MO: DA: YR:		EOD DATA →		33 SECURITY EVS OR	34 LES		
35 WFE PREFERENCE CODE: 0-0000 1-1 FT 2-10 FT		36 SERV COMP DATE MO: DA: YR:		37 LONG COMP DATE MO: DA: YR:		38 CAREER CATEGORY JOB RES: CODE PROJ TEMP:		39 LEGAL HEALTH IMPAIRMENT CODE: 0-BARRIER 1-WI		40 SOCIAL SECURITY NO.			
41 PERIODS (FEDERAL 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 TAB DATA FORM EXECUTED: CODE 1-YES 2-NO			44 STATE TAB DATA FORM EXECUTED: CODE 1-YES 2-NO					
45 POSITION CONTROL CERTIFICATION RC 6/13/68					46 O.P. APPROVAL Edmund McManis			DATE APPROVED 6/13/68					

FORM 1152 USE PREVIOUS EDITIONS

SECRET



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED			
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) FLORES, Daniel				28 November 1967	
3 NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 22 67		5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS XX V TO V CF TO V		7 FINANCIAL ANALYSIS NO CHARGEABLE 8275 2100		8 LEGAL AUTHORITY (Completed by Office of Personnel)					
9 ORGANIZATIONAL DESIGNATIONS DDS/OTR CAREER TRAINING PROGRAM				10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.					
11 POSITION TITLE CAREER TRAINEE			12 POSITION NUMBER 0 748		13 CAREER SERVICE DESIGNATION SJ				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0090.71		16 GRADE AND STEP 07 22		17 SALARY OR RATE \$ 6,877 6,957			
18 REMARKS From: DDP/WH/COG/Intelligence Branch/Operations Support Section, #1174. Subject has concurred in Change of Service Designation from D to SJ. CONCUR: <u>Henry L. Berthold</u> Chief, WH Personnel Security Approval Officer: <u>John Richardson</u> , DTR Date: 12/25/67 See #1174/67									
18A SIGNATURE OF REQUESTING OFFICIAL Robert B. Freeman, C/CTP			DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER John Richardson, DTR		DATE SIGNED 11/28/67		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE 22	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 28300 CTP	22 STATION CODE 76013	23 INTEGRAL CODE	24 MOBILE CODE 1	25 DATE OF BIRTH MO DA YR 08 04 35	26 DATE OF GRADE MO DA YR 12 17 67	27 DATE OF LEI MO DA YR 12 17 67	
28 WTE EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-FC 2-OCG 3-FIC 4-BOE	31 SEPARATION DATA CODE	32 CORRECTION (CANCELLATION) DATA TYPE MO DA YR	EOD DATA		33 SECURITY REG NO	34 SER	
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 CODE	39 FEGLI HEALTH INSURANCE CODE 0-NONE 1-91	40 SOCIAL SECURITY NO				
41 PREVIOUS FEDERAL GOVERNMENT SERVICE CODE 0-NONE 1-NO SERVICE 2-SERVE (5 YEARS - 10 YEARS) 3-SERVE (10 YEARS - 20 YEARS)		42 LEAVE EST CODE	43 FEDERAL TAX DATA FORMS FILED CODE 1-YES 2-NO	44 STATE TAX DATA FORMS FILED CODE 1-YES 2-NO	45 STATE TAX DATA CODE AND TAX STATE CODE				
46 POSITION CONTROL CERTIFICATION Rf 12-2-67				46 O.P. APPROVAL Michael Pauljak 11/20/67		DATE APPROVED			

FORM 1152 USE PREVIOUS EDITION

SECRET

GPO : 1967 O - 348-000

CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

THROUGH : Executive Secretary
CSCT Selection Board

SUBJECT : Application for Career Training Program

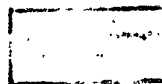
1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.

2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.

3. Should you have any further questions, do not hesitate to call on the Program Officers.

ROBERT B. FREEMAN
Chief, CTP

CONFIDENTIAL



SECRET
(If Not Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 3, August 1967	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES DANIEL				
3 NATURE OF PERSONNEL ACTION PROMOTION & PAY ADJUSTMENT TO FULL TIME (CORRECTION)			4 EFFECTIVE DATE REQUESTED <i>01/07/67</i>		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS <input checked="" type="checkbox"/> X <input type="checkbox"/> V TO V <input type="checkbox"/> V TO C <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO C	7 FINANCIAL ANALYSIS NO. CHARGEABLE 8235 0620		8 LEGAL AUTHORITY (Completed by Office of Personnel)		
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION			10 LOCATION OF OFFICIAL STATION WASH., D. C.		
11 POSITION TITLE INTELLIGENCE ASST		12 POSITION NUMBER 1174	13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (G.S. I.B. etc.) GS		15 OCCUPATIONAL SERIES 0301.28	16 GRADE AND STEP 06 3	17 SALARY OR RATE \$ 6263. ✓	
18 REMARKS FINANCIAL ANALYSIS NO. (#7) TO READ: 8235 0620					
19A NAME OF APPROVING OFFICER Henry LV Berthold C/WH/PERS		DATE SIGNED <i>5/11/67</i>	19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Russell Graham</i>		DATE SIGNED <i>5/11/67</i>
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 MONTHS 1967	20 EMPLOY 1967	21 OFFICE LOCATION 1967	22 STATION 1967	23 OFFICER 1967	24 DATE OF BIRTH 1967
25 DATE OF ENTRY 1967	26 DATE OF DEPARTURE 1967	27 DATE OF REENTRY 1967	28 DATE OF RESIGNATION 1967	29 DATE OF REEMPLOYMENT 1967	30 DATE OF REENTRY 1967
31 DATE OF REENTRY 1967	32 DATE OF REENTRY 1967	33 DATE OF REENTRY 1967	34 DATE OF REENTRY 1967	35 DATE OF REENTRY 1967	36 DATE OF REENTRY 1967
EOO DATA →					

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SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED				
036130				22 June 1967				
1 SERIAL NUMBER		2 NAME (Last-First-Middle)		4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT		
036130		FLORES DANIEL		07 30 67		REGULAR PART-TIME		
3 NATURE OF PERSONNEL ACTION				7 FINANCIAL ANALYSIS NO CHARGEABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel)		
PROMOTION + Pay Adjustment to Full Time				8235 1162				
6 FUNDS		9 ORGANIZATIONAL DESIGNATIONS		10 LOCATION OF OFFICIAL STATION				
X		DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION		WASH., D.C.				
11 POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION		
INTELLIGENCE CLERK asst (7)				1174		D		
14 CLASSIFICATION SCHEDULE (G.S. I.B. etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE		
GS		0301.28		06 3		\$ 6263.		
18 REMARKS								
Subject is returning to full-time duty on ³⁰ July 1967. Subject will graduate from Georgetown Univ. this month.								
19a SIGNATURE OF OFFICER				DATE SIGNED		19b SIGNATURE OF CAREER SERVICE APPROVING OFFICER		
Robert D. Cashman C/WH/Pers				28 June		[Signature]		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES	22 STATION CODE	23 PAYABLE CODE	24 MODIFIER CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LHI
22	10	43800	7503		1	08/04/32	02/30/67	02/30/67
28 BIT SERIES	29 SPECIAL EMPLOYMENT	30 SPECIAL DATA	31 SEPARATION DATA CODE	32 COLLECTION CANCELLATION DATA	[OD DATA]			33 SECURITY
								100 00
34 NET PERFORMANCE	35 NEW EMP DATE	36 LONG LEAF DATA	37 LABOR CATEGORY	38 FEELI RESULT (FORMABLE)	39 SOCIAL SECURITY NO.			
40 PREVIOUS EMPLOYMENT	41 LEAF DATA	42 FEELI DATA	43 FEELI DATA	44 FEELI DATA	45 SOCIAL SECURITY NO.			
46 SIGNATURE OF APPROVING OFFICER								
[Signature]								

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July 24

MEMORANDUM FOR: Secretary CSCS Panel, Section D

SUBJECT : Recommendation for the Promotion of Mr.
Daniel Flores From GS-05 to GS-06.

1. Mr. Flores has been working in WH/COG and its predecessor groups since 1963. His fitness reports have been consistently good and the comments of his supervisors laudatory. In mid-1965 Mr. Flores was changed from full-time to part-time staff employee in order to allow him to attend American University on a full-time basis. His course of study leads to a Bachelor's Degree in Political Science with emphasis in Latin American affairs. Mr. Flores has made the Dean's List the past two semesters and will receive his degree in August 1967.

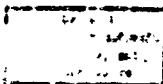
2. Throughout his career Mr. Flores has shown himself to be a strongly motivated employee, willing and capable. The calibre of his performance has been consistently good and he has shown steady improvement as he acquired the skills and knowledge of intelligence business. He is reliable and conscientious and we have good reason to expect that he will develop into a very competent operations officer. He will apply for the CT program in September and his application will be wholeheartedly supported by WH/COG.

3. In WH/COG Mr. Flores has served as an Intelligence Assistant in support of CI operations. In addition he has assisted in the training of agents in communications. Mr. Flores is bi-lingual - Spanish and English - and is adept as an operational Translator-Interpreter.

4. Mr. Flores was promoted to GS-05 on 16 March 1964. He has been performing duties at GS-06 level for the past two years and it is sincerely recommended that he be promoted promptly to GS-06.

William V. Broo
William V. Broo
Chief
Western Hemisphere Division

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(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
1 SERIAL NUMBER 036130				2 NAME (Last-First-Middle) FLORENZ MANTER			
3 NATURE OF PERSONNEL ACTION RECALL PROMOTION				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08/15/66		5 CATEGORY OF EMPLOYMENT PART TIME	
6 FUNDS X		V TO V		V TO CF		7 COST CENTER NO CHARGE 7235 1162	
CF TO V		CF TO CF		8 LEGAL AUTHORITY (Completed by Office of Personnel)			
9 ORGANIZATIONAL DESIGNATIONS TOP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION				10 LOCATION OF OFFICIAL STATION WASH., D.C.			
11 POSITION TITLE INTELLIGENCE CLERK (S)				12 POSITION NUMBER 1176		13 CAREER SERVICE DESIGNATION d	
14 CLASSIFICATION SCHEDULE (GS, FS, etc.) GS		15 OCCUPATIONAL SERIES 0301.27		16 GRADE AND STEP GS 4		17 SALARY OR RATE \$ 5859.	
18 REMARKS From: WH/C.Intel Br., R & R Sec.DC # 1181							
19A SIGNATURE OF REQUESTING OFFICER Robert W. Gasham, CAT/Per				DATE SIGNED 14 Sept 66		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER Vicki ...	
DATE SIGNED 11/1/66							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE 37 20		20 EMPLOY CODE 51500		21 OFFICE CODING NUMERIC ALPHABETIC WH		22 STATION CODE 5803	
23 INTEGRAL CODE		24 MOBILE CODE		25 DATE OF BIRTH MO DA YR 08/01/35		26 DATE OF GRADE MO DA YR	
27 DATE OF LEI MO DA YR		28 RETIREMENT DATA 1-CM 2-FICA 3-BOSS		29 SEPARATION DATA CODE		30 CORRECTION CANCELLATION DATA MO DA YR	
31 SECURITY REG NO		32 SEN		33 VET PREFERENCE 1-None 2-10 PT 3-10 PT		34 SERV COMP DATE MO DA YR	
35 LONG COMP DATE MO DA YR		36 CAREER CATEGORY LAB SERV PROV TEMP		37 FEET HEALTH INSURANCE CODE 0 1-YES		38 SOCIAL SECURITY NO	
39 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)		40 LEAVE EST CODE		41 FEDERAL TAX DATA FORM FILED CODE 1-YES 2-NO		42 STATE TAX DATA CODE 1-YES 2-NO	
43 POSITION CONTROL CERTIFICATION 09-19-66				44 LSP APPROVAL Mitt		DATE APPROVED	

FORM 1152 USE PREVIOUS EDITIONS

SECRET

STANDARD FORM NO. 64 (REV. 5-22-64)

SECRET
(When Filled In)

9 September 1966

MEMORANDUM FOR: **Mr. Daniel Flores**

THROUGH : Head of ~~CS~~ Career Service

SUBJECT : Notification of Non-eligibility for Designation as a
Participant in the CIA Retirement and Disability System

1. As you may know, we are in the process of reviewing the employment history and current career field of all employees in the Agency to identify those who are eligible for designation as a participant in the new CIA Retirement and Disability System. In this process, the initial review of each case is made by the individual's Career Service. If the Head of his Career Service nominates him for participation in the System, this nomination is reviewed by the CIA Retirement Board which recommends final action to me. However, if the Head of the Career Service advises that the employee does not meet the basic requirements of HR 20-50 for participation, I have accepted this finding without further review by the CIA Retirement Board. This practice has been adopted in the interest of expediting this screening process so that those employees who are eligible to participate in the System may be designated participants as soon as possible.

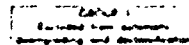
2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. This in no way affects your current status under the Civil Service Retirement System, nor does it preclude reconsideration of your eligibility to participate in the CIA System if you should meet the requirements for designation in the future.

3. Should you desire further information concerning the requirements for designation as a participant in the CIA Retirement System, I suggest that you read paragraph e of HR 20-50 and paragraph 5 of the Employee Bulletin dated 30 July 1965, entitled "Public Law 88-643, The Central Intelligence Agency Retirement Act of 1964 for Certain Employees."

4. It is always possible that the records upon which the determination made in your case may have been incomplete or inaccurate regarding your actual employment history with the Agency. If, after studying the materials cited above, you have questions regarding the determination that you are not eligible to participate in the CIA Retirement System, please feel free to contact officials of your Career Service. They are familiar with the details of your case and will gladly discuss them with you. In addition, you may wish to discuss your case with the CIA Retirement Staff located in Room 205, Magazine Building (extension 2847). If such discussions do not resolve any questions you have regarding your eligibility, you may request that your case be formally considered by the CIA Retirement Board. However, this request must be made within 30 days of the date of this memorandum.


Emmett D. Echols
Director of Personnel

SECRET



SECRET

CENTRAL INTELLIGENCE AGENCY
WASHINGTON, D.C. 20505

17 JAN 1966

Claimant: Daniel Flores
File No.: 7000438

Mr. Wilfred J. Harren
Chief of Section
Division of Claims Services
Bureau of Employees' Compensation
Washington, D. C. 20211

Dear Mr. Harren:

Reference is made to Subject's claim for benefits of the
Federal Employees' Compensation Act.

Enclosed is additional information submitted by claimant.

If we may be of further assistance in this matter, please
so advise.

Very truly yours,

/s/ B. DeFelice

B. DeFelice
Office of Personnel

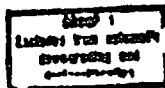
Enclosures:

As stated

Distribution:

O-addressee, 1-D/Pers, 1-BCB
OP/BSD/BCB/KLowden:sl(14 January 1966)

SECRET



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED				
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLETCHER, Daniel				13 August 1965				
3 NATURE OF PERSONNEL ACTION TRANSFERENCE			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 1 1655		5 CATEGORY OF EMPLOYMENT Part Time					
6 FUNDS X V TO V CF TO V		V TO CF CF TO CF		7 COST CENTER NO CHARGE ABLE 6235-1162		8 LEGAL AUTHORITY (Completed by Office of Personnel)				
9 ORGANIZATIONAL DESIGNATIONS DEP/WH WH/C Intelligence Branch Reports and Requirements Section				10 LOCATION OF OFFICIAL STATION Washington, D.C.						
11 POSITION TITLE INTELLIGENCE ANALYST (1)			12 POSITION NUMBER 1134		13 CAREER SERVICE DESIGNATION D					
14 CLASSIFICATION SCHEDULE (GS, LH, etc) GS (06)		15 OCCUPATIONAL SERIES 0301.27		16 GRADE AND STEP 05 (3)		17 SALARY OR RATE \$ 5330				
18 REMARKS From: DEP/WH/CI St., #1130, D.C.										
18A SIGNATURE OF REQUESTING OFFICIAL Robert D. Christian, CAP/WH/CI			DATE SIGNED 13 Aug 65		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER K. G. ...		DATE SIGNED 8/20/65			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE 37	20 EMPLOY CODE 20	21 OFFICE CODING NUMERIC ALPHABETIC 51501 WH		22 STATION CODE 75315	23 INTEGREE CODE	24 HDQTRS CODE 1 02 04 135		25 DATE OF BIRTH MO DA YR	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-ESC 2-FILE 3-NONE		31 SEPARATION DATA CODE	32 CORRECTION, CANCELLATION DATA TYPE MO DA YR		33 SECURITY REQ NO		34 SEX	
35 NET POSSESSIONS CODE 0-NONE 1-5 FT 2-10 FT		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY (AR RESV PROV TEMP)		39 FEGLI HEALTH INSURANCE CODE CODE 0-WAIVER 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 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 STATE CODE EXEMP			
45 POSITION CONTROL CERTIFICATION 9-20-65 WJL					46 OP APPROVAL K. G. ...			DATE APPROVED 8/20/65		

Recorded by
CSPD
CJM

EOD DATA

SECRET
(If Not Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

15 January 1965

1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel	
3 NATURE OF PERSONNEL ACTION PAY ADJUSTMENT (TO PART TIME) FROM FULL TIME			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 08 65
5 CATEGORY OF EMPLOYMENT REGULAR (PART TIME)			6 FUNDS X V TO V CF TO V
7 COST CENTER NO CHARGE-ABLE 5235-1162			8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DPP Special Affairs Staff Counter-Intelligence Staff Operations Section		10. LOCATION OF OFFICIAL STATION Washington, D.C.	
11 POSITION TITLE INTELLIGENCE ASST. (D)		12 POSITION NUMBER 1130	13 CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (G.S. 1 B, etc.) GS (35)	15 OCCUPATIONAL SERIES 0301.23	16 GRADE AND STEP 05 (2)	17 SALARY OR RATE \$ 5165

18 REMARKS

Subject to work on regularly scheduled tour not to exceed 19 hours per week.
Subject will be working Monday through Friday, from 1400 to 1700.

Recorded by
CSPD
am

Approved by Edm. CSPD

18A SIGNATURE OF REQUESTING OFFICIAL <i>Robert D. Cashman</i> ROBERT D. CASHMAN, C/WH/Pers.	DATE SIGNED 12/2/65	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>N. D. ...</i>	DATE SIGNED 2/2/65
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

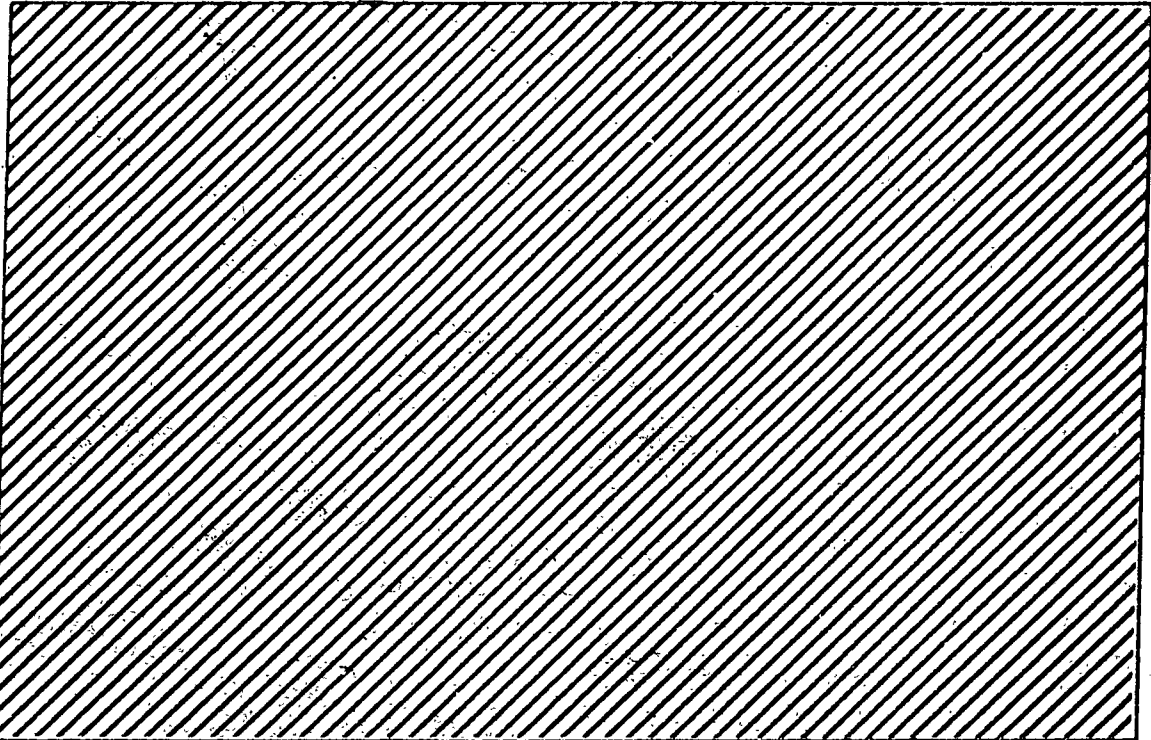
19. ACTION CODE 38	20 EMPLOY CODE 36	21 OFFICE CODING NUMERIC ALPHABETIC 42/160 14-3	22 STATION CODE 25013	23 INTEGRATE CODE	24 MONTHS CODE 1	25 DATE OF BIRTH MO. DA. YR. 03/10/35	26 DATE OF GRADE MO. DA. YR. 03/16/64	27 DATE OF LEI MO. DA. YR. 03/16/64
28. HTE EXPIRES MO. DA. YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-CSC 2-FICA 3-NONE	31 SEPARATION DATA CODE	32 CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.	EOD DATA →		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 RELY PROV TEMP	39 FEDERAL HEALTH INSURANCE CODE 0-NONER 1-YES	40 SOCIAL SECURITY NO			
41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO DEBAR IN SERVICE 2-DEBAR IN SERVICE (LESS THAN 3 YEARS) 3-DEBAR IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE MO. TAX EXEMPTIONS		44 STATE TAX DATA FORM EXECUTED CODE MO TAX EXEMPTIONS			
45 POSITION CONTROL CERTIFICATION <i>J. J. Keaney 02/05/65</i>			46 OFF APPROVAL <i>N. D. ...</i>			DATE APPROVED		

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) Florus, Daniel	NAME AND RELATIONSHIP OF DEPENDENT* Self	CLAIM NUMBER 65-514
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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 3 September 1964.

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 12 JUN 1965	SIGNATURE OF BAO REPRESENTATIVE <i>B. De Felice</i>
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

6 January 1965

MEMORANDUM FOR: Chief, CSPO

SUBJECT : Conversion to Part-Time Staff Employment
Mr. Daniel Flores

1. Mr. Daniel Flores is an Intelligence Assistant, GS-07, assigned to the CI Staff of WH/SA. He is currently pursuing a program of studies in Government at the American University with special concentration on Latin American Affairs. To complete the major portion of his remaining requirements for the bachelor's degree, he is planning to attend the University full-time for a year. Any requirements still outstanding at the end of that period would be completed at night.

2. The employee's duties in the CI Staff involves the translation of [] messages received from and sent to [] assisting in the training of [] in [] and communications procedures, and miscellaneous support functions in the CI Branch. He has proved invaluable because he has native fluency in every-day Spanish and is familiar with [] and communication techniques, problems, and training procedures. In addition to Mr. Flores' utility for such cases as may arise in the future, he is personally acquainted with [] of the [] now in place [] and with the numerous problems which constantly arise in their handling.

3. In view of the need for Mr. Flores' services, the Chief, CI Staff, has asked the employee if he would be willing to continue in his present capacity on a part-time basis. The employee has indicated that he would accept such an arrangement. It is accordingly requested that WH/SA be permitted to convert him from a full-time staff employee to one employed on a part-time, regular tour of duty basis. Subject would be utilized for a total of 18 hours per week, the maximum time that his school program will permit him to devote to Agency duties.


Robert D. Cashman
C/WH/Personnel

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

22 July 1964

1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, Daniel
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3 NATURE OF PERSONNEL ACTION Reassignment	4 EFFECTIVE DATE REQUESTED MONTH: 07 DAY: 15 YEAR: 1964	5 CATEGORY OF EMPLOYMENT Regular
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6 FUNDS X V TO V CF TO V	V TO CF CF TO CF	7 COST CENTER NO. CHARGEABLE 5235-1162	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS DDP SAS Counter-Intell Staff Operations Section	10 LOCATION OF OFFICIAL STATION Wash., D.C.
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11 POSITION TITLE Intelligence Asst	12 POSITION NUMBER 1130	13 CAREER SERVICE DESIGNATION D
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14 CLASSIFICATION OF SERVICE (GS, LH, etc.) GS	15 OCCUPATIONAL SERIES 0301.28	16 GRADE AND STEP 05 (2)	17 SALARY OR RATE \$ 4850
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18 REMARKS
From: SAS No. 0922 Tracy 37F

Recorded by
CSPD
[Signature]

18A SHOWING OFFICIAL'S OFFICE ROBERT D. CASHMAN C/WH/Pers	DATE SIGNED 27 July 1964	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	DATE SIGNED 31 July 1964
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

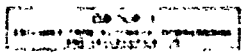
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC: 49150 ALPHABETIC: 525	22 STATION CODE 74013	23 INTEGRATE CODE 1	24 HOURS CODE 0810155	25 DATE OF BIRTH MO: 08 DA: 15 YR: 1935	26 DATE OF GRADE MO: 07 DA: 15 YR: 1964	27 DATE OF LIT MO: 07 DA: 15 YR: 1964
28 NET EFFICIENCY MO: 07 DA: 15 YR: 1964	29 SPECIAL ABILITY	30 RETIREMENT DATA 1-CR 2-FR 3-BO	31 SEPARATION DATA CODE	32 CORRECTION LABELLATION DATA TYPE: 1 MO: 07 DA: 15 YR: 1964	EOD DATA →		33 SECURITY REG NO	34 SER
35 NET PREFERENCE CODE: 0 GRADE: 1-1 PT: 1-1 FT: 1-1	36 SLEP COMP DATE MO: 07 DA: 15 YR: 1964	37 LONG COMP DATE MO: 07 DA: 15 YR: 1964	38 CAREER CATEGORY CODE: 0000	39 HEALTH INSURANCE CODE: 0 BEAR: 1-1 HEALTH INS: 0000	40 SOCIAL SECURITY NO			
41 PREVIOUS EMPLOYMENT SERVICE DATA CODE: 0 IN PERMANENT SERVICE: 0 IN TEMPORARY SERVICE: 0 ON LEAVE: 0 ON SICK LEAVE: 0 ON UNPAID LEAVE: 0		42 LEAVE CAT CODE: 0	43 FEDERAL TAX DATA CODE: 0 TAX EXEMPTIONS: 0 CODE: 0 TAX EXEMPTIONS: 0	44 STATE TAX DATA CODE: 0 STATE TAX EXEMPTIONS: 0 CODE: 0 STATE TAX EXEMPTIONS: 0		45 STATE TAX DATA CODE: 0 STATE TAX EXEMPTIONS: 0 CODE: 0 STATE TAX EXEMPTIONS: 0		

46 POSITION NUMBER LABELLATION 1130	47 OFF APPROVAL <i>[Signature]</i>	DATE APPROVED 31 July 1964
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3-15

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 13 January 1964			
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, Daniel					
3. NATURE OF PERSONNEL ACTION PROMOTION				4. DATE RECORDED MONTH DAY YEAR 1 13 64		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS X V TO V CF TO V		V TO CF CF TO CF		7. COST CENTER NO. CHARGE-ABLE 4232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Research Branch Reports, Records, Translation Section				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE TRANSLATOR			12. POSITION NUMBER 0702		13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES (85) 1015.01		16. GRADE AND STEP 05 (2)		17. SALARY OR RATE \$4,850	
18. REMARKS Promotion recommendation attached; Fitness Report submitted previously.							
Recorded by CSFD <i>Sh</i>							
19A. SIGNATURE OF REQUESTING OFFICIAL ORVILLE C. DAWSON, C/SAS/Pers.				DATE SIGNED 18 Jan 64		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Nathan Graham	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODE NUMERIC ALPHABETIC 49350 SAS 75013		22. STATE CODE 75013	23. NATIONAL CODE 1	24. POINTS CODE 03104135	25. DATE OF BIRTH
26. RATE SYMBOLS		27. SPECIES REFERENCE	28. NET REMITT CODE	29. SEPARATION DATA CODE	30. CORRECTIVE/TRANSFER ON DATA	31. FOD DATA	
32. NET PREFERENCE		33. SERA. COMP. DATE	34. LEV. COMP. DATE	35. CAREER CATEGORY		36. REG. / HEALTH INSURANCE	
37. PREVIOUS GOVERNMENT SERVICE DATA		38. MILITARY CODE		39. FEDERAL TAX DATA		40. OTHER TAX DATA	
41. POSITION CONTROL CERTIFICATION				42. D.P. APPROVAL		DATE APPROVED	




19 December 1963

MEMORANDUM FOR: Clandestine Services,
Career Services Panel

SUBJECT : Mr. Daniel Flores -
Recommendation for Promotion

1. Mr. Flores has been with the Agency for about eighteen (18) months and has been a member of SAS since June 1963. During the six (6) months he has been with SAS he has demonstrated intelligence and initiative. In addition to his fulfilling his primary responsibility as a translator, he quickly picked up the knowledge and experience necessary for an Intelligence Assistant in the Operations Support Section. His duties and responsibilities accordingly have been broadened. He has demonstrated ability to function independently as a member of the Operations Support Staff. He is cooperative and has maintained a cheerful disposition under pressure and through many late hours and weekends of duty.

2. In view of his excellent performance in SAS, his intelligence and ability, and his growth potential for a career in CIA, I strongly recommend that he be promoted to GS-5 as soon as possible.


JOHN K. KING
Chief, SAS/Intel

APPROVAL RECOMMENDED

DESMOND FITZGERALD
Chief, Special Affairs Staff

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 23 April 1963												
1. SERIAL NUMBER 036130		2. NAME (Last-First-Middle) FLORES, Daniel															
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH 05 DAY 1 YEAR 63			5. CATEGORY OF EMPLOYMENT REGULAR										
6. FUNDS X		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 3232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)									
CF TO V		CF TO CF		9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Research Branch Reports, Records, Translation Section													
10. LOCATION OF OFFICIAL STATION Washington, D.C.							11. POSITION TITLE TRANSLATOR										
12. POSITION NUMBER 0702			13. CAREER SERVICE DESIGNATION D			14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0031.01		16. GRADE AND STEP 04 (2)							
17. SALARY OR RATE \$ 4250		18. REMARKS From: DDP/OPSER/RID, Ref. Br., #0147, DC Tray 9 CONCURRENCE: <u>John M. Hughes</u> Chief of Admin OPSERV/RID															
Recorded by CSPD <i>JM</i>																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL.																	
19. ACTION CODE 37		20. EMPLOY. CODE 10		21. OFFICE CODE NO. NUMERIC 61350 ALPHABETIC SAS		22. STATION CODE 75013		23. REPORTING OFFICER 1		24. DATE OF ACTION 05/04/63		25. DATE OF SIGNATURE		26. DATE OF APPROVAL		27. DATE OF REVIEW	
28. SITE REFERENCE		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. OFFICIAL USE		32. CONNECTION/CONNECTION DATA		33. SECURITY REF. NO.		34. SEC. RES. NO.		35. SEC. RES. NO.		36. SEC. RES. NO.	
37. VET. PREFERENCE		38. SERA. COMP. DATE		39. LONG. COMP. DATE		40. CAREER CATEGORY		41. FEEDBACK / HEALTH INSURANCE		42. COLLEGE SECURITY NO.		43. COLLEGE SECURITY NO.		44. COLLEGE SECURITY NO.		45. COLLEGE SECURITY NO.	
46. PREVIOUS CATEGORIES OF SERVICE DATA		47. MILITARY CODE		48. FEDERAL USE DATA		49. FEDERAL USE DATA		50. FEDERAL USE DATA		51. FEDERAL USE DATA		52. FEDERAL USE DATA		53. FEDERAL USE DATA		54. FEDERAL USE DATA	
49. POSITION CONTROL CERTIFICATION <i>W. Keane</i>		55. O.P. APPROVAL <i>William Graham</i>		56. DATE APPROVED 1 May 63		57. DATE APPROVED		58. DATE APPROVED		59. DATE APPROVED		60. DATE APPROVED		61. DATE APPROVED		62. DATE APPROVED	

FORM 1152

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

103

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 25 September 1961			
1. SERIAL NUMBER 13510		2. NAME (Last-First-Middle) FLORES Daniel					
3. NATURE OF PERSONNEL ACTION Excepted Appointment <i>(advised)</i>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 03 11 62		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X V TO V CF TO V		7. COST CENTER NO. CHARGE-ABLE 2226 1200 1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP OPSER R I DIV Reference Branch Index Section - Night Shift				10. LOCATION OF OFFICIAL STATION Wash., D. C.			
11. POSITION TITLE File Clerk		12. POSITION NUMBER 0147		13. PCR CONTROL NO.		14. CAREER SERVICE DESIGNATION D	
15. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		16. OCCUPATIONAL SERIES 0305.01		17. GRADE AND STEP 04 1		18. SALARY OR RATE 4040	
19. REMARKS Regular tour of duty 3:30 PM to 12:00 PM daily/ Subject to trial period and medical <div style="float: right; border: 1px solid black; padding: 5px;">Recorded by CWD 8/2</div>							
19A. SIGNATURE OF REQUESTING OFFICIAL <i>John M. Wintersworth</i> John M. Wintersworth, Chief, RID/ADM.				19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>James W. Washburn</i>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. ACTION NO. EMPLOY. CODE 11 10		21. OFFICE CODING NUMERIC 39400 ALPHABETIC RI		22. STATION CODE		23. REG. SER. CODE	
24. DATE EMP. RES. NO. DA. YR.		25. OFFICER RESERVE'S 1 = CS 2 = RICA 3 = RUCM		26. RET. PAYMENT DATA CODE 1		27. DATE OF BIRTH MO. DA. YR. 08 04 1935	
28. NET. PREFERENCE CODE C		29. SER. COMP. DATA MO. DA. YR. 03 11 62		30. LONG. COMP. DATA MO. DA. YR. 03 11 62		31. SEPARATION DATA CODE TYPE 1	
32. PREVIOUS EMPLOYMENT SERVICE DATA FORM 0		33. FEDERAL TAX DATA CODE 0		34. STATE TAX DATA		35. SOCIAL SECURITY NO. 460-42-6230	
36. POSITION CONTROL CERTIFICATION <i>03-12-62</i>		37. O.P. APPROVAL <i>James W. Washburn</i>					

14 February 1962

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

We are pleased to inform you that your appointment with this Agency has been approved at Grade GS-4, salary \$4040.00 per annum, as Clerk.

Your permanent employment will depend upon the completion of the following processing at the time of entering on duty: taking the oath of office, signing a loyalty affidavit, participating in a final security interview. Should anything of an unfavorable nature arise during this period, your employment will not result in a permanent appointment.

We hope you will be able to join us at an early date. Please dial 351-2781 and ask for Mrs. Shirley Wells, as soon as possible, in order to arrange an entrance-on-duty date. We would appreciate your selecting a Monday.

Please report to the Receptionist at 1016 - 16th Street, N. W., Room 201 at 8:15 a.m. and ask for Mrs. Wells on the reporting for duty date that you establish with this office. This address is located on 16th Street between K and L Streets opposite Hotel Statler.

Your gross earnings will be subject to deductions for Federal income tax and 6 1/2 percent for the United States Civil Service Retirement Fund. In addition, the benefits of low-cost group life insurance, which will be discussed with you at the time of your entrance on duty, are available to Federal civilian employees. This insurance is not obligatory. However, if you do not wish coverage, which is automatic, you should sign a Waiver of Life Insurance Coverage form at the time you enter on duty.

14-00000

You will not receive a pay check for approximately four weeks after your entrance on duty.

If you have any problems, Mrs. Wells will be glad to discuss them with you when you call.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/mjt
File sent to: Shirley Wells

26 January 1962

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Processing of your application for employment with this Agency is continuing. Please advise us if any circumstance should arise which might affect your interest in a position with us.

Your continued interest and patience are appreciated.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres/sjm
File sent to: Wells

20 October 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

In connection with your application with this Agency, it will be necessary for you to come to our Medical Office in Central Building, 2430 E Street, N. W., for a pre-employment medical examination which will include determination of physical health and emotional stability.

An appointment may be scheduled by dialing 351-2781 and asking for Mrs. Shirley Wells.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corros/cas
file sent to shirley wells

12 October 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Your application for employment with this Agency has been reviewed with interest and the processing of your case has been initiated for a full-time position on the 3:30 p.m. to 12:00 p.m. shift at Grade GS-4, salary \$4040.00 per annum, plus a ten percent night differential for the hours from 6:00 p.m. to 12:00 p.m., as Clerk.

Your final appointment is dependent upon a number of factors including character and reference investigations, and other processing procedures which may require as long as 120 days. You may be sure that this processing is being accomplished as rapidly as possible.

During this period please notify us of any changes in your present status such as change in address, employment, marital status, etc. If you cannot accept the position or if you have any questions concerning your application, you should write to Mrs. Shirley Wells.

Members of this Agency are entitled to the regular United States Government leave and retirement benefits. Our salaries conform to the rates prescribed by Congress for United States Government agencies.

Thank you for your cooperation and patience during this waiting period.

Very truly yours,

A. D. Echols
Director of Personnel

OP/Corres/car
file sent to shirley wells

SECRET
(When Filled In)

REQUEST FOR SECURITY CLEARANCE				REQUEST NO. (1-2)
NAME (LAST - FIRST - MIDDLE) (18 - 20)				07:00
FLORES, DANIEL				REQUEST DATE (10-11)
6 October 1961				YEAR OF BIRTH (20-30)
POSITION TITLE		POSITION NUMBER (31 - 33)	OCCUP. CODE (37 - 43)	4 August 1935
FILE CLERK		0117	0305.01	GRADE (40-46)
LOCATION (CITY, STATE, COUNTRY)		ASSIGNMENT (OFFICE, DIVISION, BRANCH)		OS-04
WASHINGTON, D. C.		DDP/OPSER		ORGN. CODE (48-50)
TYPE OF APPLICANT		CONVERSION ACTION		3900
<input checked="" type="checkbox"/> REGULAR	<input type="checkbox"/> CONSULTANT	IF OTHER, SPECIFY:		TYPE OF APPL. (49)
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> MILITARY			1
NAME OF REQUESTER (OR OFFICIAL)		TYPE OF ASSIGNMENT AND FURLO		
		<input checked="" type="checkbox"/> HQS	<input type="checkbox"/> USF	<input type="checkbox"/> PF
		<input type="checkbox"/> V	<input type="checkbox"/> UV	HQTRS & FUND (50)
CLEARANCE REQUIRED		PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)		1
<input type="checkbox"/> SECRET				CLEARANCE (51)
<input checked="" type="checkbox"/> FULL				3
ATTACHMENTS		<input checked="" type="checkbox"/> PERSONAL HISTORY STATEMENT	<input checked="" type="checkbox"/> APPENDIX I	RECRUIT. CODE (52-54)
		<input checked="" type="checkbox"/> PHOTOGRAPHS	<input type="checkbox"/> APPENDIX II	105
		<input type="checkbox"/> REQUEST FOR WAIVER	<input checked="" type="checkbox"/> REPORT OF INTERVIEW	VEY PREP. & SER (55)
VETERANS STATUS		<input checked="" type="checkbox"/> MALE - VETERAN	<input type="checkbox"/> FEMALE - VETERAN	
		<input type="checkbox"/> MALE - NON-VETERAN	<input type="checkbox"/> FEMALE - NON-VETERAN	

PULL REQUESTED 6 October 1961
Regular tour of duty 3:30 PM to 12:00 PM daily.

1 - SO
1 - OTF

SPACE BELOW FOR OS USE ONLY

15 September 1961

Mr. Daniel Flores
Apartment 203
2828 Connecticut Avenue, N. W.
Washington 8, D. C.

Dear Mr. Flores:

Appropriate members of our staff are reviewing your application for employment to determine whether we have a position available for a person of your qualifications. Although we cannot predict the length of time needed for this review, every effort will be made to reach an early decision. We will keep you as fully informed as possible regarding the status of your case.

Very truly yours,

E. D. Echols
Director of Personnel

OP/Corres-bt
file sent to Mr. Washam

CONFIDENTIAL
(When Filled In)

REPORT OF INTERVIEW		DATE OF INTERVIEW 21 August 1961 ✓	SOURCE gen info
CANDIDATE (Last, First, Middle) Flores, Daniel		PLACE OF BIRTH San Marcos, Texas	DATE OF BIRTH 4 August 1935
TEMPORARY ADDRESS		PHONE	
PERMANENT ADDRESS 2828 Connecticut Avenue, N.W., Apt. 203, Washington, D.C.		PHONE 265-8322	
BUSINESS ADDRESS		PHONE	
PLACE OF INTERVIEW 15th St		DATE AVAILABLE Immediately on clearance	TESTS SET
REQM (office, serial) RI clerk 3:30-midnight		GS-4	19-32-33-84
<p>Mr. Flores had just been recently released from active duty with the USMC when he came in for interview. He has served two tours which included Security guard Embassy duty in Peru and Bolivia. His wife was formerly stationed at the Embassy with Dept. of State. He appears to be a mature young man, clean cut, neat appearance, dark complexion and coloring. He is planning to continue his college education at C.U. and is available to work the 3:30 - midnight RI shift. A clerical position at the GS-4 level was discussed in the interview. His wife is a secretary with a law firm in town; they have no children.</p> <p>xxxx</p> <p>Mr. Flores is in excellent health and had a very good record with the Marine Corps. Knows of nothing in his background that would be unfavorable in event of reference check. At initial interview he stated that he had no foreign connections, however, after contacting his family in Texas it was determined that his step-mother was born in Mexico and although she came to the US in 1922, she has never become a US citizen.</p> <p>Full clearance.</p>			
DATE SENT TO HQ: 8 5 -t 61		INTERVIEWER: Joy Cooney	

CENTRAL INTELLIGENCE AGENCY

WASHINGTON 25, D. C.

Applicant Information
Sheet No. 1

To all persons applying for employment
with the Central Intelligence Agency:

This paper is the first step in applying for employment or consultant status with the Central Intelligence Agency. No application may proceed beyond this first step if the applicant is not in agreement with the conditions stated below:

General Considerations:

1. The National Security Act of 26 July 1947 (Public Law 253, 80th Congress) which created the Central Intelligence Agency places upon the Agency the responsibility:

- a. "to advise the National Security Council in matters concerning such intelligence activities of the Government departments and agencies as relate to the national security;
- b. "to make recommendations to the National Security Council for the coordination of such intelligence activities of the departments and agencies of the Government as relate to the national security;
- c. "to correlate and evaluate intelligence relating to the national security, and provide for the appropriate dissemination of such intelligence within the Government . . . ;
- d. "to perform, for the benefit of the existing intelligence agencies, such additional services of common concern as the National Security Council determines can be more efficiently accomplished centrally;
- e. "to perform such other functions and duties related to intelligence affecting the national security as the National Security Council may from time to time direct."

14-00000

The special character of this national responsibility requires the Agency to maintain correspondingly special employment criteria which may be different from the routine or normal employment standards of other Government departments and agencies which do not have the highly sensitive responsibility borne by the Central Intelligence Agency. It follows that the investigation of applicants prerequisite to their acceptance is a time-consuming process which, in addition to loyalty and security checks, includes evaluation of competence, physical and emotional fitness, and availability of a suitable position at such time as employment may be offered. This is called "clearance" of an applicant.

2. Investigation of an applicant may reveal something which prevents his clearance - perhaps something of which the applicant is genuinely unaware, perhaps something which only the special employment criteria of the Agency make unacceptable. In any event, adverse findings by the Agency are conclusive and final so far as the Agency is concerned, and no statement of specific reasons is made to the applicant.

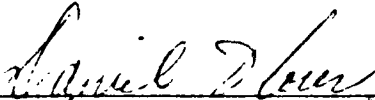
3. Employment by the Central Intelligence Agency is not a right upon which an applicant can insist. Offer of employment which is subject to full clearance does not constitute a commitment on the Agency's part giving an unsuccessful applicant grounds for any claim against the Agency. Acceptance of employment upon the condition of clearance is at the applicant's risk, taken with the knowledge that a very substantial percentage of applicants are not cleared.

Statement of Understanding
and Agreement

I have read, understand, and agree to the foregoing General Considerations. If not accepted for employment by the Central Intelligence Agency, I will make no claim or demand in conflict with those considerations.

I have also seen and read Applicant Information Sheet No. 2.

SIGNED at Washington, D. C., this 10th day of September, 1961.



(Signature of Applicant)
Daniel Flores

SECRET

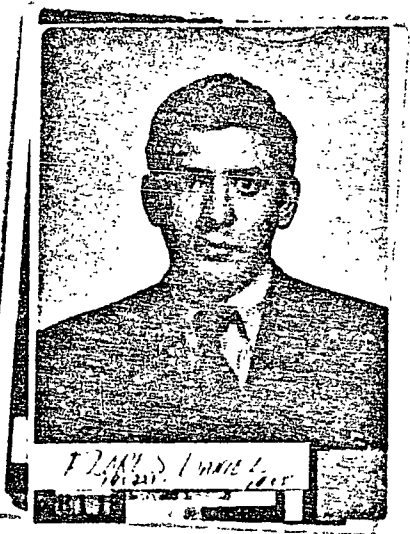
REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

H a n d l e W i t h C a r e



SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP				DATE	FILE NO.
				6 OCTOBER 75	15675
TC: (CHECK)	<input checked="" type="checkbox"/>	CHIEF, CONTROL DIVISION, OP		SS NUMBER	
	<input type="checkbox"/>	CHIEF, CONTRACT PERSONNEL DIVISION, OP		EMPLOYEE NUMBER	036130
	<input checked="" type="checkbox"/>	CHIEF, (OPERATING COMPONENT FOR ACTION) ATTN: LA		ID CARD NUMBER	
REF.	Form 1522 Dated 18 Aug 75			OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED <input type="checkbox"/> CANCELLED
STATUS	<input checked="" type="checkbox"/>	STAFF	<input type="checkbox"/>	CONTRACT	
SUBJECT	UNIT				

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)		CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)	
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <u>EOD</u>	<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TOY</u> OTHER (Specify)	EFFECTIVE DATE:	SUBMIT FORM 3254 <u>W-2</u> TO BE ISSUED (NHB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (NHB 20-7)		SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (NHB 20-7)	EAA CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>
<input checked="" type="checkbox"/> SUBMIT FORM 3254 <u>W-2</u> TO BE ISSUED. (NHB 20-11)		RETURN ALL OFFICIAL DOCUMENTATION TO CCS	SUBMIT FORM 2688 FOR HOSPITALIZATION CARD.
<input checked="" type="checkbox"/> SUBMIT FORM 1522 FOR ANY CHANGE AFFECTING THIS COVER. (NR 240-20)		DO NOT WRITE IN THIS BLOCK	
<input checked="" type="checkbox"/> SUBMIT FORM 1523 FOR TRANSFERRING COVER RESPONSIBILITY. (NR 240-20)			
<input checked="" type="checkbox"/> EAA CATEGORY I <input type="checkbox"/> CATEGORY II <input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR HOSPITALIZATION CARD			

REMARKS AND/OR COVER HISTORY

DISTRIBUTION

COPIES TO:

COPIES TO: OPERATIONAL COMPONENT

COPIES TO: HQ

COPIES TO: [illegible]

COPIES TO: [illegible]

Richard L. [illegible]

[illegible]

SECRET

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE	23 APRIL 1974	FILE NO.	15675
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP	NUMBER			
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER	036130		
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) WH	ID CARD NUMBER			
ATTN:	CHIEF SUPPORT STAFF	OFFICIAL COVER	<input checked="" type="checkbox"/> ESTABLISHED		
REF:	FORM 2458, DATED 16 JANUARY 1974		<input type="checkbox"/> DISCONTINUED		
SUBJECT	UNIT		DANIEL FLORES		

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <u>EOD</u> <input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u> </u> TDY <u> </u> OTHER (Specify) <u> </u>	SUBMIT FORM 842 TO BE ISSUED <u> </u> H-2
SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>4</u> (HBB 20-7)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u> </u> (HBB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 375 (HBB 20-11)	EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR CHANGING TELEPHONE COVER. (HBB 240-20)	<input type="checkbox"/> TO CCS
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HBB 240-20)	IN THIS BLOCK
<input checked="" type="checkbox"/> EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR AGE HOSPITALIZATION CARD	
REWARDS AND COVER HISTORY	

THIS MEMO MUST REMAIN ON TOP OF FILE

PREPARED BY: <u> </u> CHECKED BY: <u> </u> APPROVED BY: <u> </u> DATE: <u> </u>	REMARKS: <u> </u> <u> </u> <u> </u>
--	--

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 27 November 1967	
TO: (CC#)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	FILE NUMBER 15675	
	<input checked="" type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 036130	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER 1151	
ATTN:	Mr. [Redacted]	OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED
REF:	Verbal Request		<input type="checkbox"/> DISCONTINUED
SUBJECT	<input checked="" type="checkbox"/> FLORES, Daniel (NMI)	UNIT	[Redacted]

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (opmeco 20-800-11)	<input type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (opmeco 20-800-11)
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE COB _____	DATE (as of COB)
B. CONTINUING AS OF COB 3 Dec 67	
<input checked="" type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HRB 20-7)	<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HRB 20-7)
<input checked="" type="checkbox"/> ASCERTAIN THAT [Redacted] W-2 BEING ISSUED. (HR 20-661-1)	<input type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS.
<input checked="" 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 checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-2a)	
CONCUR IN ISSUANCE	
	AGE HOSPITALIZATION CARD
	NACS HOSPITALIZATION CARD

REMARKS AND/OR COVER HISTORY
Mar 62 - Dec 62 Overt

BDF/nch

DISTRIBUTION: [Redacted]
 1000 2 - OPERATING COMPONENT
 1000 2 - [Redacted]
 1000 2 - [Redacted]
 1000 2 - [Redacted]
 1000 2 - [Redacted]
 1000 2 - [Redacted]

James H. [Signature]

UNIT OFFICIAL COVER CONTROL [Redacted]

FORM 1551 1551 1551 1551 1551 1551 1551 1551 1551 1551

SECRET

118-20-031

All

L48 304 015

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12165 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 OCTOBER 1979

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLORES DANIEL	0036130	LA	GS 13 3	\$31,333

5656

1. SERIAL NO		2. NAME		3. ORGANIZATION		4. PLANS		5. LWOP HOURS		
036130		DANIEL FLORES		LA						
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	OSI	ADJ.
GS	3	\$28,333	08/28/79	GS	3	\$31,333	10/07/79			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
FORM 1073 3601 PAY CHANGE NOTIFICATION										

Handwritten notes and initials on the right side of the form, including "2/25/80" and "C.E."

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12067 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 08 OCTOBER 1978

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLORES DANIEL	0036130	LA	GS 13 2	\$28,368

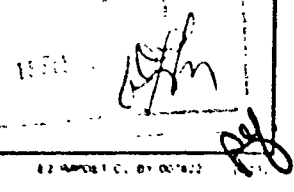
5678

1 SERIAL NO		2 NAME		3 ORGANIZATION		4 TUNGS		5 WORK HOURS		
0036130		FLORES DANIEL		91 620						
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION		
Grade	Step	Salary	EFFECTIVE DATE	Grade	Step	Salary	EFFECTIVE DATE	VIS	OSI	ADJ.
GS	13	2	\$28,368	01/29/78	GS	13	3	\$29,260	01/28/79	
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE <i>[Signature]</i>								DATE <i>11/29/78</i>		
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> ON PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
SUPERVISOR SIGNATURE <i>[Signature]</i>								ACCEPTED BY <i>[Signature]</i>		
FORM 10-73 560F <small>USE PREVIOUS EDITIONS</small> PAY CHANGE NOTIFICATION										

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0000
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SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL											
3. NATURE OF PERSONNEL ACTION REASSIGNMENT						4. EFFECTIVE DATE MO DA YR 02 11 78		5. CATEGORY OF EMPLOYMENT REGULAR					
6. FUNDS		V TO V		V TO CF		7. FAN AND NSCA 8035 0990 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J					
CF TO V		CF TO CF		9. ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION FOREIGN FIELD MEXICO CITY, MEXICO STATION BRANCH						10. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO			
11. POSITION TITLE OPERATIONS OFFICER						12. POSITION NUMBER GK76		13. SERVICE DESIGNATION DRG					
14. CLASSIFICATION SCHEDULE (GS, WFS, etc.) GS			15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 13 2		17. SALARY OR RATE 26889					
18. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 51620 LA		22. STATION CODE 45075	23. INTELLIGENCE CODE	24. HOURS CODE 3	25. DATE OF BIRTH MO DA YR 08 04 35		26. DATE OF GRADE MO DA YR		27. DATE OF LEI MO DA YR		
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE 1. CSC 2. CIA 3. NSA 4. NFA		30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE TYPE		32. CORRECTION/CANCELLATION DATA MO DA YR		33. SECURITY REQ NO		34. SEX		
35. VET PREFERENCE CCGA 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 LAR REV BRUV BRP		39. FECL / HEALTH INSURANCE CODE CODE 0 WAIVER 1-YES		40. SOCIAL SECURITY NO			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CCGA 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 2 YRS. 3 BREAK IN SERVICE UNCOE THAN 2 YRS.				42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM ELECTED CODE NO TAX EXEMPTIONS			44. STATE TAX DATA FORM ELECTED CODE NO TAX EXEMP STATE CODE 1 YES 2 NO					
SIGNATURE OR OFFICE AUTHENTICATION													
													

FORM 1150
5 Feb May 10 74

Use Previous Edition

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SEA

82 APR 1974 C. BY 00782

All

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"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12016 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLCRES DANIEL	0036130	LA	GS 13 1	\$26,022
				5927

CPD: 7 APR 77

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT AND DISABILITY SYSTEM			4 EFFECTIVE DATE MO DA YR 04 10 77
5 CATEGORY OF EMPLOYMENT REGULAR			6 FUNDS V TO V CF TO V X V TO CF CF TO CF
7 FAN AND NSCA 7135 4534 0000		8 CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203	
9 ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE		12 POSITION NUMBER	13 SERVICE DESIGNATION DQG
14 CLASSIFICATION SCHEDULE (U.S. (L. OR))	15 OCCUPATIONAL SERIES	16 GRADE AND STEP 13	17 SALARY OR RATE
18 REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE	20 Employ Code	21 OFFICE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTEGRAL CODE	24 HOURS Code	25 DATE OF BIRTH MO DA YR		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. CIV 2. CIA 3. FCA NONE		31 SEPARATION DATA CODE		32 Correction / Cancellation Date 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 REG EMP EMP		39 FEGLI / HEALTH INSURANCE FEGLI 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 ENRUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO		44 STATE TAX DATA FORM ENRUTED CODE NO TAX EXEMP 1 YES 2 NO				

EOD DATA →

SIGNATURE OR OTHER AUTHENTICATION

FORM 1130
5-4 May 10 78

Use Previous Edition

BE IMPROVED BY GPO

PLF: 01 MAR 77

SECRET
(When Filled In)

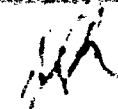
NOTIFICATION OF PERSONNEL ACTION												
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)										
036130		FLORES DANIEL										
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT						
REASSIGNMENT				02 26 77		REGULAR						
6 FUNDS		V TO V		V TO CF		7 TAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY				
CF TO V		X		CF TO CF		7135 4534 0000		50 USC 403 J				
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION						
DDO/LA DIVISION CUBA OPERATIONS GROUP EA AREA						WASH., D.C.						
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION						
OPERATIONS OFFICER				F535		DQG						
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE					
GS			0136.01		13 1		24308					
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 INTEGRAL CODE	24 MONTHS CODE	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI	
37	10	NUMERIC	ALPHABETIC	75013	1	08	04	35				
28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REG NO		34 SEX		
MO	LA	18	1	2	3	4	5	6	7	8	9	
35 VET PREFERENCE	36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGUL / HEALTH INSURANCE		40 SOCIAL SECURITY NO			
CODE	0	NO PRE	1	2	3	4	5	6	7	8	9	
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	NO EXEMPT	NO EXEMPT	STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION												

EOD DATA

[Handwritten Signature]

AEO:1 FEB 77

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1 SERIAL NUMBER		2 NAME (LAST-FIRST-MIDDLE)											
036130		FLORES DANIEL											
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT							
PROMOTION				01 30 77		REGULAR							
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA		8 CAC OR OTHER LEGAL AUTHORITY					
CF TO V		X		CF TO CF		7135 4534 0000		50 USC 403 J					
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION									
DDO/LA DIVISION CUBA OPERATIONS GROUP WH AREA				WASH., D.C.									
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION							
OPERATIONS OFFICER				CG66		DQG							
14 CLASSIFICATION (SCHEDULE GS OR WS)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE							
GS		0136.01		13 1		24308							
18 REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODE		22 STATION CODE	23 ANTICIPATED LINE	24 NUMBER	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF HI			
22	10	51500	LA	75013		1	03	04	35	01	30	77	
28 NEW EMPLOYEE		29 SPECIAL RESPONSE		30 RETIREMENT DATA		31 SEPARATION DATA LINE		32 EMPLOYER'S CONTRIBUTION		33 SECURITY		34 MIA	
								JOB DATA					
35 PAY PRINTING		36 NEW LEAD		37 PAYROLL DATA		38 CASUALTY DATA		39 EMPLOYER'S CONTRIBUTION		40 SOCIAL SECURITY			
41 FEDERAL GOVERNMENT EMPLOYEE		42 STATE EMPLOYEE		43 LOCAL GOVERNMENT EMPLOYEE		44 FEDERAL EMPLOYEE		45 STATE EMPLOYEE		46 LOCAL GOVERNMENT EMPLOYEE			
SIGNATURE OF OFFICE AUTHORITY													
													

KKK: 6 DEC 76

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																																																																																																																																											
1 SERIAL NUMBER		2 NAME (LAST-FIRST-MIDDLE)																																																																																																																																									
036130		FLORES DANIEL																																																																																																																																									
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT																																																																																																																																		
REASSIGNMENT						12 04 76			REGULAR																																																																																																																																		
6 FUNDS		V TO V		V TO CF		7 TAN AND NSCA			8 CSC OR OTHER LEGAL AUTHORITY																																																																																																																																		
CF TO V		X		CF TO CF		7135 4534 0000			50 USC 403 J																																																																																																																																		
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION																																																																																																																																					
DDG/LA DIVISION CUBA OPERATIONS GROUP WH AREA						WASH., D.C.																																																																																																																																					
11 POSITION TITLE						12 POSITION NUMBER			13 SERVICE DESIGNATION																																																																																																																																		
OPERATIONS OFFICER						CC67			DQG																																																																																																																																		
14 CLASSIFICATION SCHEDULE (GS, IS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP			17 SALARY OR RATE																																																																																																																																		
GS			0136.01			12.4			22485																																																																																																																																		
18 REMARKS																																																																																																																																											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																																																																											
<table border="1"> <tr> <td colspan="2">19 ACTION CODE</td> <td colspan="2">21 OFFICE CODE</td> <td colspan="2">22 STATION CODE</td> <td colspan="2">23 INTEGREE CODE</td> <td colspan="2">24 MANSION CODE</td> <td colspan="2">25 DATE OF BIRTH</td> <td colspan="2">26 DATE OF GRADE</td> <td colspan="2">27 DATE OF LEI</td> </tr> <tr> <td colspan="2">37 10</td> <td colspan="2">515001 LA</td> <td colspan="2">75013</td> <td colspan="2">1</td> <td colspan="2">1</td> <td colspan="2">03 04 35</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">28 INT. EXP. DOC.</td> <td colspan="2">29 SPECIAL REFERENCE</td> <td colspan="2">30 RETIREMENT DATA</td> <td colspan="2">31 SEPARATION DATA CODE</td> <td colspan="2">32 CORRECTION/CONCILIATION DATA</td> <td colspan="2">33 SECURITY RISK NO</td> <td colspan="2">34 SER</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">EOD DATA</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">35 CIV. EMPLOYMENT</td> <td colspan="2">36 SERV. CLASS. EXCEPT LONG TERM DATE</td> <td colspan="2">38 CAREER CATEGORY</td> <td colspan="2">39 FEELT / HEALTH INSURANCE</td> <td colspan="2">40 SOCIAL SECURITY NO</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="4">41 FEDERAL GOVERNMENT SERVICE</td> <td colspan="2">42 LEAVE CAT. CODE</td> <td colspan="2">43 FEDERAL TAX DATA</td> <td colspan="4">44 STATE TAX DATA</td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="4"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="4"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> </table>												19 ACTION CODE		21 OFFICE CODE		22 STATION CODE		23 INTEGREE CODE		24 MANSION CODE		25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI		37 10		515001 LA		75013		1		1		03 04 35						28 INT. EXP. DOC.		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CONCILIATION DATA		33 SECURITY RISK NO		34 SER														EOD DATA						35 CIV. EMPLOYMENT		36 SERV. CLASS. EXCEPT LONG TERM DATE		38 CAREER CATEGORY		39 FEELT / HEALTH INSURANCE		40 SOCIAL SECURITY NO																								41 FEDERAL GOVERNMENT SERVICE				42 LEAVE CAT. CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA																							
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SIGNATURE OR OTHER AUTHENTICATION																																																																																																																																											
FROM CIA																																																																																																																																											

PIF

1. SERIAL NO.		NAME		3. EMPLOYER'S NO.		4. ADDRESS		5. CITY AND STATE		
J 1000		JAMES EARL RAY		1700		1				
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TIME ADJUST		
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date	WGT	QSI	ADJ
			11/25/75				11/25/76			
CERTIFICATION AND AUTHORIZATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<input type="checkbox"/> NO EXCESS LWOP ○ ○ <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLERKS INITIALS										
FORM 10.73 560E Use previous editions PAY CHANGE NOTIFICATION (4-51)										

PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11541 PURSUANT TO AUTHORITY OF E.O. AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND E.O. EFFECTIVE DATED 6 OCTOBER 1976.

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1976

NAME: JAMES EARL RAY SERIAL: 17000 GRADE: GS-12 STEP: 3 NEW SALARY: \$23,000

NRK: 19 JULY 76

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DCP

1 SERIAL NUMBER 33613	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
--------------------------	---

3 FEATURE OF PERSONNEL ACTION REASSIGNMENT - CHANGE OF FUNCTIONAL CATEGORY	4 EFFECTIVE DATE MO DA YR JUL 21 76	5 CATEGORY OF EMPLOYMENT REGULAR
---	---	-------------------------------------

6 FUNDS	V TO V	V TO CF	7 TAN AND NSCA T175 3012 3000	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 433 J
	CF TO V	X CF TO CF		

9 ORGANIZATIONAL DESIGNATIONS DDA/OTR FUNCTIONAL TRAINING DIVISION OPERATIONS TRAINING BRANCH	10 LOCATION OF OFFICIAL STATION WASH., D.C.
--	--

11 POSITION TITLE INSTRUCTOR OPS	12 POSITION NUMBER BD33	13 SERVICE DESIGNATION DOG
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14 CLASSIFICATION SCHEDULE (S, B, OR I) GS	15 OCCUPATIONAL SERIES 1712.32	16 GRADE AND STEP 12 3	17 SALARY OR RATE 25078
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18 REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 37	20 EMPLOY CODE 15	21 OFFICE CODING NUMERIC 175	22 STATION CODE ALPHABETIC OTR	23 INTERSEE CODE 75	24 INQUIRY CODE 1	25 DATE OF BIRTH MO DA YR JUL 31 35	26 DATE OF GRADE MO DA YR	27 DATE OF LET MO DA YR
28 WTE EXPRES MO DA YR	29 SPECIAL REFERENCE CSC CIA CVA CVA CVA	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE	32 Correction/Correction Data TYPE MO DA YR	33 SECURITY REQ NO.			34 SEX
35 VET PREFERENCE CODE 1 NONE 2 5 PT 3 10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CARTER CATEGORY LAW ECON ECON ECON	39 FEGLI / HEALTH INSURANCE CODE 0 WAIVED 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 YRS. 3 BREAK IN SERVICE MORE THAN 3 YRS.	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXEMPTED 1 YES 2 NO	44 STATE TAX DATA FORM EXEMPTED 1 YES 2 NO	CODE	STATE CODE			

SIGNATURE OR OTHER AUTHENTICATION

FROM: LA

AFG
SECRET

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11883 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 2	\$20,032

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11811 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: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 1	\$18,463

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 31 MAY 1974.

FLORES DANIEL

036130

41351084

1 SERIAL NO		2 NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS	
036130		FLORES DANIEL			51 500		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 12	2	19,078	11/24/74	GS 12	3	19,693	11/23/75			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<i>[Signature]</i>							<i>[Date]</i>			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLERK'S INITIALS									BY	
FORM 7-60 500E		PAY CHANGE NOTIFICATION							14 511	

REF: 10 SEP 75

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1 SERIAL NUMBER 13017		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL											
3 NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="checkbox"/> STATUS				4 EFFECTIVE DATE MO DA YR 09 14 75		5 CATEGORY OF EMPLOYMENT REGULAR							
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA 6155 1574		8 CSC OR OTHER LEGAL AUTHORITY 51 USC 403 J					
CF TO V		%		CF TO CF		9 ORGANIZATIONAL DESIGNATIONS DOO/LA DIVISION CUSA OPERATIONS GROUP OPS BRANCH							
10 LOCATION OF OFFICIAL STATION WASH., D.C.						11 POSITION TITLE OPERATIONS OFFICER		12 POSITION NUMBER CQ65		13 SERVICE DESIGNATION DQB			
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 6136.01		16 GRADE AND STEP 12 2		17 SALARY OR RATE 19070						
18 REMARKS WASH., D.C.													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE 56	20 Employ Code 1	21 OFFICE CODING NUMERIC ALPHABETIC 5157 LA		22 STATION CODE 7513	23 INTEGREE CODE 1	24 Major Code 1		25 DATE OF BIRTH MO DA YR 09 14 75		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 CA 3 FGA 4 NONE		31 SEPARATION DATA CODE		32 Correction / Cancellation Data TYPE MO DA YR		33 SECURITY REG NO		34 SER	
35 VET PREFERENCE CODE 0 NONE 1 5 YR 2 10 YR		36 SERV COMP DATE MO DA YR		37 LONG COMP DATE MO DA YR		38 CAREER CATEGORY CAR SER FROM Step		39 FEGLI / HEALTH INSURANCE CODE 0 WAIVER 1 YES		40 SOCIAL SECURITY NO		HEALTH NO CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (UP TO 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 SIGNATURE OR OTHER AUTHENTICATION													
										POSTED 19 SEP 75 BL			

LT-42

1 SERIAL NO		2 NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS		
030130		FLORES DANIEL			SI 500		CF				
6 OLD SALARY RATE				7 NEW SALARY RATE				8 TYPE ACTION			
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	QSI	ADJ.	
GS 12	1	18,463	11/25/73	GS 12	2	19,078	11/24/74				
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE											
SIGNATURE							DATE				
<i>Nestor Sanchez</i>							23 Sept 74				
<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 <i>NS</i>											
FORM 10-73 560E Use previous editions											
PAY CHANGE NOTIFICATION											

APPROVED BY: Nestor Sanchez

0000

0000

LMP: 27 SEPT 74

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER Ø3613Ø		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL									
3 NATURE OF PERSONNEL ACTION REASSIGNMENT						4 EFFECTIVE DATE Ø9 15 74			5 CATEGORY OF EMPLOYMENT REGULAR		
6 FUNDS		V TO V		V TO CF		7 FAN AND NSCA			8 CXC OR OTHER LEGAL AUTHORITY		
CF TO V		X		CF TO CF		5135 4534 ØØØØ			5Ø USC 4Ø3 J		
9 ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION WH/COG OPS BRANCH						10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE OPS OFFICER						12 POSITION NUMBER 1159			13 SERVICE DESIGNATION DQB		
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS				15 OCCUPATIONAL SERIES Ø136.Ø1		16 GRADE AND STEP 12 1		17 SALARY OR RATE 17497			
18 REMARKS WASH., D.C.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE 37	20 EMPLOY CODE 1Ø	21 OFFICE CODING NUMBER: 515ØØ ALPHABETIC: WH		22 STATION CODE 75Ø13	23 INTEGRITY CODE Ø	24 HQ/MS CODE 1	25 DATE OF BIRTH Ø8 04 35		26 DATE OF GRADE		27 DATE OF LET
28 NTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 Correction / Cancellation Code			33 SECURITY REQ NO	34 SER	
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 REGU / HEALTH INSURANCE		40 SOCIAL SECURITY NO	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE			42 LEAVE CAT CODE		43 FEDERAL TAX DATA			44 STATE TAX DATA			
4 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)			44 NO PREVIOUS SERVICE		43 FORMS EMPLOYED 1 YES 2 NO			44 STATE TAX DATA 1 YES 2 NO			
SIGNATURE OR OTHER AUTHENTICATION											
										<p>POSTED</p> <p><i>JK 9/27/74</i></p>	

SECRET

(When Filled In)

NO: 19 APR 74

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 15113		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE MO DA '74 7 24 74
5 CATEGORY OF EMPLOYMENT REGULAR			6 FUND AND NSCA 5135 4834
7 FUNDS	V TO V CF TO V	V TO CF X CF TO CF	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 4301
9 ORGANIZATIONAL DESIGNATIONS DDO/MI DIVISION MI/OSG OPS SUPPORT BRANCH		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 1154	13 SERVICE DESIGNATION OCS
14 CLASSIFICATION SCHEDULE (GS 15, etc.) GS	15 OCCUPATIONAL SERIES 3136.01	16 GRADE AND STEP 12 1	17 SALARY OR RATE 17497
18 REMARKS LIMA, PERU			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING 51500 MI	22 STATION CODE 75213
23 DATE OF BIRTH MO DA '50 7 24 50	24 GRADE CODE 1	25 DATE OF GRADE MO DA '74 7 24 74	26 DATE OF LEI MO DA '74 7 24 74
27 NET PREFERENCE MO DA '74 1 1 74	28 SPECIAL REFERENCE	29 RETIREMENT DATA LUC	30 SEPARATION DATA CODE
31 CORRECTION/COMPLETION DATA MO DA '74 7 24 74	32 SECURITY REG NO	33 SSN	34 SSN
35 NET PREFERENCE CODE 1 1 74	36 SERV COMP DATE MO DA '74 7 24 74	37 LONG COMP DATE MO DA '74 7 24 74	38 CARRIER CATEGORY CODE 1 1 74
39 FEDERAL CIVILIAN GOVERNMENT SERVICE CODE 1 1 74	40 LEAVE CAT CODE	41 FEDERAL TAX DATA	42 STATE TAX DATA
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;">OK 5/18/74</p> </div>

ONS: 27 JUN 74

SECRET
(When Filled In)

008

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 955134		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM			4 EFFECTIVE DATE MO DA '74 06 23 74
5 CATEGORY OF EMPLOYMENT REGULAR			6 CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203
7 FUNDS X TO V O TO V		8 FAN AND NSCA 4135 1324 311	
9 ORGANIZATIONAL DESIGNATION DDO/NA DIVISION		10 LOCATION OF OFFICIAL STATION LIMA, PERU	
11 POSITION TITLE		12 POSITION NUMBER	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, GS, etc.)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP 12	17 SALARY GRADE
18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE	20 EMPLOY CODE	21 CAREER CODING ALPHABETIC	22 STATION CODE
23 RETIREMENT DATA TYPE 1 2 3 4 5	24 MONTH CODE	25 DATE OF BIRTH MO DA 'YY	26 DATE OF LEAVE MO DA 'YY
27 SECURITY REG NO	28 SER	29 CORRECTION / CANCELLATION DATE MO DA 'YY	
30 VET PRESENT	31 MILITARY COMP DATE MO DA 'YY	32 LONG COMP DATE MO DA 'YY	33 CAREER CATEGORY CODE
34 FEDERAL TAX DATA CODE	35 STATE TAX DATA CODE	36 SOCIAL SECURITY NO	37 HEALTH INSURANCE CODE
38 PERIOD OF LEAVE / EMPLOYMENT SERVICE	39 LEAVE CAT CODE	40 FEDERAL TAX DATA CODE	41 STATE TAX DATA CODE
42 SIGNATURE OF OTHER AUTHENTICATION			43 POSTED OK 21 JUN 74

FORM 100-10
1-74 USE PREVIOUS EDITIONS

SECRET

U.S. GOVERNMENT PRINTING OFFICE: 1973

008

330 03 DEC 73

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

00F.

1 SERIAL NUMBER 030130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION			4 EFFECTIVE DATE 11 25 73
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V	V TO CF	7 PAY AND NSCA 4135 1084 0000
	CF TO V	CF TO CF	8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9 ORGANIZATIONAL DESIGNATIONS DDO/WH DIVISION FOREIGN FIELD BRANCH 3		10 LOCATION OF OFFICIAL STATION	
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 0136	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15 OCCUPATIONAL SERIES 6136.01	16 GRADE AND STEP 12 1	17 SALARY OR RATE 17427
18 REMARKS HOME BASE: WH			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 EMPLOYER CODE 10	21 OFFICE CODING 51760 WH	22 STATION CODE 57085	23 INTEGRATE CODE []	24 HOURS CODE 3	25 DATE OF BIRTH 08 04 35	26 DATE OF GRADE 11 25 73	27 DATE OF LET 11 25 73
28 INT EXPRESS NO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 FIC 2 CA 3 PSA 4 NONE	31 SEPARATION DATA CODE	32 CORRECTION - CANCELLATION DATE TYPE NO DA YR	IOD DATA		33 SECURITY REQ NO	34 SER
35 VET PREFERENCE 1 0-4 2 1-4 3 10-4	36 SERV COMP DATE NO DA YR	37 LONG COMP DATE NO DA YR	38 CAREER CATEGORY TAB SER CODE CODE 0 HONOR 1 RES	39 REGI HEALTH INSURANCE HEALTH INS CODE	40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE 1 NO PREVIOUS SERVICE 2 NO BREAK IN SERVICE 3 BREAK IN SERVICE LESS THAN 5 YRS 4 BREAK IN SERVICE MORE THAN 5 YRS		42 LEAVE CAT CODE	43 FEDERAL TAX DATA 1 YES 2 NO		44 STATE TAX DATA 1 YES 2 NO			

SIGNATURE OF OTHER AUTHENTICATION

WAR-12473

SECRET
DIMS

DB

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 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: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	760	CF GS 11 4	\$16,138

07

"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
FLORES DANIEL	036130	51	760	CF GS 11 4	\$15,394

655

1 SERIAL NO.		2 NAME		3 ORGANIZATION		4 FUNDS		5 LWOP REASON	
036133		DANIEL FLORES		51 700		CF			
6 OLD SALARY RATE				7. NEW SALARY RATE				8 TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	CI	ADJ
GS 11	3	\$14,197	11/29/71	GS 11	3	\$16,197	11/29/72		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>Richard L. Conolly</i>							DATE <i>8 September 1972</i>		
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS				R. L. CONOLLY				AUDITED BY	
FORM 7-66 560 E Use previous editions PAY CHANGE NOTIFICATION (4-51)									

1000 PERS
 STAR DIVISION

BWS

"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
FLORES DANIEL	036130	51 700	CF	GS 11 3	\$16,197

BS: 8 DEC 71

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1 SERIAL NUMBER		2 NAME (LAST-FIRST-MIDDLE)											
036130		FLORES DANIEL											
3 NATURE OF PERSONNEL ACTION						4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT					
PROMOTION						11 28 71		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		2135 1084 0000		50 USC 403 J					
9 ORGANIZATIONAL DESIGNATIONS						10 LOCATION OF OFFICIAL STATION							
DDP/WH DIVISION FOREIGN FIELD BRANCH 3, LIMA, PERU STATION						LIMA, PERU							
11 POSITION TITLE						12 POSITION NUMBER		13 SERVICE DESIGNATION					
OPS OFFICER						0136		D					
14 CLASSIFICATION SCHEDULE (GS, etc.)			15 OCCUPATIONAL SERIES			16 GRADE AND STEP			17 SALARY OR RATE				
GS			0136.01			11 3			13457				
18 REMARKS													
LIMA, PERU													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE		23 INITIATION CODE	24 PAY GRADE	25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI	
22	10	51760 WH		57085			3	08 04 35		11 28 71		11 28 71	
28 PTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction / Cancellation Data		33 SECURITY REG NO		34 SER	
								100 DATA					
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA					
CODE				FORM EXECUTED		CODE		FORM EXECUTED		CODE		STATE CODE	
1. NO PREVIOUS SERVICE				1. YES		NO TAX EXEMPTIONS		1. YES		NONE		STATE CODE	
2. NO BREAK IN SERVICE				2. NO		NO TAX EXEMPTIONS		2. NO		NONE		STATE CODE	
3. BREAK IN SERVICE LESS THAN 2 YRS													
4. BREAK IN SERVICE MORE THAN 2 YRS													
SIGNATURE OR OTHER AUTHENTICATION													

FD-302
Rev. 11-50
GPO : 1975

Use Previous Edition

SECRET

PHS

POSTED

12-9-71

When Filled In

WEB: 29 SEPT 71

SECRET
When Filled In

NOTIFICATION OF PERSONNEL ACTION													
ODF													
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)											
036130		FLORES DANIEL											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT						09 19 71		REGULAR					
6. FUNDS		Y TO Y		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY					
CF TO V		X		CF TO CF		2135 1084 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP/WH FOREIGN FIELD BRANCH 3 LIMA, PERU STATION						LIMA, PERU							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER				0136		D							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE						
GS			0136.01		10 3		12285						
18. REMARKS													
GUAYAQUIL, ECUADOR													
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. INTELLIGENCE CODE	24. PAY PLAN		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37	10	51700	WH	57085		3	08 04 35						
28. INTL EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. Correction Cancellation Data			33. SECURITY REG NO		34. SER		
MO DA YR			1. CSC 2. CIA 3. NSA 4. NONE		CON				EOD DATA				
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. PEGLE - HEALTH INSURANCE		40. SOCIAL SECURITY NO			
CODE		MO DA YR		MO DA YR		CAREER		HEALTH INS CODE					
1. 3 YR 2. 10 YR						PROV TEMP		1. YES 2. NO					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE				CODE		CODE		CODE					
1. NO PREVIOUS 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		1. YES 2. NO					
SIGNATURE OR OTHER AUTHENTICATION													

POSTED

1971-09-29

(Signature)

FORM 1150
3-68 May 6-70

Use Previous Edition

SECRET

BS

(Signature)

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
036130		FLORES DANIEL		51 700		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	10	2	\$11,901	07/26/70	GS	10	2	\$12,295	07/25/71
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>Richard L. Conolly</i>						6 May 1971			
<input type="checkbox"/> NO EXCESS LWOP <input 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 560 E		Use previous editions		PAY CHANGE NOTIFICATION				(4-51)	

JUL 19 1971

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545

"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
FLORES DANIEL	036130	51	700	CF GS 10 2	\$11,901

SECRET
(When Filled In)

BSJ: 10 AUG 70

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)								
036136		FLORES DANIEL								
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
PROMOTION				MO DA YR 07 29 70		REGULAR				
6. FUNDS		V TO V		V TO CF		7. Functional Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY		
CF TO V		X		CF TO CF		1135 0884 0000		50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION					
DDP/WH FOREIGN FIELD BRANCH 3										
[] STATION					[] BASE					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER				0376		D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS			0136.01		10 2		11231			
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. INTEGRITY CODE	24. MAJOR CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI
22	10	51700/WH		19559	[]	3	MO DA YR 08 04 35		MO DA YR 07 26 70	MO DA YR 07 26 70
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION / CONCILIATION DATA		33. SECURITY REQ NO		34. SEA
MO DA YR 07 25 72		81	1. CSC 2. CIA 3. FCA 4. N/A		[]	MO DA YR [] [] []		EOD DATA		[]
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEEDBACK HEALTH INSURANCE		40. SOCIAL SECURITY NO
CODE 0 NONE 1 5 PT 2 10 PT		MO DA YR [] [] []		MO DA YR [] [] []		CAB RES+ PACV []		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 EXEMPTED 1 YES 2 NO			FORM EXEMPTED 1 YES 2 NO			
SIGNATURE OR OTHER AUTHENTICATION										

POSTED

08 AUG 1970

BSJ

SECRET

14-00000
1-66
11-66
Use Previous Edition

655

1 SERIAL NO.		2. NAME			3 ORGANIZATION		4 FUNDS		5 LWOP HOURS		
036130		FLURES DANIEL			51 700		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	09	2	\$ 9,631	04/06/69	GS	09	3	\$ 9,942	04/05/70		
CERTIFICATION AND AUTHENTICATION											
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.											
SIGNATURE						DATE					
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD											
CLEER'S INITIALS								AUDITED BY			
FORM 7-68 560 E Use previous editions		PAY CHANGE NOTIFICATION						(4.31)			

5/11/70

545

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MMMM

1.3

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-204 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	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	700	GS 09 2	8 9,631

"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: 29 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	700	GS 09 2	810,210

JLD: 24 APR 69

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

COF

1 SERIAL NUMBER 036130	2 NAME (LAST FIRST MIDDLE) FLORES DANIEL
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3 NATURE OF PERSONNEL ACTION	4 EFFECTIVE DATE 04 10 69	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 0884 0000	50 USC 403 J

9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3	10 LOCATION OF OFFICIAL STATION
STATION BASE	

11 POSITION TITLE OPS OFFICER	12 POSITION NUMBER 0376	13 SERVICE DESIGNATION D
----------------------------------	----------------------------	-----------------------------

14 CLASSIFICATION SCHEDULE (OS, IS, ON, OY)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
GS	0136.01	09 2	8744

18 REMARKS

MARITAL STATUS: MARRIED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 55	20 EMPLOY CODE 10	21 OFFICE CODING 51700 WH	22 STATION CODE 19559	23 INTEGRAL CODE	24 PAY GRADE 3	25 DATE OF BIRTH 08 04 35	26 DATE OF GRADE	27 DATE OF LEI
28 NTE EXPIRES	29 SPEC AL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 Correction - Cancellation Code	33 SECURITY BENEF NO		34 SER	
35 VET PREFERENCE	36 SERV COMP DATE	37 LONGER COMP DATE	38 CAREER CATEGORY	39 REG. HEALTH INSURANCE	40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA			
45 NO. PREVIOUS SERVICE		46 NO. YEARS IN SERVICE	47 NO. YEARS IN SERVICE	48 NO. YEARS IN SERVICE	49 NO. YEARS IN SERVICE	50 NO. YEARS IN SERVICE	51 NO. YEARS IN SERVICE	52 NO. YEARS IN SERVICE

SIGNATURE OF OTHER AUTHENTICATION

POSTED

[Handwritten Signature]

PLW

SECRET

PLW

FORM 1152
1-69
WHY-10-69

SECRET
(When Filled In)

JLE: 22 APR 69

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION, TRANSFER TO CONFIDENTIAL FUNDS AND CHANGE OF SERVICE DESIGNATION			4 EFFECTIVE DATE 04 16 69
5 CATEGORY OF EMPLOYMENT REGULAR			6 FUND SYMBOL 50 USC 403 J
7 FUND SYMBOL V TO V CF TO V		8 CFC OR OTHER LEGAL AUTHORITY	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 STATION BASE			
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 0376	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS 18-44) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP GS 2	17 SALARY OR RATE 3744
18 REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 20	20 EMPLOY CODE 10	21 OFFICE CODING NUMBER 51700 ALPHABETIC WH	22 STATION CODE 19559	23 PAY GRADE 3	24 DATE OF BIRTH 08 04 35	25 DATE OF GRADE 04 06 69	26 DATE OF LEI 04 06 69
28 PTE EMPLOY	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1. CIV 2. MIL 3. PFA 4. PFA	31 SEPARATION DATA CODE	32 EMPLOYER CONTRIBUTION DATA	33 SECURITY REQ NO		34 SER
35 VET PREFERENCE	36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 REGU / HEALTH INSURANCE	40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA		

SIGNATURE OR OTHER AUTHENTICATION

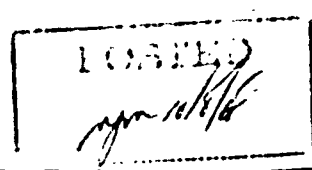
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042369 042

FORM 1150
1-69
Use Previous Edition

MOBT SF

JLU: 7 OCT 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL								
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				4 EFFECTIVE DATE MO DA '68 10 06 68		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 9235 0620 0000		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J		
9 ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 4 SECTION					10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 1441		13 SERVICE DESIGNATION SJ				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 08 2		17 SALARY OR RATE 7956			
18 REMARKS										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19 ACTION CODE 37	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC 51450 ALPHABETIC WH		22 STATION CODE 75013	23 INTEGREE CODE	24 Major Code 1	25 DATE OF BIRTH MO DA 'YY 08 04 35		26 DATE OF GRADE MO DA 'YY	27 DATE OF LEI MO DA 'YY
28 NTE EXPRESS MO DA 'YY		29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 F W 2 CA 3 FIA 4 NONE		31 SEPARATION DATA CODE	32 Correction / Completion Date MO DA 'YY		33 SECURITY REG NO	34 SEX	
35 VET PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT		36 SERV COMP DATE MO DA 'YY		37 LONG COMP DATE MO DA 'YY		38 CAREER CATEGORY CAR 011 PROX 011		39 REGU / HEALTH INSURANCE CI OR 0 1 YES 2 NO		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			
SIGNATURE OR OTHER AUTHENTICATION										
FROM CTP										

FORM 1130
1-68
10-10-67

Use Previous Edition

SECRET

SF.

Included from automatic downgrading and declassification

(When Filled In)

"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
FLORES DANIEL	036130	28	300	V GS 08 2	\$ 7,630	\$ 7,956

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 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
FLORES DANIEL	036130	28	300	V GS 06 3	\$ 6,263	\$ 6,547

JLB: 24 JUN 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)													
036130		FLORES DANIEL													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
PROMOTION						MO DA YR 06 16 68		REGULAR							
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY							
X						8275 2100 0000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDS/OTR CAREER TRAINING PROGRAM						WASH., D.C.									
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION							
CAREER TRAINEE						0745		SJ							
14. CLASSIFICATION SCHEDULE (GS, LB, OR)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE						
GS			0090.01			GS 2			7630						
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. MILITARY CODE	25. DATE OF BIRTH			26. DATE OF GRADE		27. DATE OF ESI			
22	10	NUMBER	ALPHABETIC	75013		1	MO	DA	YR	MO	DA	YR	MO	DA	YR
		28300	CTP				06	04	35	06	16	68	06	16	68
28. INT. EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction - Cancellation Data			33. SECURITY REQ NO	34. SEA			
				1. CSC 2. CIA 3. FICA 5. OTHER				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		NONE	SPT	10 PT	MO	DA	YR	MO	DA	YR	CODE	CODE	0 - WAIVER	HEALTH INS. CODE	1 - YES
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA					
CODE				FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX EXEMPTIONS	STATE CODE		
1. NO PREVIOUS SERVICE 2. BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 3 YRS. 4. BREAK IN SERVICE MORE THAN 3 YRS.				1 - YES 2 - NO			1 - YES 2 - NO			1 - YES 2 - NO					
SIGNATURE OR OTHER AUTHENTICATION															

POSTED
6-27-68

FORM 1150
5-64 10-67

Use Previous Edition

SECRET JLB

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

SECRET
(When Filled In)

FVD: 15 DEC 67

NOTIFICATION OF PERSONNEL ACTION

001

1 SERIAL NUMBER 030130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION			4 EFFECTIVE DATE MO. DA. YR. 12 17 67
5 CATEGORY OF EMPLOYMENT REGULAR			6 ESC OR OTHER LEGAL AUTHORITY
7. Financial Analysis No. Chargeable 6275 2100 0000	8 ESC OR OTHER LEGAL AUTHORITY 50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS JCS/OTR CAREER TRAINING PROGRAM		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE CAREER TRAINEE		12 POSITION NUMBER 0748	13 SERVICE DESIGNATION SJ
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0050.01	16 GRADE AND STEP 07 2	17. SALARY OR RATE 6859
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 22	20 Employ Code 10	21. OFFICE CODING NUMERIC ALPHABETIC 28300 UTP	22. STATION CODE 75013	23 INTEGREE CODE	24. Hdqtrs Code 1	25 DATE OF BIRTH MO DA YR 08 04 35	26 DATE OF GRADE MO DA YR 12 17 67	27 DATE OF LEI MO DA YR 12 17 67	
28. NTE EXPIRES MO. DA. YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 - CSC 2 - CIA 3 - PICA 4 - NONE	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA		33 SECURITY REQ NO	34 SER	
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 PERS CODE 1 - PERM 2 - TEMP	39 FEGLI / HEALTH INSURANCE CODE CODE 0 - WAIVER 1 - YES	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 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)	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 (ELEM) 1 - YES 2 - NO					

SIGNATURE OR OTHER AUTHENTICATION

POSTED
RW
12-26-67

FORM 1150
5-66

Use Previous Edition

SECRET

FVD

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

MAH: 20 SEPT 67

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)													
036130		FLORES DANIEL													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
CHANGE OF COST CENTER NUMBER						09 07 67		REGULAR							
6. FUNDS		X		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY					
CF TO V		CF TO CF		8235 0620 0000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONS SUPPORT SECTION						WASH., D.C.									
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION							
INTELLIGENCE ASST						1174		D							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE						
GS			0301.28			06 3			6263						
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 LEI		
37	10	NUMERIC	ALPHABETIC	75013		1	MO	DA	YR	MO	DA	YR	MO	DA	YR
		51500 WH					08	04	35						
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REG NO.		34. SER		
NO DA YR		1 - CBC 2 - CIA 3 - FICA 4 - OTHER		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		0 - NONE 1 - 5 PT 2 - 10 PT		NO DA YR		CAR M/SV 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: CODE NO TAX EXEMPTIONS			FORM EXECUTED: CODE NO TAX EXEMPT						
SIGNATURE OR OTHER AUTHENTICATION															

FORM 1150

Use Previous Edition

SECRET

MAH

GROUP 1 Excluded from automatic downgrading and declassification

(When Filled In)

SECRET *6-43*
(When Filled In)

Pub

NOTIFICATION OF PERSONNEL ACTION

DDS 10/07/67

1 SERIAL NUMBER	2 NAME (LAST-FIRST MIDDLE)
036130	FLORES DANIEL

3 NATURE OF PERSONNEL ACTION CONV. TO CAREER EMPLOYEE STATUS	4 EFFECTIVE DATE			5 CATEGORY OF EMPLOYMENT
	MO	DA	YE	
	03	11	65	
6 FUNDS	7 FINANCIAL ANALYSIS NO (CHARGEABLE)		8 CSC OR OTHER LEGAL AUTHORITY	
	<input checked="" type="checkbox"/> X	<input type="checkbox"/> V TO V		
	<input type="checkbox"/> CF TO V	<input type="checkbox"/> CF TO CF		

9 ORGANIZATIONAL DESIGNATIONS DUP/HH DIVISION	10 LOCATION OF OFFICIAL STATION
--	---------------------------------

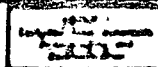
11 POSITION TITLE	12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION D
-------------------	--------------------	------------------------------------

14 CLASSIFICATION SCHEDULE (GS, LR, etc.)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
---	------------------------	-------------------	-------------------

18 REMARKS

SIGNATURE OF OTHER AUTHENTICATION

FOR FILED
[Signature]



SECRET
(When Filled In)

MAIL: 28 JULY 67

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 036130	2. NAME (LAST-FIRST-MIDDLE) FLORES DANIEL
----------------------------	--

3. NATURE OF PERSONNEL ACTION PROMOTION & PAY ADJUSTMENT TO FULL TIME	4. EFFECTIVE DATE MO DA YR 07 13 67	5. CATEGORY OF EMPLOYMENT REGULAR
--	---	--------------------------------------

6. FUNDS	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY
X V TO V CF TO V	8235 1152 0000	50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION	10. LOCATION OF OFFICIAL STATION WASH., D.C.
--	---

11. POSITION TITLE INTELLIGENCE ASST	12. POSITION NUMBER 1174	13. SERVICE DESIGNATION D
---	-----------------------------	------------------------------

14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0301, 28	16. GRADE AND STEP 06 3	17. SALARY GS RATE 6263
--	-------------------------------------	----------------------------	----------------------------

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 28	20. EMPLOY CODE 10	21. OFFICE CODING ALPHABETIC 51500 WH	22. STATION CODE 75013	23. EMPLOYEE CODE	24. HEIGHT CODE	25. DATE OF BIRTH MO DA YR 08 04 35	26. DATE OF GRADE MO DA YR 07 30 67	27. DATE OF LEI MO DA YR 07 13 67
28. MTE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA CSC 1. CIP 2. PIA 3. WCA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ NO	34. SER	EOD DATA	
35. VET PREFERENCE CODE 0 NONE 1 5 YRS 2 10 YRS	36. LEAVY COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE COP GENL PROV TEMP	39. FEEL/HEALTH INSURANCE CODE S DATED 1-788	40. SOCIAL SECURITY NO			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO SERVICE IN SERVICE 2 SERVICE IN SERVICE LESS THAN 1 YR 3 SERVICE IN SERVICE 1-2 YRS		42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE 100 PROCEDEL CODE 1 YES 2 NO	44. FEDERAL TAX DATA CODE 100 PROCEDEL CODE 1 YES 2 NO	45. STATE TAX DATA CODE 1 YES 2 NO	46. STATE TAX DATA CODE 1 YES 2 NO		

SIGNATURE OR OTHER AUTHENTICATION

POSTED
08-07-67

653

Serial No.		Name		Last Letter Number		LWOP Status				
036130		FLORES DANIEL		51 500 V						
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	ISI	ADI
GS 05	3	\$ 5,573	03/14/65	GS 05	4	\$ 5,694	03/13/66			
8 Remarks and Authentication										
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>DA</i> AUDITED BY <i>[Signature]</i>										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>[Signature]</i> DATE 9 FEB 1966										
PAY CHANGE NOTIFICATION										

Form 145 500E May 1965

(4-51)

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

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	51	500 V	GS 05 4	\$ 5,694	\$ 5,859

FJH: 21 SEPT 66

SECRET
(When Filled In)

OCF NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130 2. NAME (LAST-FIRST-MIDDLE) FLORES DANIEL

3. NATURE OF PERSONNEL ACTION REASSIGNMENT 4. EFFECTIVE DATE 09 | 19 | 66 5. CATEGORY OF EMPLOYMENT PART TIME

6. FUNDS X V TO V V TO CF CF TO V CF TO CF 7. COST CENTER NO CHARGEABLE 7235 1162 0000 8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION 10. LOCATION OF OFFICIAL STATION WASH., D.C.

11. POSITION TITLE INTELLIGENCE CLERK 12. POSITION NUMBER 1176 13. SERVICE DESIGNATION D

14. CLASSIFICATION SCHEDULE (GS, LS, etc) GS 15. OCCUPATIONAL SERIES 0301.27 16. GRADE AND STEP 05 4 17. SALARY OR RATE 5859

REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

Form with fields: ACTION CODE, 30 EMPLOY CODE, 31 OFFICE CODING, 32 STATION CODE, 33 INTEGRITY CODE, 34 MODIFY CODE, 35 DATE OF BIRTH, 36 DATE OF GRADE, 37 DATE OF LET, 38 SECURITY REG NO., 39 SER, 39A NTE EXPIRES, 39B SPECIAL REFERENCE, 39C RETIREMENT DATA, 39D SEPARATION DATA CODE, 39E CORRECTION/CANCELLATION DATA, 39F FEDERAL TAX DATA, 39G STATE TAX DATA, 39H SOCIAL SECURITY NO., 39I PREVIOUS GOVERNMENT SERVICE DATA, 39J LEAVE CAT CODE, 39K FEDERAL TAX DATA, 39L STATE TAX DATA.

POSTED

FORM 1150

Use Previous Edition

SECRET

FORM 1150-1 (Rev. 1-66) (When Filled In)

SECRET
(When Filled In)

RZF: 28 JAN 66

NOTIFICATION OF PERSONNEL ACTION

OCF

1 SERIAL NUMBER 036130		2 NAME (LAST-FIRST MIDDLE) FLORES DANIEL	
3 NATURE OF PERSONNEL ACTION CHG IN STRENGTH COUNT			4 EFFECTIVE DATE 01 30 66
			5 CATEGORY OF EMPLOYMENT PART TIME
6 FUNDS X		V TO V CF TO V	V TO CF CF TO CF
7 COST CENTER NO. CHARGEABLE 6235 1162 0000		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE INTELLIGENCE CLERK		12 POSITION NUMBER 1184	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15 OCCUPATIONAL SERIES 0301.27	16 GRADE AND STEP 05 3	17 SALARY OR RATE 5523
18 REMARKS THIS ACTION CORRECTS COMPUTER CODING TO REFLECT CHANGE IN STRENGTH COUNT OF PART TIME PERSONNEL IN ACCORDANCE WITH PROVISIONS OF HR-20-10, REVISED 21 DECEMBER 1965.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 33	20 EMPLOY. CODE 36	21 OFFICE CODING NUMERIC: 51500 ALPHABETIC: WH	22 STATION CODE 75013
23 INTEGRAL CODE		24 HOURS	25 DATE OF BIRTH 08 04 35
26 DATE OF GRADE		27 DATE OF LEA	
28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE
32 CORRECTION/CANCELLATION DATA		33 SECURITY REG NO	
34 VET. PREFERENCE		35 SERV COMP DATE	36 LONG COMP. DATE
37 CAREER CATEGORY		38 FEGLI / HEALTH INSURANCE	
39 SOCIAL SECURITY NO		40	
41 PREVIOUS GOVERNMENT SERVICE DATA		42 LEAVE CAT.	
43 FEDERAL TAX DATA		44 STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION			

FORM 1150
11 62

Use Previous Edition

SECRET

[Handwritten Signature]

When Filled In

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
FLORES DANIEL	036130	51	500	V GS 05 3	\$ 5,330	\$ 5,523

DATE: 25 AUG 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130	7. NAME (LAST-FIRST-MIDDLE) FLORES DANIEL
----------------------------	--

3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE 08 25 65	5. CATEGORY OF EMPLOYMENT PART TIME
6. FUNDS	X V TO V CF TO V	7. COST CENTER NO. CHARGEABLE 6235 1162 (XXX)	8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION	10. LOCATION OF OFFICIAL STATION WASH., D.C.
--	---

11. POSITION TITLE INTELLIGENCE CLERK	12. POSITION NUMBER 1184	13. SERVICE DESIGNATION D
--	-----------------------------	------------------------------

14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0301.27	16. GRADE AND STEP 05 3	17. SALARY OR RATE 5330
--	------------------------------------	----------------------------	----------------------------

18. REMARKS

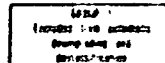
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 20	21. OFFICE CODING NUMERIC: 515(X) ALPHABETIC: WH	22. STATION CODE 75(1)3	23. INTEGREE CODE	24. MAINT. CODE 1	25. DATE OF BIRTH 08 04 35	26. DATE OF GRADE	27. DATE OF LEI
28. WEE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CSC 2 - FICA 3 - NONE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA EOD DATA	33. SECURITY REQ NO	34. SEX		
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY LAN PERM RESV TEMP	39. FEGLI / HEALTH INSURANCE CODE CODE 0 - WAIVER 1 - YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA 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 EXEMPTED: CODE NO TAX EXEMPTIONS 1 - YES 2 - NO	44. STATE TAX DATA FORM EXEMPTED: CODE NO TAX EXEMPT 1 - YES 2 - NO					

SIGNATURE OR OTHER AUTHENTICATION

8 27 65 W

J. J. J.



1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours				
036130		FLORES DANIEL		49 130 ^{36F} _v						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS 05	2	\$ 5,165	03/15/64	GS 05	3	\$ 5,330	03/14/65			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>YKS</i> AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>[Signature]</i> DATE 15 Feb. 1964										
PAY CHANGE NOTIFICATION										

MAR 11 1964

DLB: 5 FEB 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)													
036130		FLORES DANIEL													
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT									
PAY ADJUSTMENT TO PART TIME FROM FULL TIME				NO. DA. YR 02 03 65		PART TIME									
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X						5235 1162 0000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION										
DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION					WASH., D. C.										
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION								
INTELLIGENCE ASST					1130		D								
14. CLASSIFICATION SCHEDULE (CS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE								
GS			0301.28		05 2		5165								
18. REMARKS															
SUBJECT TO WORK ON REGULARLY SCHEDULED TOUR NOT TO EXCEED 19 HOURS PER WEEK. SUBJECT WILL BE WORKING MONDAY THROUGH FRIDAY, FROM 1400 TO 1700.															
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. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI					
28	28	NUMERIC	ALPHABETIC				MO	DA	YR	MO	DA	YR	MO	DA	YR
		49150	SAS	75013		1	03	04	35	03	16	64	03	16	64
28. USE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA		33. SECURITY REG NO		34. SER REG NO			
NO DA YR				1 - CSC 2 - PICA 3 - NONE				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		NO. DA YR		NO. DA. YR		CAR RES. CODE		CODE		D WAIVER HEALTH INS CODE					
0 - NONE 1 - 5 PT 2 - 10 PT						PRCA TEMP		0 - YES 1 - YES							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA							
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YRS 3 - BREAK IN SERVICE MORE THAN 3 YRS						FORM EXECUTED CODE NO TAX EXEMPTIONS		FORM EXECUTED CODE NO TAX STATE CODE							
						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="margin: 0;">POSTED</p> <p style="margin: 0; font-family: cursive;">02/05/65 WK</p> </div>															

1150

Use Previous Edition

SECRET

14-00000
When Filled In

(When Filled In)

DLB: 9 FEB 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 036130		2. NAME (LAST FIRST MIDDLE) FLORES DANIEL	
3. NATURE OF PERSONNEL ACTION PAY ADJUSTMENT TO PART TIME FROM FULL TIME (CORRECTION)			4. EFFECTIVE DATE MO DA YR 02 08 65
5. CATEGORY OF EMPLOYMENT PART TIME			6. COST CENTER NO CHARGEABLE 5235 1162 0000
7. CX OR OTHER LEGAL AUTHORITY 50 USC 403 J			8. CX OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION		10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE INTELLIGENCE ASST		12. POSITION NUMBER 1130	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc) GS		15. OCCUPATIONAL SERIES 0301.28	16. GRADE AND STEP 05 2
17. SALARY OR RATE 5165		18. REMARKS THIS ACTION CORRECTS FORM 1150 EFFECTIVE DATE 02/08/65 AS FOLLOWS: ITEM #19, ACTION CODE, WHICH READ 28, TO READ 31. ITEM #20, EMPLOYEE CODE, WHICH READ 36, TO READ 20.	

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 31	20. EMPLOY CODE 20	21. OFFICE (ODINS) NUMERICAL ALPHABETIC 49150 SAS	22. STATION CODE 75013	23. INTERSEE CODE	24. RANGE CODE 1	25. DATE OF BIRTH MO DA YR 08 04 35	26. DATE OF GRADE MO DA YR 03 16 64	27. DATE OF LET MO DA YR 03 16 64
28. NTE EXPICES MO DA YR	29. SPECIAL DEFERENCE	30. RETIREMENT DATA 1. CODE 2. DATE	31. SEPARATION DATA CODE	32. CONNECTION, CANCELLATION DATA TYPE MO DA YR	33. SECURITY R10 NO	EOD DATA		
34. VET PREFERENCE CODE 0 000 1 001 2 002	35. SMOY COMP DATE MO DA YR	36. LOMV COMP DATE MO DA YR	37. CAREER CATEGORY CODE	38. PEGAS/HEALTH INSURANCE CODE	39. SOCIAL SECURITY NO			
40. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 NO PREVIOUS SERVICE 1 NO SERVICE IN SERVICE 2 SERVICE IN SERVICE LESS THAN 1 YEAR 3 SERVICE IN SERVICE MORE THAN 1 YEAR		41. LEAVE CODE CODE	42. FEEDBACK DATA CODE	43. STATE USE DATA CODE				

SIGNATURE OR OTHER AUTHENTICATION

FOSTED

[Handwritten Signature]

FORM 1150

Use Previous Edition

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

When Filled In

MHC: 6 AUG 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
036130		FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT					08 06 64		REGULAR		
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		5235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SAS COUNTER-INTELL STAFF OPERATIONS SECTION					WASH., D.C.				
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION		
INTELLIGENCE ASST					1130		D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			0301.28		05 2		4850		
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. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES
37	10	49150 SAS		75013		1	08 04 35		
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA		33. SECURITY REG NO	34. SER
						EOD DATA			
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE	
40. PREVIOUS GOVERNMENT SERVICE DATA				41. LEAVE CAT		42. FEDERAL TAX DATA		43. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 10-1110 08/13/64 </div>									

FORM 1150

Use Previous Edition

SECRET 6 AUG 1964

Check number and category. Do not fill in. (When Filled In)

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 07/01/64

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLCRBS DANIEL			
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE MO DA YR 06 19 64		5 CATEGORY OF EMPLOYMENT
6 FUNDS		7 COST CENTER NO CHARGEABLE		8 (X) OR OTHER LEGAL AUTHORITY	
V TO V		V TO (F)		4232 1000 1000	
CF TO V		CF TO (F)			
9 ORGANIZATIONAL DESIGNATIONS DDP/SAS INTELL ST OPS SUP SEC			10 LOCATION OF OFFICIAL STATION WASH., D. C.		
11 POSITION TITLE TRANSLATOR			12 POSITION NUMBER 0922	13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, LB, etc) GS		15 OCCUPATIONAL SERIES 1049.01	16 GRADE AND STEP 05	17 SALARY OR RATE	
18 REMARKS					
SIGNATURE OR OTHER AUTHENTICATION <i>7/1/64 [Signature]</i>					

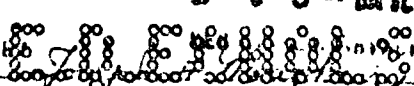
Form 1120
1-63 (MFL 1-63)

Use Previous
Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

1. Serial No		2. Name		3. Cost Center Number		4. LWOP Hours				
036130		FLORES DANIEL		49 350		38F V				
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Low EH Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS 04	2	\$ 4,355	03/17/63	GS 04	3	\$ 4,495	03/17/64			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE						DATE				
						31 Jan 1964				
PAY CHANGE NOTIFICATION										

DEC PAYROLL BRANCH
 MAR 9 3 53 PM '64

Form 961 560 Obsolete Previous Edition (431)

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. RIGHTS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
22	10	NUMERIC: 49350	ALPHABETIC: SAS	75013		1	08 04 35	03 15 64	03 15 64
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO	34. SER
35. VET PREFERENCE		36. SERV. COMP DATE		37. LONG COMP DATE	38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE	43. FEDERAL TAX DATA			44. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> POSTED 03/17/64 DK </div>									

FORM 1150 11 62

Use Previous Edition

SECRET

1. Includes Form 1000
 2. Form 1000-1-64
 3. Form 1000-1-64

(When Filled)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1950, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 9 JANUARY 1964.

NAME	SERIAL	ORGAN FUNDS	GR-ST	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	49 350 V	GS 04 2	\$ 4,250	\$ 4,395

SECRET
(When Filled In)

RZP: 3 MAY 63

NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER		2 NAME (LAST-FIRST MIDDLE)							
036130		FLORES DANIEL							
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
REASSIGNMENT				05 09 63		REGULAR			
6 FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY		9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
X		3232 1000 1000		50 USC 403 J		DDP/SPECIAL AFFAIRS STAFF RESEARCH BRANCH REPORTS, RECORDS, TRANSLATION SEC		WASH., D.C.	
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION			
TRANSLATOR				0702		D			
14 CLASSIFICATION SCHEDULE (GS, LO, etc.)			15. OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE		
GS			0031.01		04 2		4250		
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 INTEGRAL CODE	
37		10		31350 SAS		75013			
24 DATE OF BIRTH		25 DATE OF GRADE		26 DATE OF LEI		27 DATE OF BIRTH		28 DATE OF GRADE	
03 04 35						03 04 35			
29 DATE EXPIRES		30 SPECIAL REFERENCE		31 RETIREMENT DATA		32 SEPARATION DATA CODE		33 CORRECTION/CANCELLATION DATA	
								EOD DATA	
34 NET PREFERRED		35 LEAV (COMP DATE)		36 LONG (COMP DATE)		37 CAREER CATEGORY		38 FECL/HEALTH INSURANCE	
39 PREVIOUS GOVERNMENT SERVICE DATA		40 LEAVE CAT		41 FEDERAL TAX DATA		42 STATE TAX DATA		43 SOCIAL SECURITY NO	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>POSTED</p> <p>12 May 1963 J.L.</p> </div>									

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

AMPD 07/31/63

1 SERIAL NUMBER 036130		2 NAME (LAST FIRST MIDDLE) FLORES DANIEL			
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE MO DA YE 07 21 63	5 CATEGORY OF EMPLOYMENT	
6 FUNDS	<input checked="" type="checkbox"/> X	V TO V	V TO CF	7 COST CENTER NO. CHARGEABLE 4232 1000 1000	8 CSC OR OTHER LEGAL AUTHORITY
		CF TO V	CF TO CF		
9 ORGANIZATIONAL DESIGNATIONS DDP/SAS			10 LOCATION OF OFFICIAL STATION WASH., D.C.		
11 POSITION TITLE TRANSLATOR			12 POSITION NUMBER 0702	13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS 18, etc) GS		15 OCCUPATIONAL SERIES 1045:01	16 GRADE AND STEP 04	17 SALARY OR RATE	
18 REMARKS					
<div data-bbox="954 1474 1253 1634" data-label="Text"><p>POSTED <i>[Signature]</i></p></div>					
SIGNATURE OR OTHER AUTHENTICATION					

2061200

1. Serial No. 036130		2. Name FLORES DANIEL			3. Cost Center Number 39 400 V 9			4. LWOP Hours		
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 04	1	\$ 4,110	03/11/62	GS 04	2	\$ 4,250	03/17/63			
8. Remarks and Authentication										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY _____ I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. SIGNATURE: _____ DATE 7 Feb, 1963 _____ PAY CHANGE NOTIFICATION										

Form 560
9-61

Obsolete Previous Edition

(6-51)

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

NAME	SERIAL	ORGN	FUNDS	OLD GRST SALARY	NEW GRST SALARY
FLORES DANIEL	036130	39400	V 04 1	\$ 4040	04 1 \$ 4110

BWS: 13 MARCH 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)								
036130		FLORES DANIEL								
3 NATURE OF PERSONNEL ACTION					4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT			
EXCEPTED APPOINTMENT (CAREER PROVISIONAL)					MO DA YR 03 11 62		REGULAR			
6 FUNDS		7 COST CENTER NO. CHARGEABLE		8 CSC OR OTHER LEGAL AUTHORITY						
X		2226 1200 1000		50 USC 403 J						
9 ORGANIZATIONAL DESIGNATIONS					10 LOCATION OF OFFICIAL STATION					
DDP OPSER R I DIV REFERENCE BRANCH INDEX SECTION - NICHT SHIFT					WASH., D. C.					
11 POSITION TITLE					12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION			
FILE CLERK					0147		D			
14 CLASSIFICATION SCHEDULE (GS, LB, etc)			15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
GS			0305.01		04 1		4040			
18 REMARKS										
SUBJECT TO THE SATISFACTORY COMPLETION OF A TRIAL PERIOD OF ONE YEAR. SUBJECT TO THE SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION.										
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	
11	10	NUMERIC	ALPHABETIC	75013		1	MO DA YR	MO DA YR	MO DA YR	MO DA YR
		39400	RI				08 04 35	03 11 62	03 11 62	
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 CORRECTION/CANCELLATION DATA		33 SECURITY REG. NO.
MO DA YR			1 CSC 2 PFA 3 NONE	CODE	DATA CODE	TYPE	MO DA YR			07100
				1						MI
35 VET PREFERENCE		36 SERV COMP DATE		37 LONG COMP DATE		38 MIL. SERV CREDIT/LED		39 FEGLI / HEALTH INSURANCE		40 SOCIAL SECURITY NO.
CODE	0 NONE 1 5 PT 2 10 PT	MO DA YR	MO DA YR	MO DA YR	1 YES 2 NO	CODE	CODE	0 - WAIVER 1 YES	HEALTH INS CODE	460486230
0		03 11 58	03 11 62			P	1			
41 PREVIOUS GOVERNMENT SERVICE DATA				42 LEAVE CAT		43 FEDERAL TAX DATA		44 STATE TAX DATA		
CODE	0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 12 MOS) 3 BREAK IN SERVICE (MORE THAN 12 MOS)	CODE	FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX EXEMPTIONS	STATE CODE	
0		6	1 YES 2 NO	1	0	1 YES 2 NO	1	0	08	
SIGNATURE OR OTHER AUTHENTICATION										

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION							
1. EMPLOYEE NUMBER	2. NAME (Last, first, middle)		3. DATE OF BIRTH	4. SEX	5. GRADE	6. SU	
	Flores, Daniel		4 Aug 35	M	GS13	DQG	
7. OFFICIAL POSITION TITLE			8. DIVISION OF ASSIGNMENT		9. STATION		
Ops. Officer			DDO/LA		Mexico City		
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL	
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (FROM-TO)		14. DATE REPORT DUE IN U.P.		
		10 Oct 78 - 30 Sep 79					

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C PERFORMANCE EVALUATION

U-Unsatisfactory 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 D.

M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S-Strong Performance is characterized by exceptional proficiency.

O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	RATING LETTER
SEE ATTACHED MEXICO CITY TELEPOUCH 51744 (in 3383966) dtd 13 Nov 79.	
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal personal traits or habits, and pertinent transferences or reports. 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

CLASSIFICATION

SECTION D

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet.

NOV 15 3 01 AM '79

MAIL ROOM

SEE ATTACHED.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

13 Nov 79

OFFICIAL TITLE OF SUPERVISOR

DCOS

TYPED OR PRINTED NAME AND SIGNATURE

Robert Berg /S/

2. BY EMPLOYEE

I HAVE OR HAVE NOT ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

13 Nov 79

OFFICIAL TITLE OF REVIEWING OFFICIAL

COS

TYPED OR PRINTED NAME AND SIGNATURE

/S/

4. BY EMPLOYEE

I HAVE OR HAVE NOT ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

CLASSIFICATION

/20/ *EYES ONLY*

CONFIDENTIAL

FRP:

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (653) INFO: RF, FILE, (7/W)

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PAGE 001

3383966

TOR: 132307Z NOV 79

51744

CONFIDENTIAL 132241Z NOV 79 DEFERRED TELEPOUCH

CITE [] 51744

TO: WASHINGTON.

FOR: C/LA/PERS

SUBJECT: ADMIN/RYPAT/PERS/FR FOR ~~XXXXXXXXXX~~

Daniel Flores

1. GIVEN BELOW IS THE FITNESS REPORT FOR ~~XXXXXXXXXX~~ FOR THE PERIOD 1 OCT 78 TO 30 SEP 79. RATINGS ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD D. CHALDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY RONALD F. BRIERLEY, COS. THE REPORT HAS BEEN REVIEWED AND CERTIFIED BY SUBJECT. SIGNED COPY OF FORM 45A BEING POUCHED.

2. THE FOLLOWING INFO IS KEYED TO FORM 45N, SECTION A:
1. 03H130; 4. M; 5. GS-13; 6. DQG; 9. []; 10. CAREER;
11. ANNUAL; 12. 1 OCT 78 TO 30 SEP 79.

3. SECTION B. PERFORMANCE EVALUATION - SPECIFIC DUTIES:
1. DIRECTS THE ACTIVITIES OF AN [] MAN CI [] TEAM RESPONSIBLE TO THE STATION. RATING LETTER - S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST [] AND [] IN []. RATING LETTER - S.

3. CASE OFFICER FOR AGENTS AND OPERATIONS DIRECTED AGAINST THE [] TARGET. RATING LETTER - S.

4. SUPPORTS STATION OPERATIONS AND ACTIVITIES DIRECTED AGAINST THE [] AND OTHER TARGETS.

5. CASE OFFICER FOR []. RATING LETTER - S.

OVERALL RATING - STRONG.

0-83 2 [] 51744 C O N F I D E N T I A L

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DEFERRED TELEPOUCH

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TOR: 132307Z NOV 79

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4. SECTION C - NARRATIVE COMMENTS.

SHORTLY BEFORE THE DEPARTURE OF THE FORMER COS, HE SUBMITTED A SPECIAL MEMORANDUM ON SUBJECT'S PERFORMANCE ([REDACTED] 50702) WHICH CONCENTRATED MOSTLY ON SUBJECT'S RESPONSIBILITIES IN THE CI FIELD. A COPY OF THIS MEMORANDUM IS AVAILABLE IN SUBJECT'S PERSONNEL FILE. THE UNDERSIGNED FULLY ENDORSES THE LAUDATORY COMMENTS IN THAT MEMORANDUM, BUT SINCE SUBJECT HAS TAKEN ON BROADER RESPONSIBILITIES, IT IS NECESSARY TO COMMENT ON OTHER ASPECTS OF HIS WORK.

FOR THE PAST MONTHS, SUBJECT HAS BEEN DIVIDING HIS TIME ABOUT EQUALLY BETWEEN HIS CI RESPONSIBILITIES AND OTHER STATION OBJECTIVES, PRINCIPALLY THE [REDACTED] TARGET. SUBJECT WAS GIVEN THESE ADDITIONAL DUTIES BECAUSE THE CI OPERATIONS GROUP IS WELL ORGANIZED AND REQUIRES LESS DIRECT C/O INPUT, AND ALSO BECAUSE OF THE NEED TO DEDICATE ALL AVAILABLE RESOURCES AGAINST THE [REDACTED] TARGET. THIS STATION IS [REDACTED] OF [REDACTED] WITHIN THE DIRECTORATE WHICH HAVE BEEN SELECTED FOR A CONCENTRATED EFFORT AGAINST [REDACTED] AND THIS TARGET NOW RANKS NUMBER ONE AMONG THE STATION'S MANY PRIORITY OBJECTIVES. SUBJECT'S PAST EXPERIENCE IN [REDACTED] OPERATIONS, HIS ABILITY TO [REDACTED] AS A [REDACTED] IN THIS COUNTRY, AND HIS OTHER STRENGTHS, WERE THE INGREDIENTS WHICH THE STATION NEEDED TO EXPLOIT IN THIS EFFORT.

SUBJECT HAS TAKEN OVER THE PRINCIPAL STATION OPERATION DIRECTED AGAINST [REDACTED]. THIS WAS A FAIRLY NEW OPERATION AT THE TIME IT WAS ASSIGNED TO SUBJECT AND IT WILL MATURE UNDER HIS DIRECTION. FOR REASONS OF SENSITIVITY, A MORE DETAILED REVIEW OF SUBJECT'S WORK ON THIS OPERATION CANNOT BE PROVIDED, BUT THE RECORD SHOULD NOTE THAT DURING THE PAST THREE MONTHS, HE HAS HANDLED THIS OPERATION IN A THOROUGHLY PROFESSIONAL MANNER WITH STEADY PROGRESS BEING MADE TO FULLY EXPLOIT THE OPERATIONAL AND REPORTING POTENTIAL. ALSO DURING THIS REPORTING PERIOD, SUBJECT RENEWED CONTACT THROUGH HIS OWN EFFORTS WITH A FORMER REPORTING ASSET WHO HAD DRIFTED AWAY FROM COLLABORATION WITH THE ORGANIZATION. SUBJECT IS NOW ATTEMPTING TO BREATHE NEW LIFE INTO THIS OPERATION AND BRING IT BACK UNDER CONTROL.

SUBJECT ALSO COOPERATED WITH ANOTHER GOVERNMENT AGENCY IN ATTEMPTING TO RE-ESTABLISH CONTACT WITH A [REDACTED]

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DEFERRED TELEPOUCH

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TOR: 132307Z NOV 79

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[REDACTED] DURING THE TARGET'S VISIT TO THE [REDACTED] AREA. SUBJECT WAS IN CHARGE OF COORDINATING THIS OPERATION WITH [REDACTED] AND WITH THE OTHER AGENCY. THE OPERATION WAS SUCCESSFUL FROM THE POINT OF VIEW OF ARRANGING A MEETING WITH THE TARGET, BUT SINCE THE TARGET'S RETURN TO THE [REDACTED] HE HAS REFUSED EFFORTS BY SUBJECT TO CONTINUE CONTACT.

ANOTHER EFFORT AGAINST THE [REDACTED] TARGET UNDER SUBJECT'S RESPONSIBILITY INVOLVES THE RESOURCES OF THE SPECIAL CI OPERATIONS GROUP. FOR SOME MONTHS NOW, THIS GROUP HAS BEEN TRYING TO MOUNT A [REDACTED] AND PROSPECTS REMAIN ENCOURAGING THAT THIS EFFORT WILL SOON BE OPERATIONAL. THIS IS A FAIRLY COMPLEX UNDERTAKING WHICH REQUIRES PATIENCE AND AN ELEMENT OF GOOD LUCK IN ORDER TO BE SUCCESSFUL. SUBJECT DESERVES CONSIDERABLE CREDIT FOR THE PROGRESS MADE THUS FAR AND IF EVERYTHING GOES ACCORDING TO PLAN, THIS OPERATION SHOULD BE PRODUCING WITHIN A SHORT PERIOD OF TIME.

APART FROM HIS WORK AGAINST THE [REDACTED] TARGET, SUBJECT WAS SUCCESSFUL IN [REDACTED] AND LATER WAS ABLE TO [REDACTED] WITH THE [REDACTED] HIMSELF. FOLLOWING UP ON A LEAD FROM ANOTHER SOURCE THAT A [REDACTED] WITH A [REDACTED] SUBJECT USED HIS NATIVE LANGUAGE AND [REDACTED] UNDER THE GUISE OF BEING A [REDACTED] WHO WANTED TO MONITOR THE [REDACTED] ASSESSMENT INFORMATION OBTAINED FROM THE [REDACTED] GREATLY FACILITATED THE ABILITY OF SUBJECT TO [REDACTED] ONCE CONTACT WAS MADE. SUBJECT WAS ABLE TO DISCERN THAT THE TARGET WAS POTENTIALLY VULNERABLE ON [REDACTED] BUT TIME DID NOT PERMIT THIS VULNERABILITY FROM BEING EXPLOITED BEFORE THE TARGET COMPLETED HIS TOUR AND DEPARTED THE COUNTRY. STATION REGRETS THAT A LEAD TO THIS TARGET WAS NOT IDENTIFIED EARLIER, BUT THIS DOES NOT DETRACT FROM THE PROFESSIONAL MANNER IN WHICH SUBJECT EXPLOITED EVERY OPPORTUNITY TO PUSH THIS CASE FORWARD AGAINST AN UNREALISTIC DEADLINE.

THIS REPORTING PERIOD HAS AGAIN BEEN ONE OF CONSIDERABLE ACTIVITY ON THE PART OF SUBJECT IN WHICH HE HAS DEMONSTRATED HIS TALENT FOR OPERATIONS AND PARTICULARLY HIS ABILITY TO

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DEFERRED TELEPOUCH

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TOR: 132307Z NOV 79

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DEVELOP AND HANDLE AGENTS. HE HAS DISPLAYED VERSATILITY AND FLEXIBILITY IN PURSUING HIS TARGETS AND IS EVER ALERT FOR VULNERABILITIES WHICH CAN BE EXPLOITED. HE USES GOOD JUDGMENT IN HANDLING HIS CASES AND HIS TRADecraft PROCEDURES DURING THIS PERIOD HAVE BEEN SOUND. IT SHOULD ALSO BE NOTED THAT THE PARTICIPAR [] CASES WHICH HE IS INVOLVED ARE NOT EASY ONES. THEY REQUIRE HARD WORK, AND THE FULL RANGE OF CASE OFFICER EXPERIE IN-ORDER TO PUSH THEM FORWARD. HIS RESPONSIBILITIES IN THE CI FIELD ARE EQUALLY DEMANDING. SUBJECT HAS MADE A VERY POSITIVE CONTRIBUTION TO THE WORK OF THIS STATION DURING THIS REPORTING PERIOD AND WELL DESERVES A RATING OF STRONG FOR HIS VARIOUR DUTIES AND A STRONG FOR HIS OVERALL PERFORMANCE.

5. COMMENTS BY REVIEWING OFFICER.

I CONCUR WITH THIS EVALUATION AND BELIEVE IT IS MOST COMPREHENSIVE AND OBJECTIVE. HAVING WORKED WITH SUBJECT DURING AN EARLIER PERIOD OF HIS CAREER WHEN HE WAS THEN A GOOD OFFICER (1970-72), I AM STRUCK BY THE REMARKABLE PROGRESS HE HAS MADE IN THREE KEY AREAS: OPERATIONAL THINKING AND ANALYSIS, WRITING, AND SOUND, PROFESSIONAL APPLICATION OF BASIC OPERATIONAL PRINCIPLES.

I AM DELIGHTED THIS HIGHLY CAPABLE, AGGRESSIVE OFFICER WILL BE REMAINING A THIRD YEAR AT THIS STATION AND LOOK FORWARD TO A MAJOR CONTRIBUTION FROM HIM IN MOST OPERATIONAL AREAS OF PRESENT PRIORITY CONCERN. RVN 13 NOV 79 DRV D9C.3.

END OF MESSAGE

CONFIDENTIAL

CONFIDENTIAL

FITNESS REPORT	NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.
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SECTION A GENERAL INFORMATION

1. EMPLOYEE NUMBER 036130	2. NAME (last, first, middle) Flores, Daniel	3. DATE OF BIRTH 08/04/35	4. SEX M	5. GRADE GS-13	6. SO DQG
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/LA/COG		9. CURRENT STATION Hqs	
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21-MONTH	<input type="checkbox"/> 30-MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to) 1 Dec 76 - 30 Sep 77		13. DATE REPORT DUE IN O.P. 31 October 77

SECTION B PERFORMANCE EVALUATION

U-Unsatisfactory 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.

M-Marginal 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-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S-Strong Performance is characterized by exceptional proficiency.

O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Supervise the LA/COG, [] and [] section which includes two operations officers, one intelligence analyst, and a secretary.	RATING LETTER S
---	---------------------------

SPECIFIC DUTY NO. 2 As section chief, provide operational guidance and support to the field stations' efforts to develop and recruit Cubans in that area.	RATING LETTER S
--	---------------------------

SPECIFIC DUTY NO. 3 Assume direct case officer responsibility for sensitive [] reporting sources, including TDY travel for debriefing purposes when the assets are available; developing leads for potential recruitment efforts against new targets	RATING LETTER S
---	---------------------------

SPECIFIC DUTY NO. 4 Coordinate with other area division desks and components to provide maximum support to Cuban operational activities in their respective field stations.	RATING LETTER S
--	---------------------------

SPECIFIC DUTY NO. 5	RATING LETTER
---------------------	---------------

SPECIFIC DUTY NO. 6	RATING LETTER
---------------------	---------------

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

S
[Handwritten signature]

CONFIDENTIAL

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 future assignments. 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, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Flores came to the Cuba Operations Group from a brief assignment to the Office of Training. Prior to the OTR interim, Mr. Flores had been a COG case officer and was therefore familiar with its operational techniques. During this ten-month period under review, Mr. Flores served as a section chief with responsibilities for [] stations with a [] target ([] and []) and [] Mr. Flores was the only GS-13 officer to hold section chief responsibility, yet his performance compared favorably with that of the GS-14 section chiefs. As a section chief, Mr. Flores was supervisor for [] operations officers, [] intelligence analyst and a secretary. He was responsible for ensuring the prompt handling of correspondence to and from the field stations, and providing operational guidance and direction on matters pertaining to Cuban operations. His section was managed in a competent manner with Mr. Flores demonstrating his ability to delegate functional responsibilities.

The Cuba Operations Group also functions in a direct case officer capacity, and Mr. Flores frequently traveled TDY to handle cases. He was the operations officer for one particularly sensitive and productive [] reporting case. This required him to travel on short notice and to arrange for secure meeting and debriefing sessions of this reporting source.

Mr. Flores also traveled to [] on various occasions to meet with [] contacts and participate in developmental operations. One particular recruitment attempt required Mr. Flores to [] the

--CONTINUED--

SECTION D CERTIFICATION AND COMMENTS

1. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Rating: [] File: []	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
	DC/LA/COG	<i>Donald H. Winters</i> Donald H. Winters

2. BY EMPLOYEE		
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
HAVE ATTACHED [] HAVE NOT ATTACHED []	4 November 1977	<i>Daniel Flores</i> Daniel Flores

3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Subject likes to operate. He is very practical, experienced, and realistic. He is, however, a little quiet and tends to accept things the way they are. While I have no doubt as to his skills, he may need a bit more management experience to learn how to make things move despite obstacles. He has done a fine job running the [] and [] section of Cuba Operations Group.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	C/LA/COG	<i>Frederick W. Latrash</i> Frederick W. Latrash

4. BY EMPLOYEE		
I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	4 November 1977	<i>Daniel Flores</i>

CONFIDENTIAL

FITNESS REPORT

Daniel Flores

NARRATIVE COMMENTS

cont.

[redacted], and to devise a secure and timely method of approach to the individual Cuban.

In comparing Mr. Flores' performance as an operations officer and as a supervisor, I believe his performance is somewhat stronger in the former capacity. Mr. Flores has all the attributes of an excellent case officer: he is aggressive, thinks operationally, and is fast on his feet in an operational situation. He is further aided by his fluency in Spanish and has on more than one occasion successfully [redacted]. During his TDY travels, he has repeatedly demonstrated dedication to the job at hand, willingness to work long hours, and a flexibility to handle all types of situations.

Mr. Flores is less enthusiastic when it comes to the paperwork and bureaucratic requirements of his position. While he is a good writer, he tends to handle his written tasks in a hurried manner and consequently, his work oftentimes requires review. He is also inclined to take the shorter and easier approach when handling the paper flow requirements. I mention these points not because they represent basic shortcomings, but simply to contrast them to his exceptionally high performance in his operations officer capacity.

In sum, Mr. Flores is an extremely experienced, competent and well motivated operations officer. His talent as a "street operator" with a keen sense for the human target has been amply demonstrated. He has now quite successfully been introduced to his first supervisory position and proven that he is competent for assignments of this nature. I believe Mr. Flores is capable of handling positions of increasing responsibility and should be given the opportunity to do so.

* * *

CONFIDENTIAL

SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A						GENERAL INFORMATION					
1. EMPLOYEE NUMBER 036130		2. NAME (Last, first, middle) FLORES, Daniel		3. DATE OF BIRTH 4 Aug 35		4. SEX M		5. GRADE 12		6. GD	
7. OFFICIAL POSITION TITLE Instructor Ops				8. OFF/DIV/BR OF ASSIGNMENT DDA/OTR/LTD		9. CURRENT STATION Hqs.		10. CODE (if any) X HQS		DP	
11. TYPE OF APPOINTMENT						12. TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec)	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL				
13. REPORTING PERIOD (7001-50) 22 June - 19 November 1976						14. DATE REPORT DUE IN O.P. N/A					

SECTION B		QUALIFICATIONS UPDATE	
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD 'YES' IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD 'NO' IN THE BOX AT RIGHT.			

SECTION C		PERFORMANCE EVALUATION	
<u>U-Unsatisfactory</u>		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 D.	
<u>M-Marginal</u>		Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.	
<u>P-Proficient</u>		Performance is satisfactory. Desired results are being produced in the manner expected.	
<u>S-Strong</u>		Performance is characterized by exceptional proficiency.	
<u>O-Outstanding</u>		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.	

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Conducts tutorial training in clandestine operational trade-craft skills for [redacted] as well as U.S. staff and contract personnel.	RATING LETTER S
SPECIFIC DUTY NO. 2 In collaboration with sponsoring Agency components prepares detailed training programs and schedules for the conduct of tailored tutorial and small-group training.	RATING LETTER S
SPECIFIC DUTY NO. 3 Evaluate trainee performance in each program and prepare final training reports, and as appropriate draft follow-up questionnaires for field evaluation of training effectiveness.	RATING LETTER S
SPECIFIC DUTY NO. 4 Participate in live problems and exercises as [redacted] and [redacted] as required and contribute to improvement in training materials and techniques.	RATING LETTER S
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION	
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal presentation, etc. in addition, and previous assignments or ratings. Do not use the advantages of employee's overall performance during the rating period unless the latter is the rating base corresponding to the assignment which was done solely on the basis of performance.</p>	RATING LETTER S

S E C R E T
CLASSIFICATION

SECTION D NARRATIVE COMMENTS

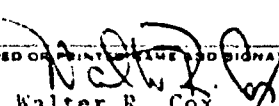
Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain items which provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete comments, use separate sheet of paper.

Mr. Flores joined the [redacted] Unit in mid-June 1976 and after a week's familiarization with training materials, aids and office routine of the Unit, he attended a two-week Instructor Training Workshop at the [redacted]. On completion of the Workshop, Subject returned to the Unit for further familiarization with the routine of the Unit, assisted in several [redacted] problems, and monitored a two-week training program which included active participation as a trainee himself in the SAI (or persuasion skills) portion of the program. Subsequently Mr. Flores assisted as a [redacted] in a brief but significant program involving the training of a [redacted] assisting the Agency in [redacted]. Mr. Flores then assisted another instructor in devising and conducting the first program this Unit has undertaken designed to teach [redacted] to Staff Employees who are deemed likely to be [redacted] of [redacted] and [redacted]. Mr. Flores then planned for, and from 12 October through 19 November conducted a tutorial training program in clandestine operations tech-

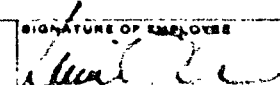
(continued)

SECTION E CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 Months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
17 January 1977	Chief, ALT Unit	Walter R. Cox 	

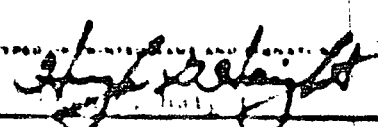
2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	26 Jan 77	

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur in the ratings on specific duties and on the overall rating of STRONG for Mr. Flores. Although he was assigned to this Unit for a short period of time, he was proving to be a well qualified operations instructor. His home Division requested his return in order to give him a responsible position for which he was well qualified, and he should do well on that assignment.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
19/1/77	CHIEF, CERTIFIED	

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED		

4. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED		

14-00000

S E C R E T

Continuation of Section D of Fitness Report on Daniel Flores,
GS-12, for period 22 June - 19 November 1976 -----

niques for a [redacted] who is scheduled to serve as an [redacted]
[redacted] in the [redacted].

The first independent training task given to Mr. Flores was of a [redacted] serving as an access agent, but this task was cancelled at the last minute when the concerned Base discovered grounds for field termination of the agent rather than providing tutorial training for the agent in the U.S. Mr. Flores was justifiably irritated at this turn of events which denied him what held promise for being a challenging initial training program.

It was with regret that we learned, early into what turned out to be Mr. Flores' only independent training program, that a priority requirement of his home-base Division would necessitate his return to Division duty soonest. The Division agreed to our request that Mr. Flores conclude the training program he had tailored, and begun, and Mr. Flores is to be commended for having done an exceptionally fine job in this assignment. The completion-of-training report was also well organized, and the questionnaire which asks for an evaluative follow-up from the trainee's field Station is to the point.

Early in his assignment Mr. Flores took over the maintenance and improvement of the Unit's operations training slides, consolidated them into an extremely functional package, and solicited ideas from other instructors to improve the package. Much to his credit and the Unit's benefit, Mr. Flores managed to persuade another Agency component to undertake--without charge--a major revamping of some of the slides using computer-designed art work to replace some of the less impressive early work in this field.

S E C R E T

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION

1. OFFICIAL POSITION TITLE 036130 Ops Officer	2. NAME (Last, First, Middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS13	6. SU DOG
7. OFFICE OF ASSIGNMENT DDO/LA		8. CURRENT STATION Mexico City			
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> OTHER	13. REPORTING PERIOD (From-To) 15 Feb - 30 Sept 78		14. DATE REPORT DUE IN O.P.

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C PERFORMANCE EVALUATION

- U—Unsatisfactory** 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 D.
- M—Marginal** Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
- P—Proficient** Performance is satisfactory. Desired results are being produced in the manner expected.
- S—Strong** Performance is characterized by exceptional proficiency.
- O—Outstanding** Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 SEE ATTACHED MEXICO CITY 47396 (IN 1584998) dtd 18 Nov 78	RATING LETTER
SPECIFIC DUTY NO. 2	RATING LETTER
SPECIFIC DUTY NO. 3	RATING LETTER
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, personal 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 closely reflects his level of performance.

RATING LETTER

CLASSIFICATION

SECTION D 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 C 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 D, attach a separate sheet of paper.

324 10 50 11 78

NAV ROOM

SEE ATTACHED.

SECTION E CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

Rating Officer Profile:

DATE

OFFICIAL TITLE OF SUPERVISOR

19 15 20 00
TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

DCOS

Robert Berg /S/

2. BY EMPLOYEE

I HAVE OR HAVE NOT ATTACHED A STATEMENT CONCERNING THE SUPERVISOR'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

COS

Lawrence Sternfield /S/

4. BY EMPLOYEE

I CERTIFY I HAVE BEEN THE ENTIRE IN ALL SECTIONS OF THIS REPORT. I HAVE HAVE NOT ATTACHED A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S EVALUATION OF MY PERFORMANCE.

DATE

SIGNATURE OF EMPLOYEE

18 Nov 78

Daniel Flores /S/

CLASSIFICATION

7042EYES ONLY

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FRP:

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (593) INFO: WF, FILE, (7/A)

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1584998
MEXI 47396

C O N F I D E N T I A L 172250Z NOV 78 DEFERRED TELEPOUCH

CITE MEXICO CITY 47396

TO: WASHINGTON.

FOR: C/LA/PERS

SUBJECT: ADMIN/PYRAT/PERS/FITNESS REPORT FOR [REDACTED]

Plu

DAN FLORES

1. GIVEN BELOW IS THE FITNESS REPORT ON SUBJECT FOR THE PERIOD 15 FEB - 30 SEPT 78. RATING ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY MARCO O. CHAIDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY JOEL N. NEBECKER, COS. SUBJECT WAS NOT SHOWN A COPY OF THIS REPORT AS HE DEPARTED STATION ON EMERGENCY LEAVE BEFORE THE REPORT COULD BE TYPED. A COPY WILL BE MADE AVAILABLE TO HIM IMMEDIATELY UPON HIS RETURN AND ANY STATEMENT BY THE EMPLOYEE WILL BE TELEPOUCHED TO HQS. A SIGNED COPY OF FORM 45A WILL BE POUCHED AT THAT TIME.

2. THE FOLLOWING INFO IS KEYED TO FORM 45A, SECTION A:
 1. 036130; 4. M; 5. GS-13; 6. DUG; 9. MEXICO CITY;
 10. CAREER; 11. ANNUAL; 12. 15 FEB-30 SEP 78.

3. SECTION B. PERFORMANCE EVALUTATION - SPECIFIC DUTIES:

1. DIRECTS THE ACTIVITIES OF AN [REDACTED] MAN CI [REDACTED] TEAM RESPONSIBLE TO THE STATION, AND WHICH INCLUDES COORDINATING ALL RTACTION OPS INITIATED BY THE TEAM. RATING LETTER -- S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST [REDACTED] AND [REDACTED] IN MEXICO CITY. RATING LETTER -- S.

3. CASE OFFICER FOR [REDACTED]. RATING LETTER -- S.

4. COORDINATES SENSITIVE CE OPERATIONS RUN BY OTHER NVA/BLAZON AGENCIES WITH [REDACTED]. RATING

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Handwritten initials/signature

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DEFERRED TELEPOUCH

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MEXI 47396

LETTER -- S.

5. CONDUCTS OTHER LIAISON RELATED CI ACTIVITY AND PREPARES NECESSARY MEMORANDA AND REPORTS. RATING LETTER -- S.

OVERALL PERFORMANCE -- S.

4. SECTION C - NARRATIVE COMMENTS

THIS IS THE INITIAL REPORT WRITTEN ON SUBJECT AND COVERS A PERIOD OF SEVEN AND ONE-HALF MONTHS SINCE HIS ARRIVAL IN MEXICO IN FEB 78. SUBJECT HAS BEEN IN THE ORGANIZATION FOR OVER 16 YEARS AND SERVED TWO O/S ASSIGNMENTS PRIOR TO MEXICO CITY.

HIS PRIMARY DUTY IS TO SUPERVISE THE OPERATIONS OF A CI UNIT COMPOSED OF PERSONNEL SUPPLIED [REDACTED] BUT WHICH IS UNDER THE OPERATIONAL DIRECTION OF THE STATION. THIS PARTICULAR UNIT REPRESENTS THE NUCLEUS OF THE STATION'S CI OPERATIONAL CAPABILITY. IT IS ALSO A STRONG CONTRIBUTOR TO STATION'S EFFORTS DIRECTED AGAINST THE HARD TARGETS IN THE FI FIELD. SUBJECT PARTICIPATES IN ALL LEVELS OF ACTIVITY WITH THIS UNIT FROM THAT OF A MANAGER TO SERVING AS AN OPERATIONS OFFICER. THE LEADERSHIP AND EXAMPLE WHICH HE SETS HAVE BEEN AN ESSENTIAL INGREDIENT IN THE SUCCESS ENJOYED BY THE UNIT IN RECENT MONTHS. IN APRIL 1978, THE STATION UNDERTOOK AN [REDACTED] DIRECTED AT THE [REDACTED]

[REDACTED] OF A PRINCIPAL [REDACTED]. SUBJECT PARTICIPATED IN THE RECRUITMENT OF A [REDACTED] WHO PROVIDED ACCESS TO THE TARGET INSTALLATION AND WAS SUBSEQUENTLY INVOLVED IN ALL ASPECTS OF THE OPERATION EXCEPT THE ACTUAL [REDACTED] OF THE [REDACTED]. THIS SUCCESSFUL OPERATION WAS FOLLOWED BY ANOTHER ONE THE FOLLOWING MONTH, THIS TIME DIRECTED AT THE [REDACTED] OF A [REDACTED]. TWO VALUABLE REPORTS WERE PRODUCED FROM THIS OPERATION ON THE POLICIES AND PLANS OF

A [REDACTED]. IN JULY, SUBJECT SUPERVISED THE RECRUITMENT OF AN AGENT WHO HAS ESTABLISHED ACCESS TO A [REDACTED]. A TECHNICAL OPERATION IS NOW UNDERWAY TO [REDACTED].

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IN SEPTEMBER, ANOTHER OPERATION BEGAN AGAINST THE [REDACTED] OF THE SAME PRINCIPAL ADVERSARY MENTIONED ABOVE SINCE A [REDACTED] HAD BEEN ACQUIRED. AGAIN, SUBJECT PARTICIPATED IN THE RECRUITMENT OF THE [REDACTED] OF THE [REDACTED] AND IN OTHER PHASES OF THE OPERATION WHICH CONTINUE AT THIS TIME.

IN ADDITION TO THESE SPECIFIC OPERATIONS, THE CI UNIT ALSO CARRIES OUT A HOST OF [REDACTED] AND OTHER WORK AS REQUIRED IN THE CI FIELD. SINCE MEXICO CITY SERVES AS PROBABLY THE PRINCIPAL BASE FOR OPERATIONS BY THE [REDACTED] AND THE [REDACTED] THE UNITED STATES, SELECTIVE TASKING MUST BE UNDERTAKEN TO OBTAIN MAXIMUM EFFICIENCY FROM THIS SMALL UNIT.

SUBJECT ALSO HANDLES [REDACTED] OF THE CI UNIT, AND IS ALSO RESPONSIBLE FOR PROVIDING SUPPORT THROUGH THIS UNIT TO OTHER CI ACTIVITIES DIRECTED AGAINST [REDACTED] AND [REDACTED] IN MEXICO.

INDEED, THE FIRST PART OF HIS TOUR IN MEXICO HAS BEEN A BUSY ONE. THE STATION FINDS HIM TO BE AN ENERGETIC, VERSATILE, AND HIGHLY QUALIFIED OFFICER. HE HAS HANDLED THE PERSONNEL AND OPERATIONAL PROBLEMS WHICH HAVE SURFACED WITH HIS CI UNIT WITH TACT AND EFFICIENCY, AND HIS RAPPORT WITH HIS [REDACTED] IS VERY GOOD. DURING RECENT CONVERSATIONS, [REDACTED] HAVE EXPRESSED THEIR HIGH REGARD FOR SUBJECT'S ABILITIES.

HIS ABILITY TO [REDACTED] AS A [REDACTED] IS AN ADDED FACTOR IN HIS FAVOR AND PROVIDES HIM WITH A GREATER DIMENSION FOR OPERATIONS. THE STATION HAS USED SUBJECT ON OCCASION FOR [REDACTED] OPERATIONS, BUT THIS USE MUST BE SELECTIVE IN ORDER NOT TO ADVERSELY IMPINGE UPON HIS PRIMARY WORK WITH THE CI UNIT.

SUBJECT IS VERY COST CONSCIOUSNESS IN THE USE OF STATION FUNDS AND EXTRACTS A HEALTHY RETURN FOR PROJECT MONIES USED TO SUPPORT THE WORK OF THE CI UNIT.

SUBJECT WELL DESERVES A RATING OF STRONG FOR HIS

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VARIOUS DUTIES AND AN OVERALL STRONG FOR THIS REPORTING PERIOD. WE LOOK FORWARD TO A CONTINUED HIGH LEVEL OF PERFORMANCE DURING THE YEAR TO COME.

5. SECTION D.1. SUBJECT HAS BEEN UNDER MY SUPERVISION FOR SEVEN AND ONE-HALF MONTHS. D.3: COMMENTS BY REVIEWING OFFICIAL:

I FULLY CONCUR WITH THE NARRATIVE COMMENTS OF THE REVIEWER. SUBJECT HAS DISPLAYED A GREAT AMOUNT OF IMAGINATION AND ENERGY IN DIRECTING A DIFFICULT ACTIVITY NAMELY COUNTERINTELLIGENCE ACTIVITY THAT IS SEVERELY RESTRICTED BY ATTORNEY GENERAL GUIDELINES TO THE EXISTING EXECUTIVE ORDER. SUBJECT HAS DESPITE THIS BEEN ABLE TO KEEP A VERY POSITIVE THRUST TO HIS OPERATIONS AND HAS BEEN ABLE TO MOTIVATE THE AGENTS AND PERSONNEL UNDER HIS CONTROL. I AM TOTALLY SATISFIED WITH HIS ENERGY AND MOTIVATION. DESPITE THE FRUSTRATIONS INHERENT IN THE COUNTERINTELLIGENCE ACTIVITY HE CARRIES ON WITH A HIGH SPIRIT AND A TREMENDOUS AMOUNT OF GOOD WILL - NO MEAN ACHIEVEMENT AT THIS JUNCTURE OF AGENCY COUNTER-INTELLIGENCE ACTIVITIES. E3, IMPDET.

END OF MESSAGE

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CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION															
1. EMPLOYEE NUMBER 194737		2. NAME (Last, first, middle) Flores, Daniel			3. DATE OF BIRTH 4 Aug 35		4. SEX M	5. GRADE GS-12	6. SD D						
7. OFFICIAL POSITION TITLE Operations Officer				8. OFF/DIV/BR OF ASSIGNMENT DDO/LA/COG		9. CURRENT STATION Headquarters		10. COGE (if any) X HQB DP							
11. TYPE OF APPOINTMENT					12. TYPE OF REPORT										
<input checked="" type="checkbox"/>	CAREER	<input type="checkbox"/>	RESERVE	<input type="checkbox"/>	CONTRACT	<input type="checkbox"/>	OTHER (Spec)	<input type="checkbox"/>	TEMPORARY	<input checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT	<input type="checkbox"/>	SPECIAL
13. REPORTING PERIOD (from-to) 01 July 1975 - 30 June 1976						14. DATE REPORT DUE IN O.P. 31 July 1976									

SECTION B QUALIFICATIONS UPDATE	
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.	

SECTION C PERFORMANCE EVALUATION	
U—Unsatisfactory	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 D.
M—Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
P—Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
S—Strong	Performance is characterized by exceptional proficiency.
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SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Handle a sensitive and productive [redacted] in Cuban operations via TDY travel to meet, debrief, and prepare operational/intelligence reports.	RATING LETTER O
SPECIFIC DUTY NO. 2 Review incoming operational correspondence from Latin America on Cuban matters and ensure that prompt response and helpful guidance is provided.	RATING LETTER S
SPECIFIC DUTY NO. 3 Maintain a thorough familiarity with all Cuban activities in Latin America and our operations against them; carry out coordination with other components where appropriate.	RATING LETTER S
SPECIFIC DUTY NO. 4 Develop leads against the Cuban target by [redacted] and ultimately [redacted] etc., of [redacted] to obtain assessment data on the targets as well as use the leads in approaches to [redacted].	RATING LETTER O
SPECIFIC DUTY NO. 5 Work closely with the IA's of the section to ensure that they answer all required correspondence and to stimulate them to be creative and productive.	RATING LETTER S
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION	
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, positive personal traits or habits and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	RATING LETTER S

SECRET
CLASSIFICATION

SECTION D 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 C 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 D, attach a separate sheet of paper.

This officer has worked under my supervision for approximately six months. This is the first fitness report I have prepared on him. After two field tours and his current assignment to Cuba Operations Group, he has developed into a solid and professional operations officer with the skills we hope our employees will develop. He is now highly motivated and creative in his work. He has demonstrated, particularly in recent months, a gratifying degree of drive and interest.

He has handled one of our most productive and sensitive [redacted] assets. With his guidance this agent has produced, within the past six months, some of the highest quality intelligence on [redacted] and [redacted] this Agency has obtained. Because this agent must be serviced via TDY travel, the responsible case officer must be able to work with very little guidance and have the tradecraft skills and reports writing ability to work largely on his own. With this case Mr. Flores has demonstrated himself to be a first-class agent handler, highly attuned to operational information and quality intelligence production.


As Section Chief I have relied upon him heavily to provide the institutional memory our work demands. He has full grasp of all operations directed against [redacted] not only in those countries under his direct responsibility, but throughout Latin America. Since all of the officers in this section [redacted] and [redacted] agents, Mr. Flores has frequently acted as Section Chief during the absence of the other [redacted] officers, a GS-14 position. He has been able to handle the job well both

SECTION E CERTIFICATION AND COMMENTS

1. 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
	C/LA/COG [redacted]

2. BY EMPLOYEE

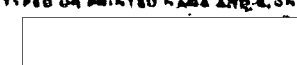
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	20 Dec 1976	

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the ratings given by the rating officer. Mr. Flores is indeed a fine operations officer and should have an exceptionally successful career in operations. The only weakness in him that I have ever noted is an occasional lack of drive and self-motivation and as noted by the rating officer, particularly in recent months, he seems to have cured this and has indeed been going at a fast pace.

Mr. Flores is leaving Cuba Operations Group for a rotational tour in the Office of Training. I believe that when he finishes this tour, he should return for an operational assignment in the Latin America area. He is an exceptionally fine case officer, has a native command of Spanish, and has a way of dealing with his agents that gets the most out of them. Future tours for him should involve supervision of younger case officers and he should begin to move into the managerial aspects of operations.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	Chief, LVAO	

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE EMPLOYER IN ALL INSTANCES OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	20 Dec 1976	

CLASSIFICATION

14-00000

S E C R E T

FITNESS REPORT

Daniel Flores

cont.

SECTION D

in terms of paper flow and personnel administration. He demonstrates an ability to advance further along these lines. Also during the period under review he participated in an approach against the [redacted] of [redacted] in a Latin America country. Although the recruitment effort was not successful, it was conducted in a professional manner and Mr. Flores used an [redacted] in a very effective manner.

He has been perhaps the most aggressive officer in the Cuba Operations Group in pursuing leads for interviews of [redacted], and acquaintances [redacted]. During the period under review he conducted at least [redacted] such interviews and developed good assessment data on various targets.

As a native Spanish speaker, Mr. Flores has the ability to [redacted] as a [redacted] and has successfully carried out roles as a [redacted] citizen, [redacted]. This ability to [redacted] has been of great assistance in handling the key case he relinquished only on leaving LA/COG.

Mr. Flores has now overcome an earlier reluctance to be aggressive which former supervisors might have noted. I am confident he will maintain and build further on what I have found to be a highly improved sense of enthusiasm. I am sure he will be a strong contributor to his new component.

* * *

No. 3

He is an officer who merits further responsibility and one who should continue to rise in rank as he assumes these additional responsibilities. It has been a pleasure to work with him and I should like to do so with him in the future.

S E C R E T

E2 IMPDET
CL BY 025231

~~SECRET~~
CLASSIFICATION

FITNESS REPORT					
SECTION A GENERAL INFORMATION					
1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF. DIV BR OF ASSIGNMENT DDO/LA/COG	9. CURRENT STATION Washington, D.C.		10. CODE (ch one) X NOS OF
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT		
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec.)	<input checked="" type="checkbox"/> TEMPORARY	<input type="checkbox"/> ANNUAL
			<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL	
13. REPORTING PERIOD (from-to) 1 October 1974 - 30 June 1975			14. DATE REPORT DUE IN O.P. 31 July 1975		
SECTION B QUALIFICATIONS UPDATE					
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.					
SECTION C PERFORMANCE EVALUATION					
U--Unsatisfactory 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 D.					
M--Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.					
P--Proficient Performance is satisfactory. Desired results are being produced in the manner expected.					
S--Strong Performance is characterized by exceptional proficiency.					
O--Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Case Officer for COG's Latin America area responsible for operational support of LA field Stations Cuba programs.					RATING LETTER S
SPECIFIC DUTY NO. 2 Case officer for two sensitive [] operations.					RATING LETTER S
SPECIFIC DUTY NO. 3 Develop leads to potential Cuban recruitment targets and personally interview prospective access agents.					RATING LETTER S
SPECIFIC DUTY NO. 4 Supervisor for one Intelligence Analyst					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

CLASSIFICATION

SECTION D

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, foreign language competence, if required for current position. Amplify or explain ratings given in Section C 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 D, attach a separate sheet of paper.

LA/COG is both a Headquarters and an active opera-

As such, Mr. Flores assignment is a combination

His performance is being rated in both capacities which means that much higher criteria is being applied than for most Headquarters officers.

Mr. Flores has proved to be a professional agent handler, and has been used very effectively in new, sensitive operations Headquarters. Although he did not participate in the recruitment of these sources, Mr. Flores was brought in to provide initial training, and detailed guidance necessary to develop the new assets into reporting sources. One was a complicated case of a who Mr. Flores helped debrief, then trained and. The other was a successful of a source with excellent access to the; Mr. Flores' job, after being introduced by the recruiting officer, is to make the source into a fully controlled asset and maximize the excellent potential for intelligence information.

SECTION E

CERTIFICATION AND COMMENTS

1. 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
8 August 1975	ADC/LA/COG	M. Michael Krine

2. BY EMPLOYEE		
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	9 Aug. 1975	[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

LA/COG has operations officers performing duties similar to those assigned to Mr. Flores--Case officer responsible for recruiting/handling agents directed against a hard target and also staff duties as a Desk Chief. These tasks are the Latin America Division as these officers serve as and also as Headquarters desk officers. All are handled by these employees. I would rank Mr. Flores in the middle of this group, but it must be taken into consideration that all the other officers are senior in grade.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
8 August 1975	AC/LA/COG	Thomas G. Clines

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	9 Aug. 1975	[Signature]

CLASSIFICATION

SECRET

-2-

Continuation of Section D

His professional, no-nonsense handling has already contributed to highly significant information (a value quotient of 7.0 with one XX report) on some of the Agency's current Cuba priorities including Cuba's negotiating attitude vis-a-vis the U.S.

In his capacity as Desk officer for field stations in Latin America, Mr. Flores is charged with providing guidance and support aimed at recruitment operations against [redacted]. He has conducted interviews of [redacted] in the U.S. and initiated a promising [redacted]. He supervises [redacted] intelligence analyst and, together, they effectively ensure timely response to field requests and help stations to identify operational opportunities, recruitment targets and--where necessary--keep them aware of the priority of the Cuban target.

By his performance, Mr. Flores has demonstrated he is a versatile case officer with good operational instincts; he is showing increasing aggressiveness and imaginative support of field stations in their efforts to [redacted]. While he is an excellent agent handler who gets maximum intelligence production from his assets, he is less thorough when handling the administrative details involved in his operations. He needs more supervisory experience, and still tends to rely excessively on his IAs to search for operational leads and conduct operational research.

Mr. Flores was sponsored by the Division, and attended the mid-career course in November 1974. He has excellent potential for further advancement in the Division and has been a significant factor in LA/COG's success over the last year in developing access to Cuba, a recognized hard target.

Continuation of Section E

Subject excels as an agent handler motivating his agents and disciplining them when required to obtain quality intelligence. He handles [redacted] of LA/COG's most sensitive [redacted] and during this period, he has met these [redacted] in [redacted] and in [redacted]. He has certainly targeted these [redacted] agents against priority objectives and the intelligence produced has been of vital interest to U.S. Government policymakers in this delicate period of Cuban negotiations. Latin America Division has received commendations from

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Continuation of Section E

the intelligence community for reports acquired through Mr. Flores. Subject's staff duties include desk chief responsibilities for support and guidance to field programs including the research and targetting required to conduct an effective recruitment program. Although such duties requiring supervision are new to him, he is also making progress in this capacity. With proper guidance and assistance, he will develop into a most effective supervisor.

Mr. Flores native fluency in Spanish and his Latin background have proven most valuable to Cuban operations. In fact he represents himself as [redacted]. For an officer his grade, he is very mature, self assured, has good common sense and is certainly a professional. Subject has completed two tours in the field and is an experienced ops officer. He is intelligent, imaginative, uses good tradecraft at all times and has a clear headed approach to the business. He expresses himself well orally and in writing, and works very well with other case officers. Mr. Flores keeps up to date on political, economic and social affairs pertaining to Cuba and he willingly accepts difficult tasks requiring frequent separations from his family.

Subject definitely has potential. He is operationally aggressive and is gaining experience as a manager. Mr. Flores is already performing at a higher level than his grade. In approximately a year, he should be again dispatched to the field as a senior officer responsible for handling [redacted] or [redacted] targets. During the next reporting period, Mr. Flores should receive training in supervision. He is a solid performer in the Cuban Operations Group and has contributed much to our successes during the past year.

SECRET

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION							
1. EMPLOYEE NUMBER 194737	2. NAME (Last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS-12	6. SD D		
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF. DIV BR OF ASSIGNMENT DDO/LA/COG	9. CURRENT STATION Washington, DC		10. CODE (if one) X	11. TYPE OF REPORT HQS OF	
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> CONTRACT	<input type="checkbox"/> OTHER (Spec)	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT	<input type="checkbox"/> SPECIAL
13. REPORTING PERIOD (from-to) 5 March 1974 - 30 September 1974				14. DATE REPORT DUE IN O.P.			

SECTION B QUALIFICATIONS UPDATE	
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.	

SECTION C PERFORMANCE EVALUATION	
<u>U-Unsatisfactory</u>	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 D.
<u>M-Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
<u>P-Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.
<u>S-Strong</u>	Performance is characterized by exceptional proficiency.
<u>O-Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Primary case officer for a sensitive [redacted]	RATING LETTER S
SPECIFIC DUTY NO. 2 Provide operational support and guidance for Cuban operations conducted by LA Division Stations.	RATING LETTER P
SPECIFIC DUTY NO. 3 Direct and supervise Intelligence Assistants assigned to specific areas of responsibilities.	RATING LETTER S
SPECIFIC DUTY NO. 4 Desk case officer for access agents and support assets in LA Division Stations' Cuban operations.	RATING LETTER S
SPECIFIC DUTY NO. 5 Search for leads in the U.S. for LA Division Cuban operations and personally debrief and exploit further exploitation.	RATING LETTER S
SPECIFIC DUTY NO. 6	RATING LETTER C

OVERALL PERFORMANCE IN CURRENT POSITION	
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.	RATING LETTER S

FORM 45 7-73

CLASSIFICATION

22. IMPDET CL BY [signature]

CLASSIFICATION

SECTION D

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 C to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

In a very short time, Mr. Flores has become an important factor in LA/COG's efforts to directly handle Cuban [redacted], and to expand its recruitment program. His fluent Spanish, past operational experience, versatility and ability to [redacted] in most Latin American countries, make him highly qualified for his present assignment. He demonstrates sound operational judgment under often trying conditions, and good ability to communicate effectively both orally and in writing. His frequent TDYs demand long and unusual hours, which he gives ungrudgingly.

Almost immediately after his assignment to LA/COG in March 1974, Mr. Flores was called upon to handle a sensitive [redacted] case. The agent had already been recruited and many of the developmental aspects of the case had been resolved prior to Mr. Flores' introduction, but it still required a Headquarters based case officer to provide the necessary continuity wherever the agent [redacted]. The case is complicated and time-consuming, involving extended TDYs and utmost adherence to good tradecraft procedures. It has developed into one of our most productive sources of [redacted].

SECTION E

CERTIFICATION AND COMMENTS

(cont'd)

1. 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
16 NOV 1974	LA/COG/OPS	[Signature]

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED <input type="checkbox"/>	6 Nov 1974	[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the rating officer's comments and performance evaluation. Soon after his arrival at LA/COG, Mr. Flores took over the handling of a sensitive agent. While the agent's bona fides had already been established and his modus operandi determined, considerable ad hoc judgement and direction were required to continue the agent's motivation and ensure his viability. Mr. Flores did extremely well in his guidance of the agent in a series of complicated, extended meetings which took place in [redacted]. Good, professional tradecraft and sound judgement were exhibited by Mr. Flores.

As to his support of LA Station efforts against the Cuban target,

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
16 NOV 74	DC/LA/COG	[Signature] (cont'd)

4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRIES IN ALL SECTIONS OF THIS REPORT	DATE	SIGNATURE OF EMPLOYEE
	6 Nov 1974	[Signature]

CLASSIFICATION

FITNESS REPORT - Daniel Flores

SECTION D (CONTINUED)

activities in Latin America, due largely to Mr. Flores' professionalism.

Mr. Flores' current assignment is a combination of operational and Headquarters desk responsibilities, the latter calling for the support of field stations in their efforts to develop individual Cuban recruitment programs. His extended TDYs have understandably prevented Mr. Flores from devoting much time to his desk responsibilities and it is somewhat difficult to judge his performance as a desk officer. He has a good grasp of what needs to be done, and his handling of specific tasks indicates good managerial potential. Nevertheless, he does need additional desk experience, especially in areas which will allow him to use his operational ability to support and guide field stations that are developing Cuban operational programs.

COMMENTS BY REVIEWING OFFICIAL (CONTINUED)

this aspect of his performance was less noteworthy, and it is believed more attention and research could have been given to this activity. Mr. Flores writes concisely and well, and his CI/CE instincts are sharp and true. He can be expected to turn in a solid desk performance in the future.

CONFIDENTIAL

FITNESS REPORT		NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.					
SECTION A. GENERAL INFORMATION							
1. EMPLOYEE NUMBER 194737		2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE & SD GS-12 D	
7. OFFICIAL POSITION TITLE Ops Officer			8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/Br 3		9. CURRENT STATION		
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30-MONTH	<input checked="" type="checkbox"/> REASSIGNMENT	
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From to) 31 May 73-4 March 74		13. DATE REPORT DUE IN O.P.		
SECTION B. PERFORMANCE EVALUATION							
<p>U—Unsatisfactory 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>M—Marginal 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>P—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S—Strong Performance is characterized by exceptional proficiency.</p> <p>O—Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Station officer responsible for operations against the MPCHEEK target						RATING LETTER S	
SPECIFIC DUTY NO. 2 Direction of and support for an [] and the []						RATING LETTER S	
SPECIFIC DUTY NO. 3 Case officer responsible for a [] team						RATING LETTER S	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER	
Take into account everything about the employee as an individual as well as his effectiveness in his current position such as performance of specific duties, dependability, conduct on job, cooperation, initiative, good work habits, and particular timeliness in reports. Based on your knowledge of employee as a whole, rate his performance during the rating period. Place the letter in the rating box corresponding to the description which most closely reflects his level of performance.						S	

OFFICE OF PERSONNEL
CONFIDENTIAL

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position from proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. 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.

Subject's tour in [redacted] has been cut short by the serious illness of his daughter. As a result of this illness it was also necessary for him to spend the months of December and January on emergency leave in the United States, returning without his family in February in order to transfer his ops workload and pack out his personal effects for PCS transfer to Headquarters on 4 March.

Although the undersigned had the privilege of working with Subject only briefly, as rating officer he had the advantage of taking over handling of most of Subject's cases following the departure on emergency leave. Thus he was able to observe first hand and in detail the human material with which Subject had worked, the progress he had made in developing their access and capabilities, and the respect these agents had for him.

During the period covered by this report, Subject continued his pursuit of the MPCHEEK target as his primary operational responsibility. He developed and recruited a [redacted] of the [redacted] MPCHEEK [redacted] to the MPCHEEK [redacted] and handled [redacted]. He also handled a [redacted] and the Station's [redacted] via a [redacted] who in turn handled [redacted].

(Continued)

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
4 Mar 74	/s/ Daniel Flores

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
4 Mar 74	DCOS	/s/ Arthur T. Ladenburg

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

As the rater makes clear, Subject will be missed in [redacted] and we can only sympathize with the reasons why he must now leave. He was doing the Station a great deal of good and advancing his own career nicely as well. It is worth recalling that Subject provided here in [redacted] over what we understand is still a unique operational feat, a [redacted] to an MPCHEEK [redacted]. Also, Subject was often used on a variety of operational tasks having little to do with his assigned targets because, in the

(Continued)

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
4 Mar 74	CO3	/s/ Richard S. Welch

CONFIDENTIAL

Continuation of Narrative Comments

In carrying this heavy workload, Subject demonstrated that he is a superior agent handler. He succeeded in conveying to these people a sense of mission and participation which has kept their morale and motivation, and hence their production, at a high level. He also insisted upon work and security discipline, with a result that the record of these agents in prompt and reliable appearance for meetings and in responding in writing to requirements is extraordinarily good. They all have a clear idea of what is expected of them, confidence that performance will be rewarded and conversely that non-performance will not be tolerated. Just prior to his departure, Subject successfully terminated an entire [redacted] of long standing, a measure which was decided upon simply because the [redacted] had been heavily used [redacted] and from a security standpoint replacement seemed to be in order. Letting old agents go is always a delicate and usually a thankless task. It takes finesse and bargaining skill. Subject showed these and more in divesting us of the team without a hitch.

During his last month in [redacted], despite the fact that he was burdened with the problems of closing out his household and the normal operational and administrative cleanup prior to PCS departure, Subject made two very significant contributions to Station objectives. First, he coordinated with the [redacted] the official but necessarily [redacted] visit of a senior BKHERALD officer. Since the Station is [redacted] Subject had to maintain his [redacted] throughout, further complicating this delicate assignment. During the visit, he coordinated frequently with the head of the [redacted] and with the chief administrative aide of the [redacted]. He also participated directly in one meeting with the [redacted]. This was of course not the type of assignment which would normally be entrusted to a "junior officer", but Subject is junior only in relative grade, certainly not in maturity, self-assurance or judgment. Then with only three days left in [redacted] Subject led an [redacted] which entered a building recently purchased by the MPCHEEKS, remained for a [redacted] and made two apparently excellent [redacted].

The Station will miss Subject a great deal. As the above incidents demonstrate, when the tough or sensitive assignments came up, he was the officer we turned to most frequently. He never balks, argues inconvenience, or seeks the way out. He is cooperative, helpful, and in a low-key way is always effective. We hope he will not object to the term "old reliable" -- he has been that in [redacted], and more.

SECRET

SECRET

Continuation of Comments of Reviewing Officer

first instance he was bilingual and could fade into the background. But he would not have been so regarded if he had not shown ample good sense, zeal, and balanced judgment in unfamiliar situations. We hope Subject can get overseas again within a reasonable time and consider that the Station that gets him will be fortunate.

SECRET

SECRET

CONFIDENTIAL

FITNESS REPORT	NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.
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SECTION A. GENERAL INFORMATION

1. EMPLOYEE NUMBER 036130	2. NAME (last, first, middle) Flores, Daniel	3. DATE OF BIRTH 4 Aug 35	4. SEX M	5. GRADE GS11	6. SD D
7. OFFICIAL POSITION TITLE Operations Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/WH/3		9. CURRENT STATION	
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 21 MONTH	<input type="checkbox"/> 30 MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL*	<input type="checkbox"/> TEMPORARY	12. REPORTING PERIOD (From-to) 1 July 1972-31 May 73		13. DATE REPORT DUE IN O.P.

SECTION B. PERFORMANCE EVALUATION

U—Unsatisfactory 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.

M—Marginal 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—Proficient Performance is satisfactory. Desired results are being produced in the manner expected.

S—Strong Performance is characterized by exceptional proficiency.

O—Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1 Station officer responsible for operations against the MPCHEEK target.	RATING LETTER S
SPECIFIC DUTY NO. 2 Handler for sensitive <input style="width: 100px;" type="text"/>	RATING LETTER O
SPECIFIC DUTY NO. 3 Supervise principal agent	RATING LETTER S
SPECIFIC DUTY NO. 4 Miscellaneous operational support activity, including direction of a <input style="width: 50px;" type="text"/> team.	RATING LETTER S
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects the level of performance.

RATING LETTER
S

1179

CONFIDENTIAL

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 by providing background 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.

Following realignment of Station officer assignments last year, Subject was given the responsibility for operations against the MPCHEEK "hard target". He also assumed additional tasks in more traditional areas, such as coverage of the [redacted] of the [redacted], and [redacted]. The breadth of these operational commitments attests Subject's professional ability and versatility. (This would be a senior case officer's load by any description and Subject's performance at it was the reason behind our recommendation for accelerated promotion last year.)

Particularly against the difficult MPCHEEK target, this officer has displayed admirable determination despite the inherent frustrations and disappointments of working against this remote and suspicious group. During the period under review, his job has been the more difficult since the MPCHEEKs, in all probability [redacted] Station [redacted] (in which Subject played a major role), have withdrawn into a defensive shell which makes access operations verge on the impossible. Nevertheless, he has continued to probe their defenses, and has managed to develop [redacted] leads which, with the exercise of patience and application of his proven operational resources, could eventually [redacted] to the [redacted] MPCHEEK Mission here. This officer refuses to become discouraged, a quality officers working on hard targets must have.

Special mention is made of Subject's successful bid to make recontact and establish regular meetings with a valuable penetration of the revolutionary government. The agent had broken contact with his former handler in the belief that such action was dictated by his security situation. Our choice of Subject to attempt to recontact this asset was dictated by his experience in dealing with skittish [redacted] and our belief that Subject could bring it off with tact, reading the situation. /CONTINUED/

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
28 June 1973	/s/ Daniel Flores

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
20	

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
28 June 1973	Deputy Chief of Station	/s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

As described, this officer is a steady and solid performer who carries a major case load securely, productively, and without complaint. He has even volunteered to take on additional work when he has seen opportunities to help the Station's overall mission. Because he [redacted] he is often drafted for a1 kinds of ad hoc operational work. This is invariably well done. He is operationally aggressive but also shows lively awareness of the tricky operational climate here and does not push beyond what the traffic will bear. His agents respect his seriousness, which permits him to get more utility out of them. He is a pillar of this Station.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
2 July 1973	Chief of Station	/s/ Richard S. Welch

CONFIDENTIAL

Section C continued.....

as it developed, and make appropriate on-the-spot adjustments to control the asset's reactions. All this had to be accomplished with great regard to security because of the [redacted]. Subject's performance has been effective and, given the operation's importance, can really be called outstanding. The agent is again a prime source on the [redacted], which is crucial to developments locally.

Further, this officer continues to manage an [redacted] agent who in turn [redacted] and [redacted] assets, so directing these efforts that they contribute effectively to overall Station objectives. More recently, Subject has taken over the [redacted] of a new [redacted] targetted against a senior [redacted] and is carrying it through successfully. This officer also handles much of the support requirements for his various operations, including management of [redacted], overseeing a small [redacted], and acquisition of rental cars and property [redacted]. There is little doubt that some of Subject's success can be attributed to his Latin background and fluent Spanish. But both of these advantages might be wasted by a less capable all-round officer. In his case, they provide him with complementary skills that enhance his superior performance. In the view of the reporting officer, Subject carries more than his own share here in [redacted] in a manner normally calling for an officer of considerably more senior grade and experience.

CONFIDENTIAL

SECRET

(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						036130	
SECTION A - GENERAL							
1. NAME (Last) (First) (Middle) Flores Daniel			2. DATE OF BIRTH 4 Aug 1935	3. SEA M	4. GRADE GS-11	5. SD D	
6. OFFICIAL POSITION TITLE Ops Officer				7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/3		8. CURRENT STATION	
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"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 31 August 1972				12. REPORTING PERIOD (From - to) 24 September 1971 - 30 June 1972			
SECTION B - PERFORMANCE EVALUATION							
<p>U-Unsatisfactory 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>M-Marginal 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>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Direction of and administrative support for [redacted] principal agents whose efforts he directs [redacted] and [redacted]						RATING LETTER S	
SPECIFIC DUTY NO. 2 Coordinator of all Station operations against the [redacted], including management of the project covering this activity.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Case officer in charge of the Station's [redacted]						RATING LETTER P	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> EXEMPT FROM GENERAL DECLASSIFICATION OF E.O. 11652, 11652A AND 11652B BY SP-5 (1) [redacted] AUG 1972 </div> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> IMPDET (Various Responsibilities, Insert Code or Code) </div> 31 Aug 1972							
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B 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.</p>			
<p>In the period of this report, Subject established himself and his family at this post and undertook the direction of the Station's operations against the [redacted] which had formerly been handled by an officer two grades senior to Subject. He has proved equal to the task. He learned his new assignment rapidly and adapted well to the handling of his cases through [redacted] agents, a security requirement of the [redacted] which can be frustrating for an aggressive officer with fluent Spanish such as Subject. However, he has shown maturity and superior handling ability in directing his assets against the [redacted] and particularly the [redacted]. His intimate knowledge of the [redacted] enabled him to plan secure contact with a [redacted] who at first appeared genuine. After thoroughly debriefing this individual, drawing upon his knowledge of the [redacted] Subject was able to recommend no continuing contact with him due to specific fabrications on the part of the [redacted].</p> <p>He is careful in management of funds entrusted to him for his operations and provides required administrative and operational reports in a timely manner. There have been past comments on Subject's weakness in writing. He has worked hard on this, and the rating officer feels that he is now competently producing the reports required. Subject understands that this is an area that requires continuing attention for a growing professional.</p> <p style="text-align: right;">/CONTINUED/</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
15 August 1972	/s/ Daniel Flores		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
10			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
15 August 1972	Deputy Chief of Station	/s/ [redacted]	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Subject has come up the hard way, both in pushing on to finish his education and in BKTRUST. As a result he is way under-graded for his maturity and for his operational contributions. That we have given Subject a major responsibility here (STPAGODA) attests to how much confidence we have in him and his ability. He is, of course, bi-lingual and mixes well with [redacted] an advantage he uses well. A good "street" operator, he still has a way to go in organizing his paper work and in relating to HQ needs.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
15 August 1972	Chief of Station	/s/ Richard S. Welch	

SECRET

SECTION C continued.....

A comment must be made on Subject's great ability to adjust rapidly to one-time and target of opportunity assignments. His performance in meeting with [] high level agents of [] who had to be met during stays in [], and his on-site assistance in an [] against a priority target have been of the highest order. No doubt his fluent Spanish greatly assisted him in these tasks, but his experience and good judgment were major factors in his excellent performance in the role of utility operations officer.

To exploit Subject's talents to the fullest, and provide him with the professional challenge equal to his ability, he has now been assigned the management and handling of the difficult [], a top priority for the Station. This is a true measure of our confidence in him.

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Flores, Daniel		2. DATE OF BIRTH 08/04/35	3. SEX M	4. GRADE GS-10	5. SD D
6. OFFICIAL POSITION TITLE Ops Officer			7. OFFICER OF ASSIGNMENT DDP/WH/3	8. CURRENT STATION Hqs	
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"/>	CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/>	INITIAL	ASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify)		<input type="checkbox"/>	ANNUAL	ASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P. 31 October 1971			12. REPORTING PERIOD (From - to) 1 May 1971 - 30 September 1971		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory 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>M-Marginal 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>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
SPECIFIC DUTY NO. 2					RATING LETTER
SPECIFIC DUTY NO. 3					RATING LETTER
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER

SECRET

SECTION C

NARRATIVE COMMENTS

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

Aug 17 2 17 PM '71
Mr. Daniel Flores completed his first tour in Guayaquil and departed the field on 28 May 1971. Following home leave, Mr. Flores returned to Headquarters in August for approximately two months training prior to his next assignment to [redacted]. This training included Weapons Familiarization and Defensive Driving, CA, [redacted], Communist Party, TSD briefings, and on-the-desk Reports Writing Familiarization.

Since Mr. Flores has been on leave or training status for most of this reporting period, no meaningful rating can be given.

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	
	employee in training	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
16 August 1971	WH/Personnel Officer	John Ferguson
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE	

SECRET

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					036130	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. ID
Flores, Daniel			4 Aug 1935	M	GS-10	D
6. OFFICIAL POSITION TITLE			7. OFF. OR. BR. OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer			DDP/NH/3			
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 type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)			
			1 October 1970/30 April 1971			
SECTION B PERFORMANCE EVALUATION						
<p>U-Unsatisfactory 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>M-Marginal 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>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
SPECIFIC DUTY NO. 1					RATING LETTER	
Case Officer responsible for a Base project targetted against the					S	
SPECIFIC DUTY NO. 2					RATING LETTER	
Case Officer responsible for a sensitive technical operation including the selection of intelligence resulting from the operation.					O	
SPECIFIC DUTY NO. 3					RATING LETTER	
Development of new agent assets.					P	
SPECIFIC DUTY NO. 4					RATING LETTER	
Preparation of dispatches, intelligence reports and other correspondence pertinent to his area of responsibility.					P	
SPECIFIC DUTY NO. 5					RATING LETTER	
SPECIFIC DUTY NO. 6					RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER	
					S	

SECRET

SECTION C NARRATIVE COMMENTS

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

There has been little ~~change~~ ^{change} in Subject's performance since the submission of his last report covering the period through 30 September 1970.

The highpoint of his activities during this period, as it has been throughout his tour, has been his management of a sensitive technical operation which has been a consistent producer of unique and high level intelligence. This has been a good performance on Subject's part indicative of his professional capability to conduct clandestine operations.

Subject's writing ability has improved during this period, and there is little doubt that his efforts in this regard are paying off. Further experience should see continued improvement of his writing skills.

As Subject's first tour comes to a close he can look back on a generally strong performance in all phases of his operational activity on behalf of the Base's objectives.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE 3 May 1971	SIGNATURE OF EMPLOYEE /s/ Daniel Flores
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2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 20	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
---	---

DATE 3 May 1971	OFFICIAL TITLE OF SUPERVISOR COB, []	TYPED OR PRINTED NAME AND SIGNATURE /s/ Robert Farbini
--------------------	--	---

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL
I concur in the ratings and remarks of the supervisor. During his first tour abroad, Subject has done very well in his main fields of activity. His outstanding attribute at the moment is his persistence not only in going after operational targets but also in improving himself. He has encountered some difficulty in presenting his ideas in written form but he has faced up to this problem and, as the rating officer notes, has made significant improvement.

(Continued)

DATE 17 May 71	OFFICIAL TITLE OF REVIEWING OFFICIAL COS, Quito	TYPED OR PRINTED NAME AND SIGNATURE /s/ Paul V. Harwood
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SECRET

SECRET

Continuation of Comments by Reviewing Official

Subject has a clear-headed approach to the collection of intelligence and is realistic in evaluating potential sources. His fluency in the Spanish language has facilitated his movement in the local community and he has developed several potentially useful sources and identified others.

In considering this officer for promotion, two facts should be kept in mind:

- a. He is probably older and certainly more mature than the average officer at his grade level. He is anxious to get ahead and this explains much of his initiative and drive.
- b. The rating officer has rated him very realistically which, in my view, adds to the importance of the outstanding rating given him on Specific Duty No. 2.

SECRET

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Weapons Training/Defensive Driving Course No. 1/72

2-6 August 1971
Date

TRAINEE: FLORES, Daniel

OFFICE: WH

PURPOSE AND SCOPE OF COURSE:

The course provides basic proficiency training in the use of weapons for self-defense and in the techniques of defensive driving to counter vehicular kidnaping for Agency officers being assigned to hostile or unstable political and operational environments abroad.

ACHIEVEMENT RECORD:

This is to certify that Mr. Flores has satisfactorily completed the prescribed course of instruction.

FOR THE DIRECTOR OF TRAINING:



Chief, Special Activities Branch

9 August 1971

Date

C-O-N-F-I-D-E-N-T-I-A-L

Certification of Handgun Qualification

9 August 1971

Date

Mr. Frederick E. Owens and
(Instructor SAB Staff, OTG, ISOLATION)
Identity

Trainee FLORES, Daniel, WH
Identity

on 2-6 August, Mr. Flores was given 28 hours
date identity

instruction in firing techniques, weapon care and safe weapons handling

procedures. Subsequently Mr. Flores fired the handgun qualifica-
identity
tion course with Automatic (Cal. - 9mm) achieving a score of 258 out
Revolver (Cal. - 38) 261 out
weapon

of a possible 300. Mr. Flores demonstrated that he
identity

had absorbed the instruction on safe weapon handling and that he exercises

due care and discretion. Accordingly Mr. Flores is certified as
identity

qualified with the Automatic (Cal. - 9mm)
Revolver (Cal. - 38) as of this date.
weapon

Signed

Frederick E. Owens
FREDERICK E. OWENS, SAB/OTG
Instructor Identity

SECRET

Continuation of Narrative Comments

the target is good. The project is, however, in need of good human reporting assets and it is expected that as Subject overcomes a weakness mentioned in the next paragraph he will be able to devote more of his time to this important task.

The Subject has encountered some difficulty in the preparation of written material -- dispatches, intelligence reports -- and finds it necessary to spend an extended portion of his time on its preparation. The rater has discussed this with Subject on several occasions, and it is believed that his difficulty is due to a lack of experience, and that in time and with a continuing effort on his part he will develop his writing skills.

The Subject's overall attitude and response towards his professional responsibilities during the first tour have been positive. He is interested in the kind of work he is doing, likes it and is willing to put in the kind of long hours it sometimes demands without complaint.

Continuation of Comments of Reviewing Official

of the Base. He responds positively to guidance and direction; he is eager for new opportunities to enlarge his experience and knowledge. He appears to be completely motivated toward the work of this organization; it is a pleasure to have him in

SECRET

Revised by (S) (M) (P) (R)

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.

The period covered by this report encompasses the middle portion of the Subject's first tour as a Case Officer. His performance during this period has been balanced in that he has shown the kind of intelligence and maturity necessary to successfully carry out clandestine operational activity. He has also shown a weakness which he will need to overcome in order to achieve his full operating potential.

The Subject has turned in fine performance in the overall management of a very important and sensitive [redacted] operation which has been under his care since the pre-installation phase. His sure and careful handling of all succeeding phases of this operation led to a secure, uncomplicated installation, the recruitment and training of support agents, and the dissemination of valuable intelligence information. Subject's natural fluency in the Spanish language has been especially useful in this operation. His handling of this installation has been of a high professional caliber throughout.

The Subject is also responsible for the management of a project targeted against the [redacted]. His handling of this project has been good; he is a good agent handler; knows how to target his assets against objectives of most importance; and, his knowledge of (Continued)

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
30 Oct. 1970	/s/ Daniel Flores	
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
30 Oct. 1970		Robert L. Fabbrini /s/
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I agree with the ratings. This has been a good year for Subject, one which has given him a rather unusual opportunity to learn many facets of the work of this organization and one in which he has shown a very satisfactory level of accomplishment. Shortly after his arrival in [redacted] he became, for a short time, the Acting Chief of Base, and through that period and the ensuing change in Base Chiefs, he showed a professional maturity we felt to be exceptional for a young officer on his first tour. He has worked hard and intensely for improvement in the quantity and quality of his operational production, and he has collaborated very effectively with the other officers (Continued)		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	SIGNATURE OF REVIEWING OFFICIAL
30 Oct. 1970	COB	John D. [redacted]

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 036130	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) Flores, Daniel			2. DATE OF BIRTH 4 Aug 1935	3. SEX M	4. GRADE GS-10	5. SS D	
6. OFFICIAL POSITION TITLE Ops Officer				7. OFFICER OF ASSIGNMENT DDP/WH/Branch 3	8. CURRENT STATION <div style="border: 1px solid black; width: 100px; height: 15px;"></div>		
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	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 1 October 1969 - 30 September 1970			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory 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>M-Marginal 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>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Case Officer responsible for Base project targeted against the <div style="border: 1px solid black; width: 100px; height: 15px;"></div>						RATING LETTER S	
SPECIFIC DUTY NO. 2 Case Officer responsible for a sensitive <div style="border: 1px solid black; width: 50px; height: 15px;"></div> operation including the selection of the intelligence resulting from the operation						RATING LETTER S	
SPECIFIC DUTY NO. 3 The development of new agent assets and operations						RATING LETTER P	
SPECIFIC DUTY NO. 4 Preparation of dispatches, intelligence reports and other correspondence pertinent to the operation in his area of responsibility						RATING LETTER P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits and potential limitations or talents. Based on your knowledge of employee's overall performance during the rating period place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

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Section C

Narrative Comments, Cont'd

disciplined, effective manner enabling him to maintain a continuity and productivity within the Base operational requirements with security and dispatch.

Socially Subject and his wife are proving to be good mixers and both are gaining in popularity within the local [redacted] communities. They both have gained the respect and appreciation of the [redacted] complex not only as compatible personalities, but in her willingness to participate actively in [redacted] endeavors and his professional cooperative attitude. Their optimistic and positive conduct at official and non-official functions is a credit to the Base.

Subject's native fluency in Spanish and his Latin background is proving to be a definite asset in the performance of his assigned operational tasks and ability to handle agent assets amicably and productively.

He maintains accurate accounting records and is demonstrating responsible acute cost consciousness in the use of funds and properties.

This rater's principal criticism of this employee is his tendency toward impulsiveness and too-quick judgement before weighing all the facts and implications in the pursuit of his operational requirements; however, this weakness is more a function of his inexperience in the field and will be resolved as he gains more field experience.

Subject, although exhibiting resourcefulness and imagination in performing his assigned operational tasks also has a tendency to accept the judgement of other senior grade officers too readily rather than express his own convictions and trust in his own assessment of a situation.

This rater has counseled this Officer regarding these tendencies and he is taking measures to rectify them.

In judging his over all performance, this Rater is of the opinion if he continues to apply himself in handling tasks worthy of a senior grade officer, he should be considered for a promotion to the GS-10 level at the earliest opportunity.

RYBAT
SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) FLOREN, Daniel			2. DATE OF BIRTH 8-4-35	3. SEX M	4. GRADE (11-09)	5. SD D	
6. OFFICIAL POSITION TITLE Off Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/WII/Br 3		8. CURRENT STATION		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL	<input type="checkbox"/> %	<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) 13 May 1969 - 30 September 1969			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Case Officer responsible for handling Base operations and assets targetted against hard- and soft-line communist activities in the [] of [] DE 42						RATING LETTER S	
SPECIFIC DUTY NO. 2 Case Officer responsible for the handling of [] sensitive [] operations. He is also responsible for the translations, processing, and dissemination of the relevant intelligence info. DE 61						RATING LETTER S	
SPECIFIC DUTY NO. 3 Case Officer of [] assets targetted against the [] within [] groups. DE 63						RATING LETTER P	
SPECIFIC DUTY NO. 4 Development of new contacts and operations, including following up operational leads and recruitment pitches. DE 15						RATING LETTER P	
SPECIFIC DUTY NO. 5 Case Officer responsible for writing his own intelligence disseminations prepared from information obtained from his agent assets. DE 16						RATING LETTER P	
SPECIFIC DUTY NO. 6 Drafts operational correspondence, Project Renewals, and Progress Reports. DE 17						RATING LETTER S	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	

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.

OCT 28 10 40 AM '69

This employee, a GS-09, arrived PCS at the [] Base on 13 May 1969 and has been under this Rater's supervision during this four and one-half month period. [] is his first overseas assignment with this Agency.

During this short reviewing period, this Officer has demonstrated a marked insight and knowledgeableness of the operations he has been assigned, and has provided a number of good ideas and suggestions for the betterment of these operations. Subject is proving to be a hard worker and has not complained of the many extra hours he has devoted to his operations. He has accepted responsibilities without hesitation and is not afraid to take on difficult tasks using initiative and ingenuity in their completion. This latter quality has been amply demonstrated when the Rater was unexpectedly confined to a hospital in the [] for the full month of August 1969, leaving this employee solely responsible for the Base as the only inside Case Officer at the Base during this time. Rater's absence corresponded with a change in Case Officer PCS assignments at the Base, which left the Base temporarily depleted of Officers. During this period, Subject exhibited an ability and maturity expected of an officer of higher grade and greater field experience. He organized his increased workload in a
 ...Continued...

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
2 October 1969	/s/ Daniel Flores	
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
2 October 1969	Chief of Base	/s/ []
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
This Officer has made a most impressive beginning in []. He has in a few short months adapted to new tasks and a new environment with mature, if modest, assurance and a professional approach which speaks highly for the training and experience he has had. He has taken on, in the absence of the Chief of Base and other senior officers, responsibilities uncommon to an officer of his junior position, and he has handled them in a superior fashion. He and his wife have entered into their representational responsibilities with great enthusiasm and effectiveness, and I predict a most highly successful tour for him in []. Because he has shown a personal and professional competence beyond his grade level, it is strongly recommended that he be considered for promotion to GS-10 at the earliest opportunity.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
16 October 1969	Chief of Station	/s/ John S. Morgan

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130	
SECTION A GENERAL					
1. NAME (Last) Flores (First) Daniel (Middle)		2. DATE OF BIRTH 4 Aug 1935	3. SEX M	4. GRADE GS-08	5. SD D
6. OFFICIAL POSITION TITLE OPH Officer		7. OFF/DIV/RR OF ASSIGNMENT DDP/WH/4	8. CURRENT STATION HQS		
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input 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 type="checkbox"/> ANNUAL	<input checked="" 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) 19 September 1968 - 30 April 1969		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Operations officer handling the Headquarters direction and support of FI projects and activities.					RATING LETTER S
SPECIFIC DUTY NO. 2 Preparation of operational correspondence, dispatches, cables and special memoranda.					RATING LETTER P
SPECIFIC DUTY NO. 3 Coordination of operational matters with other components and desks.					RATING LETTER P
SPECIFIC DUTY NO. 4					RATING LETTER
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					P

13 MAY 1969
[Signature]

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Merits 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.</u> If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>Mr. Flores did a fine job while he was assigned to the Chile desk. He had responsibility for a variety of FI projects, including several complex and sensitive ones, which he ably handled. He had a full workload and in addition to his assigned responsibilities he was given FI assignments of every type as they arose. On one occasion he was sent on an operational trip to [redacted] where he was to contact, assess and support a target personality. Owing to circumstances beyond his control nothing went as expected but Mr. Flores, acting alone, improvised and adapted to the situation. This is indicative of the initiative and eagerness he displayed in his desk work. He was willing to learn and he accepted guidance and instruction to the letter. In addition Mr. Flores writes well and this is always an asset.</p> <p>Mr. Flores is fluent in Spanish. It is my impression that if there is one thing that Mr. Flores wants to be that is a field case officer. He is now getting that chance. He will soon leave on an assignment to [redacted]. I have no doubt that he will do very well.</p> <p>Mr. Flores did not have any managerial duties.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE 28 April 1969	SIGNATURE OF EMPLOYEE <i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 5 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE 28 April 69	OFFICIAL TITLE OF SUPERVISOR C/WH/4/Chile	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Robert Wiccha	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL I concur in the above assessment.			
DATE 29 April 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH/4	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Raymond A. Warren	

SECRET

STATE DEPARTMENT OF DEFENSE

1. NAME (LAST, FIRST, MIDDLE)	GRADE	OFFICE	Employee Serial No.
FLORES, Daniel	07		036130
2. DATE REPORT MADE OF	REPORTING PERIOD		
30 November 1968	17 December 1967 - 31 October 1968		

3. This course trainee has been assigned in course of his assigned Program with destination training to **Clandestine Operations**.

Detailed evaluations of his performance in each phase are contained in his Official Personnel Folder. Definition of the rating letter corresponds to that in Section B, Fitness Report Form 36 (4-65).

OVERALL PERFORMANCE IN INTEGRATED PROGRAM **Proficient**

4. COMMENT AND RELEVANT OBSERVATIONS.

Mr. Flores entered the CT Program on 11 December 1967, sponsored by DDP/WH Division. His work during formal training was characterized by determination, hard work, and a strong ambition to become a successful Clandestine Services operations officer. He responded well to supervision and guidance and experienced no difficulties in assimilating the principles and techniques covered by the instruction. In Operations Course Phase I, the key course for DDP case officers, he achieved an overall performance rating of HIGH PROFICIENT.

At the previous request of his Division Chief, Mr. Flores was, effective 10 October 1968, reassigned to DDP/WH Division.

27 NOV 1968
[Signature]

25 November 1968

[Signature]
John Gerry

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				030130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
FLORES, Daniel		4 Aug 35	M	GS-05	D
8. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION		
Intel Clerk			DDP/WH/COG WASH., D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input 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 type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			1 February 1967-15 June 1967		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
Performs intelligence operations support work in connection with Cuban CI operations. Assembles lead files, DEAF collates data on hand and additions information received in preparation for target analysis.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Screens Cuban Spanish language publications for information of value in the branch counter espionage-counter intelligence records and for operational data.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.					P
SPECIFIC DUTY NO. 4					RATING LETTER
Prepares translations from Spanish to English and English to Spanish of operational correspondence.					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
					S

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 important or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Flores is a part-time staff employee who works a maximum of 19 1/2 hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.

The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cases which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.

Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.

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

June 14, 1967

[Handwritten Signature]

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

DC/WH/COG/CICS

Carl Trottin

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I would rate Mr. Flores essentially the same as Mr. Trottin. I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

DC/WH/COG/CICS

Barry Mahoney

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) Flores Daniel		2. DATE OF BIRTH .4 Aug 35	3. SEX M	4. GRADE GS-05	5. SD D
6. OFFICIAL POSITION TITLE Intel Clerk		7. OFF/DIV/RR OF ASSIGNMENT DDP/WH/COG		8. CURRENT STATION WASH., D.C.	
9. CHECK (X) TYPE OF APPOINTMENT CAREER RESERVE TEMPORARY			10. CHECK (X) TYPE OF REPORT INITIAL 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) 1 April 66 - 31 Jan 67		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Conducts liaison between two contract agents and WH/COG/CICS				RATING LETTER P	
SPECIFIC DUTY NO. 2 Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.				RATING LETTER P	
SPECIFIC DUTY NO. 3 Prepares translations from Spanish to English and from English to Spanish				RATING LETTER S	
SPECIFIC DUTY NO. 4 Prepares material for input for the [] Program				RATING LETTER P	
SPECIFIC DUTY NO. 5				RATING LETTER	
SPECIFIC DUTY NO. 6				RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

JAN 30 10 48 AM '67

Mr. Flores has continued to perform at the same proficient level cited in his previous fitness report. The ratings and remarks appended to this report, accordingly, still remain applicable.

MAN ROOM

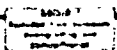
SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
	<i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
5 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
26 January 67	Chief, WH/COG/CICS	<i>[Signature]</i> Harry T. Mahoney
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Mr. Flores turns in a good piece of finished work and has demonstrated increasing ability as a Caso Officer. As soon as he graduates I plan to recommend him for CT training. I have discussed the matter with him and he plans to make a career with the Agency which will be mutually advantageous to him and the Agency.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
30 Jan 67	Deputy Chief, WH/COG	<i>[Signature]</i> Earl Williams

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130 ✓	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 4 Aug 35	3. SEX M	4. GRADE 5. SD GS-05 D
6. OFFICIAL POSITION TITLE Intelligence Asst.			7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/C		8. CURRENT STATION Washington D.C.
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 30 April 1966			12. REPORTING PERIOD (From - to) 1 April 65 - 31 March 66		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Conducts liaison between two contract agents and WH/COG/CICS					RATING LETTER P
SPECIFIC DUTY NO. 2 Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.					RATING LETTER P
SPECIFIC DUTY NO. 3 Prepares translations from Spanish to English and from English to Spanish					RATING LETTER S
SPECIFIC DUTY NO. 4 Prepares material for input for the [] Program					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of major or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If 30 PM 66

Mr. Flores is a part-time staff employee who works a minimum of nineteen hours per week; he is also a full time college student in his senior year, majoring in political science and specializing in Latin American studies. Subsequent comments should be prefaced by the statement that Mr. Flores' overall performance of his assigned duties would be considerably more efficient if he were able to devote full time to his assignment. On the other hand, Mr. Flores is preparing himself academically for a useful career with the Agency and in the rater's opinion shows promise of becoming a very capable and competent officer.

Mr. Flores is bilingual and has served very efficiently as a translator for the Branch. He has gained very valuable experience as a case officer in the handling of two contract agents of WH/COG/CICS and in doing so has demonstrated tact, sound judgment and a fine ability to handle people. Mr. Flores is very personable, intelligent and makes an excellent appearance. With the completion of his studies he should be able to make the transition from Intelligence Assistant to Junior Case Officer, which the rater heartily recommends.

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	
30 November 1966	<i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEES HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
11 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPE OR PRINTED NAME AND SIGNATURE
30 November 66	DC/WH/COG/CICS	<i>[Signature]</i> John A. Castoro
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Mr. Flores has worked closely under my direct supervision in the handling of the two contract employees listed under Specific Duty No. 1 and 2. I concur with the rating of Mr. Castoro and can only emphasize that I believe Mr. Flores will make a good Case Officer and I plan to recommend him for CT status as soon as he is able to be with us full time.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED NAME AND SIGNATURE
30 Nov 1966	Chief, WH/COG/CICS	<i>[Signature]</i> Harry T. Mahoney

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER
SECTION A					GENERAL
1. NAME <i>(Last) (First) (Middle)</i> FLORES, Daniel		2. DATE OF BIRTH 4 Aug 35	3. SEX M	4. GRADE GS-05	5. DD D
6. OFFICIAL POSITION TITLE Intel Clerk		7. OFF/DIV/DIR OF ASSIGNMENT DDP/WH/COG		8. CURRENT STATION WASH., D.C.	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR	<input type="checkbox"/> REASSIGNMENT EMPLOYEE
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> ANNUAL		
<input type="checkbox"/> SPECIAL (Specify)			<input checked="" type="checkbox"/> SPECIAL (Specify) Recommendation for Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 February 1967-15 June 1967		
SECTION B					
PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assembles lead files, collates data on hand and additions information received in preparation for target analysis.					RATING LETTER S
SPECIFIC DUTY NO. 2 Screens Cuban Spanish language publications for information of value in the branch counter-espionage-counter intelligence records and for operational data.					RATING LETTER S
SPECIFIC DUTY NO. 3 Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.					RATING LETTER P
SPECIFIC DUTY NO. 4 Prepares translations from Spanish to English and English to Spanish of operational correspondence.					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

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. Manager of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Flores is a part-time staff employee who works a maximum of 19 1/2 hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.

The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cards which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.

Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: June 14, 1967 SIGNATURE OF EMPLOYEE: Daniel Flores

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
DC/WH/COG/CICS Carl Trettin

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I would rate Mr. Flores essentially the same as Mr. Trettin, I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.

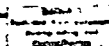
DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE
C/WH/COG/CICS Harry Mahoney

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				036130			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 4 Aug 35	3. SEX M	4. GRADE GS-05	5. SD D	
6. OFFICIAL POSITION TITLE Intelligence Asst.			7. OFF/DIV/BR OF ASSIGNMENT DDP/SAS		8. CURRENT STATION Washington D.C.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input checked="" 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. 30 April 1965			12. REPORTING PERIOD (From- to-) 1 January 1964 - 31 March 1965				
SECTION B							
PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1			Served as interpreter for WH/SA counterintelligence operations officers and Office of Communications officers in training and briefing agents				RATING LETTER
			DE62				S
SPECIFIC DUTY NO. 2			Assisted in the debriefing of a Cuban intelligence service defector.				RATING LETTER
			DE32				P
SPECIFIC DUTY NO. 3			Translated and participated in the preparation of agent [redacted] and [redacted]				RATING LETTER
			DB63				P
SPECIFIC DUTY NO. 4			Performed traces and research relating to counterintelligence operations and activities.				RATING LETTER
			DC30				S
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	
13 APR 1965							



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

Mr. Flores was a particularly useful and versatile employee in the WH/SA counterintelligence operations unit. Although he had no operational training or previous operational experience, he learned rapidly and performed well the operational support type duties assigned to him. His fluent knowledge of the Spanish language, his willingness to learn and perform tedious tasks, and his conscientious approach to his work were important factors in his performance. His previous assignments in the RI Division and in WH/SA as a translator and in conducting name traces gave him a good background.

With respect to specific duty #3, on two separate operations in [redacted] Mr. Flores participated in the training and preparation of agents for [redacted]. In the first operation he interpreted for training in [redacted], [redacted]) and related subjects. The second operation involved [redacted] only. This experience enable Mr. Flores to perform duties (specific duty #3.) relating to communications with agents [redacted]

Mr. Flores plans to continue his university education and attain a degree. Arrangements have been completed so that he may work in the Agency on a part time basis beginning in January 1965. He will attend classes at a local university as a full time student.

Mr. Flores was promoted from GS-04 to GS-05 on 16 March 1964. He has been performing duties at the GS-06 level, and he should be promoted.

(see page two)

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE: 6 April 1965 SIGNATURE OF EMPLOYEE: [Signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 15 months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE: 6 April 1965 OFFICIAL TITLE OF SUPERVISOR: C/WH/SA/CI Ops (WH/C/RR/OS) TYPED OR PRINTED NAME AND SIGNATURE: Richard Tansing

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur.

DATE: 4-1-65 OFFICIAL TITLE OF REVIEWING OFFICIAL: C. WH SA CI (WH C SP) SIGNATURE: [Signature] Harold F. Swenson

SECRET

SECRET

- 2 -

Mr. Flores is cost conscious and effective in the use of space, equipment and funds.

Mr. Flores does not hold a supervisory position.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) FLORES Daniel			2. DATE OF BIRTH 4 Aug. 1935	3. SEX Male	4. GRADE 5. SO GS-4 D
6. OFFICIAL POSITION TITLE Translator			7. OFF. DIV./RR OF ASSIGNMENT DDP/S.A.S.	8. CURRENT STATION Washington, D.C.	
9. CHECK (X) TYPE OF APPOINTMENT CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			10. CHECK (X) TYPE OF REPORT INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> X SPECIAL (Specify): Promotion Recommendation		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 10 June 1963 to 6 December 1963		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Translates material from Spanish to English and vice-versa. Translates agent messages.					RATING LETTER S
SPECIFIC DUTY NO. 2 Performs name traces, analyses, extracts and summarizes obtained information.					RATING LETTER P
SPECIFIC DUTY NO. 3 Prepares and initiates requests for operational clearances.					RATING LETTER P
SPECIFIC DUTY NO. 4 Writes and prepares dispatches, cables and memoranda.					RATING LETTER A
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and pertinent limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P
30 DEC 1963					

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

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

Mr. Flores entered on duty with Special Affairs Staff in June 1963. Due to his proficiency in Spanish he was assigned to translating duties and immediately proved to be an invaluable asset to this office as well as to the Staff as a whole. He worked many late hours and weekends helping to facilitate the flow of translations from this office to the different components within SAS. His performance of these duties can best be characterized as "exceptional" in all degrees.

Mr. Flores expressed a desire to move into a position of greater responsibility and this request was readily granted approximately one month ago. He is currently being trained as an intelligence assistant in Ops Support functions and his performance to date has been excellent. In his new duties Mr. Flores requires very little supervision. This can be attributed in part to his degree of intelligence as well as the background he obtained for his present duties while assigned to his previous job in RID/INDEX. Mr. Flores spent approximately one year in his former job and the knowledge he brought with him resulting to name tracing procedures has enabled him to grasp the duties of his new position quite rapidly.

As a means of furthering his education Mr. Flores is attending American University at night. He has expressed a desire to obtain some agency training and would like very much to be enrolled in the Intelligence Orientation Course as soon as possible.

Mr. Flores entered the agency as a GS-4 in March 1962. It is strongly recommended that he be promoted at the earliest possible date to a GS-5.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE 17 Dec 1963 SIGNATURE OF EMPLOYEE Daniel Flores

2. BY SUPERVISOR

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

DATE 17 Dec 1963 OFFICIAL TITLE OF SUPERVISOR CHIEF, SAS/ICS TYPED OR PRINTED NAME AND SIGNATURE JOSEPH A. MOUGHAN

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the assessment of the supervisor, concur in his decision to move Mr. Flores into a position of greater responsibility, and I support the recommendation that Mr. Flores be promoted.

Attached is a formal recommendation.

DATE 17 Dec 63 OFFICIAL TITLE OF REVIEWING OFFICIAL CHIEF, SAS/INTEL TYPED OR PRINTED NAME AND SIGNATURE JOHN K. KING

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						036130	
SECTION A			GENERAL				
1. NAME (Last) (First) (Middle) FLORES Daniel			2. DATE OF BIRTH 1935	3. SEX M	4. GRADE GS-4	5. SD D	
6. OFFICIAL POSITION TITLE File Clerk			7. OFF/DIV/BR OF ASSIGNMENT OPSER/RID/RE/TN		8. CURRENT STATION Hqgrs.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):				
11. DATE REPORT DUE IN D.P. 30 April 1963			12. REPORTING PERIOD (From - to) 13 December 1962 - 31 March 1963				
SECTION B			PERFORMANCE EVALUATION				
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Conducts name traces in the Main Index of the Records Integration Division.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Fulfills daily and weekly maintenance duties required of all name checkers; e.g., filing, auditing and refiling.						RATING LETTER P	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

APR 23 4 13 PM '63

During this reporting period, Mr. Flores continued to conduct himself in the exceptionally proficient manner which was noted in his Fitness Report. He is one of two name tracers who specialize in a particular area, a fact which tends to increase the difficulty as well as the responsibility of name tracing. In spite of this burden, Mr. Flores has consistently maintained an above average level of production and an exceptionally high quality in his finished products.

Mr. Flores is a conscientious and highly motivated employee who evidences a sound sense of responsibility. He has frequently voiced a desire to take advantage of any career opportunities the Agency may offer to him. He is currently enrolled as a full-time student at the American University.

SECTION D

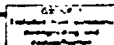
CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 10 April 1963	SIGNATURE OF EMPLOYEE <i>Alfred Flores</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 10 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 10 April, 1963	OFFICIAL TITLE OF SUPERVISOR Deputy Chief, RID/EL (U/S)	TYPED OR PRINTED NAME AND SIGNATURE <i>James J. Raley, Jr.</i> JAMES J. RALEY, Jr.
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE 14 April 1963	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, RID/EL (U/S)	TYPED OR PRINTED NAME AND SIGNATURE <i>Arthur L. Fosby</i> ARTHUR L. FOSBY

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER		
					036130		
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) FLORES, Daniel			2. DATE OF BIRTH 14 Aug 1935	3. SEX M	4. GRADE GS-4	5. SD D	
6. OFFICIAL POSITION TITLE File Clerk			7. OFF/DIV/BR OF ASSIGNMENT OPGER/RII/RB		8. CURRENT STATION Hdqs.		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<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"/>
11. DATE REPORT DUE IN O.P. 12 January 1963			12. REPORTING PERIOD (From - to) 12 March 1962 - 12 December 1962				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Performs name traces of personal and impersonal subjects in the RI/Index.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Fulfills daily and weekly requirements of maintenance duties; e.g., filing, purging, auditing, and screening of index cards.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						P	



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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

From the outset Mr. Flores has shown many characteristics of an above-average employee. His initial training in the intricacies of his duty assignment was marked by a high degree of application, interest, and achievement. Since that time Mr. Flores has proven himself a conscientious and responsible employee, one whose work record is distinguished by a high calibre of quality and quantity.

Because of his fine record, Mr. Flores was chosen one of the three area specialists for this section. He specializes in the Spanish-Portuguese area and his work is characterized by exceptional proficiency.

At present Mr. Flores is registered at American University as a sophomore. Inasmuch as he has exhibited both potentiality and strong working habits, I recommend that Mr. Flores be given the Professional Battery Test at the earliest opportunity.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

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

DATE

3 January 1963

SIGNATURE OF EMPLOYEE

Manuel Flores

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

7 months

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

DATE

3 January 1963

OFFICIAL TITLE OF SUPERVISOR

Deputy Chief, RID/IN (R/S)

TYPED OR PRINTED NAME AND SIGNATURE

James J. Raley, Jr.
JAMES J. RALEY, Jr.

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully concur in the above evaluation.

DATE

3 January 1963

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, RID/Index

TYPED OR PRINTED NAME AND SIGNATURE

Aubrey L. Honey
AUBREY L. HONEY

SECRET

SECRET
(When Filled In)

TRAINING EVALUATION--CLERICAL INDUCTION

SECTION I IDENTIFYING INFORMATION			
NAME OF STUDENT FLORES, Daniel	SEX M	DATES OF ATTENDANCE 19-23 March 1962	
DATE OF BIRTH 4 August 1935	FOB DATE 12 March 1962	TITLE AND GRADE File Clerk GS-4	

SECTION II CHARACTERISTICS OF THE COURSE
 Each course subject is taught daily for a 5-day period. Students who do not meet Agency standards in shorthand and/or typewriting within this 5-day period receive further instruction in an attempt to meet the established qualifications. The second week of geography instruction is given to students who have not been assigned to their positions. It is possible that not all students will be assigned to every course subject.

SECTION III OBJECTIVES

To meet the typewriting criterion based on the scale on the reverse of this page. (For qualification, students must meet this requirement once.)
 To take dictation at 80 words a minute for 3 minutes and to transcribe with 5 or fewer errors in not more than 20 minutes. (For qualification, students must meet this requirement once.)
 To recognize errors in grammar and in punctuation and capitalization.
 To study the politics and the geography of countries of Europe and Asia. (These continents are covered in alternate weeks.)
 To receive instruction in typing of reproduction masters, making erasures, caring for the typewriter, and utilizing typing shortcuts.
 To become familiar with the system of filing as outlined in the Agency's "Handbook for Subject Filing."

SECTION IV QUALIFICATION IN SKILLS				QUALIFICATION		
COURSE PERFORMANCE				QUALIFIED		NOT QUALIFIED
				IN COURSE	AT 100	
TYPEWRITING	WPM 44	ERRORS 15	RET 29			X
SHORTHAND	WPM	ERRORS				

SECTION V RATINGS
 Agency samplings of students' ratings indicate the percentage distribution as noted below. This trainee's rating is marked by the asterisk.

SUBJECT	POOR	FAIR	SATISFACTORY	EXCELLENT
GRAMMAR	4%	16% *	51%	27%
PUNCTUATION AND CAPITALIZATION	20% *	27%	41%	12%

EXCELLENT - - - thorough knowledge of material presented and above-average performance in meeting course goals.
SATISFACTORY - - average knowledge of material presented and adequate performance in meeting course goals.
FAIR - - - - borderline knowledge of material presented and limited performance in meeting course goals.
POOR - - - - inadequate knowledge of material presented and unsatisfactory performance in meeting course goals.

SECTION VI FAMILIARIZATION LECTURES

<input checked="" type="checkbox"/> GEOGRAPHY OF EUROPE	<input type="checkbox"/> GEOGRAPHY OF ASIA	<input checked="" type="checkbox"/> AGENCY FILING SYSTEM	<input checked="" type="checkbox"/> OFFICE PRACTICE
---	--	--	---

SECTION VII COMMENTS

This student was assigned to the class in typewriting at his own request. Because it is not necessary for an individual whose job title is File Clerk to meet Agency standards in typewriting, he was released from training when his final processing was completed.

CONTINUE COMMENTS ON REVERSE SIDE OVER

FOR THE DIRECTOR OF TRAINING:	SIGNATURE OF CHIEF, CLERICAL INDUCTION TRAINING MARY J. KECK <i>Mary J. Keck</i>
-------------------------------	---

SECRET

(When Filled In)

<u>GROSS WORDS</u>	<u>ERRORS</u>	<u>NET WORDS</u>	<u>GROSS WORDS</u>	<u>ERRORS</u>	<u>NET WORDS</u>
45	5	40	63	14	49
46	6	40	64	14	50
47	6	41	65	15	50
48	7	41	66	15	51
49	7	42	67	16	51
50	7	43	68	16	52
51	8	43	69	16	53
52	9	43	70	16	54
53	9	44	71	17	54
54	9	45	72	18	54
55	10	45	73	18	55
56	10	46	74	19	55
57	10	47	75	19	56
58	10	48	76	20	56
59	11	48	77	20	57
60	12	48	78	20	58
61	12	49	79	21	58
62	13	49	80	21	59

This scale conforms to that used by the Civil Service Commission. The number of errors indicated after the gross is the maximum permissible for that specific number of gross words typed; i.e., an individual who types 60 words per minute would be allowed no more than 12 errors in a 10-minute typewriting test.

SECRET
(When Filled In)

REPORT OF TEST RESULTS (CLERICAL SKILLS)

NAME FLORES, Daniel (NMI)	TITLE AND GRADE File Clerk GS-4	DATE OF BIRTH 4 August 1935
DATE 14 March 1962	PERSONNEL OFFICER - IAS	

AGENCY STANDARDS

TYPEWRITING The typewriting criterion is based on the scale on the reverse of this page.

SHORTHAND Dictation at 80 words a minute for three minutes and the transcription of the dictated material with five or fewer errors in not more than twenty minutes.

EXAMINEE'S RATINGS

TYPEWRITING: WAM 43 Errors 14 Net 29 Qualified: Yes _____ No X

SHORTHAND: WAM _____ Errors _____ Qualified: Yes _____ No _____

REMARKS: Training in typewriting recommended if he so desires. It is not necessary for his job title.

MARY J. MEYER
CHIEF, CLERICAL INSTRUCTION TRAINING

SECRET

CONFIDENTIAL
(When Filled In)

THIS INFORMATION IS FOR AUTHORIZED PERSONS ONLY TEST SCORES ARE NOT TO BE REVEALED TO EXAMINEE.

OFFICE OF TRAINING, ASSESSMENT AND EVALUATION STAFF EVALUATION OF TEST RESULTS (CLERICAL)		DATE 14 March 1962
NAME FIOROS, Daniel (M)	GRADE AND POSITION GS-11 File Clerk	PERSONNEL OFFICER TAS

TEST RESULTS ARE AN INTEGRAL PART OF THE FACT FINDING PHASE OF MOST PERSONNEL OPERATIONS. EVALUATION OF THESE MEASUREMENTS IN RELATION TO OTHER FACTUAL MATERIAL IN THE PERSONNEL RECORD PROVIDES ONE OF THE BASIS FOR THE SELECTION AND PLACEMENT OF APPLICANTS AND FOR COUNSELING WITH NEW EMPLOYEES. HOWEVER, THE DECISION AS TO WHETHER AN INDIVIDUAL CAN AND WILL PERFORM THE DUTIES OF A SPECIFIC JOB MUST REST ON THE JUDGMENT OF THE RECRUITER OR PLACEMENT OFFICER, WHO CONSIDERS ALL ASPECTS OF THE INDIVIDUAL'S ABILITY, BACKGROUND, AND PERSONALITY IN RELATION TO THE REQUIREMENTS OF THE AGENCY.

THIS REPORT EVALUATES THE SUBJECT'S PERFORMANCE BY COMPARING HIS SCORES WITH THOSE OF A NATIONWIDE GROUP OF TWELFTH GRADE STUDENTS OF THE SAME SEX. SPECIFIC APTITUDES ARE IDENTIFIED BY USING A VARIETY OF TESTS RANGING FROM WORK SAMPLES OF FILING AND CHECKING TO MEASURES OF REASONING ABILITY. IN EVALUATING THESE TEST SCORES FOUR GENERAL CONCEPTS SHOULD BE KEPT IN MIND: (1) TESTS ARE MORE EFFECTIVE IN SCREENING OUT POTENTIAL FAILURES THAN IN IDENTIFYING THOSE WHO WILL PERFORM SUCCESSFULLY. (2) PERSONS WHOSE SCORES ARE PREDOMINANTLY IN THE LOWEST 16% ORDINARILY ARE NOT SUITED FOR OFFICE WORK. (3) MOST JOBS DO NOT REQUIRE HIGH SCORES ON ALL TESTS, BUT HAVE A RANGE WITHIN WHICH PEOPLE CAN DO THE WORK EFFECTIVELY AND TEND TO REMAIN ON THE JOB. (4) EFFICIENCY IN PLACEMENT NECESSITATES MATCHING THE JOB AND THE INDIVIDUAL; BOTH THOSE WHO ARE OVERQUALIFIED AND THOSE WHO ARE UNDERQUALIFIED ARE LIKELY TO QUIT.

A DESCRIPTION OF THE SIX TESTS IN THE BATTERY IS GIVEN ON THE BACK OF THIS FORM. IN CASES WHERE THE PATTERN OF THE TEST SCORES APPEARS TO INDICATE APTITUDE IN PARTICULAR AREAS THIS WILL BE NOTED IN THE REMARKS SECTION. WHERE RESEARCH STUDIES HAVE BEEN CONDUCTED ON THE RELATIONSHIP OF THE TESTS TO JOB PERFORMANCE THESE COMMENTS WILL RELATE TO SPECIFIC JOBS. THIS SECTION MAY ALSO INCLUDE A BRIEF ANALYSIS OF THE INDIVIDUAL'S POTENTIAL IN RELATION TO HIS INTERESTS AND BACKGROUND.

CONSULTATION OR FURTHER INFORMATION REGARDING INTERPRETATION OF TEST SCORES IS AVAILABLE BY CALLING EXTENSION 8017.

NAME OF TEST	VERY LOW		LOW		AVERAGE		HIGH		VERY HIGH	
	2%	9%	25%	50%	75%	90%	95%	99%	99%	99%
CLERICAL SPEED AND ACCURACY								✓		
SPELLING								✓		
SENTENCES						✓				
NUMERICAL ABILITY							✓			
ABSTRACT REASONING							✓			
VERBAL REASONING					✓					

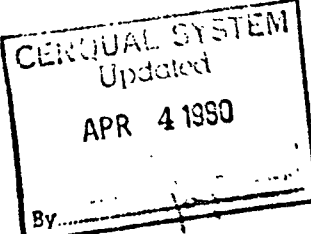
REMARKS:

Mr. Fioros should be referred for P&TB, preferably while he is still in the IAS.

FOR DELETION OF ADDED TESTS SEE CLERK OR QUALITY SIDE OF THIS REPORT

CONFIDENTIAL (When Filled In)

B-11A

CERTIFICATION OF LANGUAGE PROFICIENCY IN <u>Spanish A</u>						DATE PREPARED <u>4-1-80</u>	
SSN <u>41610 41262310</u>		NAME (Last, First, MI) <u>Flores, Daniel</u>			DATE OF BIRTH YEAR MONTH DAY <u>3 15 18 14 13</u>		DIVISION <u>LA</u>
TYPE CHANGE <u>C</u>	LANG CODE <u>PL18</u>	READING* <u>+</u>	SPEAKING* <u>5</u>	UNDERSTANDING* <u>5</u>	DATE TESTED YR MO DA <u>80 3 30</u>		TYPE TEST <u>N</u>
*SEE BACK FOR PROFICIENCY LEVEL DEFINITIONS							
REMARKS <u>Outside Test.</u>							
				CERTIFICATION OF PROFICIENCY <u>Arduo Flores Jr.</u> CHIEF OF TESTING/LS TEST NUMBER <u>42001</u>			

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE Daniel Flores		DATE RECEIVED AT HEADQUARTERS 22 May 79	NAME OF SUPERVISOR Lawrence Sternfield	DATE (FORM 100-10)
DATE RECEIVED AT HEADQUARTERS 5 June 1979		STATION NUMBER JIMBT-14447	DATE RECEIVED BY EARLIER SERVICE	HOME BASE COMPONENT LA
DATE OF BIRTH 4 Aug 55	SERVICE DESIGNATION DQG	CURRENT POSITION AND GRADE Ops Officer, GS-13	STATION OR RATE	CURRENT COVER

TO BE COMPLETED BY EMPLOYEE

1. DATE OF PCS ARRIVAL IN FIELD February 1978	10. REQUESTED DATE OF DEPARTURE Operations Officer GS-13	11. EXPECTED DATE OF FIRST CHECK-IN AT HQ SEE 6A	12. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE SEE 6A
--	---	---	--

13. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

Spouse - 43
Daughter - 5

14. PERSONAL ESTABLISHMENT FACTORS WHICH SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

Child's schooling

15. LIST YOUR MAJOR DUTIES DURING CURRENT ASSIGNMENT (use special role on transmitted form):

Liaison Officer in charge of an 18-man unit.

16. TRAINING DESIRED
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

Training in a third language.
Additional management training offered either by the Agency or by a private institution. Consideration for an appointment to a War College.

SECRET

As noted in 1B below, my first choice for my next assignment is that of Chief of Base in [redacted] or Chief of Base in Latin America. I have served three tour overseas and a four-year tour at Headquarters in Cuban Operations. In the past ten years I have gained experience in technical operation, operations related to the priority and hard targets and, prior to my assignment to [redacted] as supervisor of one of the four branches in Cuban Operations. In [redacted] my responsibilities consist of the supervision and administration of an [redacted]-man unit composed of [redacted] nationals which I manage and direct operationally in coordination with the Government of [redacted]. I have been in [redacted] fifteen months.

Should the Chief of Base position in [redacted] become available in the summer of 1980 or 1981 and this job is offered to me, I would be

48. INDICATE BY CHECKING ONE OF THE FOLLOWING YOUR PREFERRED TOUR OF DUTY. IN APPROPRIATE BOXES, PLEASE INDICATE YOUR PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES, EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR. *Please see CA

- EXTEND TOUR 4-16 MONTHS AT CURRENT STATION TO depending on next assignment (DATE)
- BE ASSIGNED TO POSTS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE BY DIVISION, STAFF OR OFFICE. 1ST CHOICE: War College 2ND CHOICE: Management 3RD CHOICE: Headquarters Tour
- BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE REGION, GEOGRAPHIC AREA OR SPECIALIZATION. 1ST CHOICE: [redacted] 2ND CHOICE: COB, Latin Am 3RD CHOICE: Washington, D.C.
- RETURN TO MY CURRENT STATION.

PREPARE UPDATING OF PERSONAL SECURITY INFORMATION IN ACCORDANCE WITH DDI-F 240-B AND FORWARD UNDER SEPARATE COVER. INDICATE DATE FORWARDED OR TO BE FORWARDED.

TO BE COMPLETED BY FIELD STATION

49. 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.

Based upon Subject's experience both prior to and during his current tour, his requests for assignment as stated by him are very reasonable. I fully endorse his requests.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

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

DATE

SIGNATURE

FOR USE BY CAREER SERVICE

51. APPROVED ASSIGNMENT

52. EMPLOYEE NOTIFIED BY

DATE

CABLE NO.

DATE

CAREER SERVICE REPRESENTATIVE

DATE

SECRET

SECRET

CA Continued. . .

amenable to an extension in [] for a period of 12 to 16 months depending on the timing of the assignment. If I were to be assigned to a country where an additional language is needed, time for language training should be taken into consideration.

In the event that a position as Chief of Base does not become available within the next year or two, my second choice is to be considered for a War College either for calendar year 1980 or 1981. This would enable me to more fully participate in the Agency's rotational program and would provide me with a higher level of training needed for career mobility in the Agency.

My third choice is to be considered as a candidate for the agency's management program at one of the participating Universities in the United States with the intention of accepting a field assignment immediately after the termination of this training. I am prepared to make all the necessary arrangements toward this end (i.e., applying for admission, etc.) provided a list of Universities is furnished to me.

As noted above, I am willing to remain in [] through the summer of 1981 if my first choice is approved. In the event that my first choice cannot be granted I would be available to return to the United States in the summer of 1980 to prepare for my second or third choice. Should my second or third choice not be granted, I would prefer to return to the United States for an assignment in Washington.

SECRET

ADMINISTRATIVE
Internal Use Only

C 10

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
036130	Flores	Daniel	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (O/P only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 59, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38-39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION			Mexico	40-42
0	2	1	5	7	8		1			4 5 0

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		37	38-39		
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION				40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. **IN 0326885** DOCUMENT DATE PERIOD **2/15/78**

REMARKS

PREPARED BY DCO	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C & L DIVISION, CFRD	DATE 2/23/78	SIGNATURE <i>[Signature]</i>

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

*to turn to [unclear]
by 16 Jan*

CONFIDENTIAL
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

DANIEL FLORES
NAME
(Please Print)

Daniel Flores
SIGNATURE

Jan 30, 1978
DATE

FORM 3661
5-74

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

CONFIDENTIAL
(When Filled In)

NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

Daniel Flores
NAME
(Please Print)

Daniel Flores
SIGNATURE

14 Nov. 1977
DATE

FORM 3661
5-74

CONFIDENTIAL

E2, IMPDET CL. BY: 007622 (4)

SECRET
(When Filled In)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTEMPLATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE

Daniel Flores

SO

D

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

Mexico City

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS

XX

C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT. (See HR 20-18)

REQUESTED (When Applicable)

OPERATING OFFICIAL

B. NONSTANDARD TOUR OF DUTY OF _____ MONTHS PREVIOUSLY APPROVED PER HR 20-18.

OPERATING OFFICIAL

J. J. Halpin
J. Halpin CJA/PERS

CONCUR

CAREER SERVICE

REPORT DIRECTOR

APPROVED

DIRECTOR OF PERSONNEL

III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. THE DESIGNATION SHALL BE SET IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 OF THE SERVICE AGREEMENT YOU WILL BE REQUIRED TO SIGN HR 22 (3) NORMALLY INDICATE THE PLACE WHERE YOU PERMANENTLY RESIDE IN THE UNITED STATES. THE DESIGNATION OF THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF SAID TOUR IS TRANSFERRED TO A STATE WHICH YOU MAY SELECT AT THE TIME OF THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE OUTSIDE THE UNITED STATES. YOUR PERMANENT PLACE OF RESIDENCE OUTSIDE THE UNITED STATES SHALL BE THE PLACE WHERE YOU PERMANENTLY RESIDE AND WHERE YOU PERMANENTLY INTEND TO RESIDE. YOUR PERMANENT PLACE OF RESIDENCE OUTSIDE THE UNITED STATES SHALL BE THE PLACE WHERE YOU PERMANENTLY INTEND TO RESIDE AND WHERE YOU PERMANENTLY INTEND TO RESIDE. YOUR PERMANENT PLACE OF RESIDENCE OUTSIDE THE UNITED STATES SHALL BE THE PLACE WHERE YOU PERMANENTLY INTEND TO RESIDE AND WHERE YOU PERMANENTLY INTEND TO RESIDE.

FORM 3154

SECRET

USE PREVIOUS EDITIONS

FORM 3154 (REV. 10-65)

SECRET
(when filled in)

<p>5. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof)</p> <p>FULL ADDRESS</p> <div style="border: 1px solid black; width: 200px; height: 20px; margin: 5px 0;"></div> <p><i>VIENNA, VIRGINIA 22180</i></p>	<p>6. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 5)</p> <p>FULL ADDRESS</p>
CONCUR	
<p>DEPUTY DIRECTOR</p> <p><i>Ray L. Hellmich</i></p>	<p>DATE</p> <p><i>1/9/78</i></p>
APPROVED	
IV. HOME LEAVE POINT	
<p>7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.</p> <p>8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-308(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.</p>	
<p>9. DESIGNATION PER ITEM 7 ABOVE</p> <p>FULL ADDRESS</p> <p><i>PORTLAND, OREGON</i></p>	<p>10. DESIGNATION PER ITEM 8 ABOVE.</p> <p>FULL ADDRESS</p>
CONCUR	
<p>RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT</p> <p><i>IN-LAWS</i></p>	<p>DEPUTY DIRECTOR</p>
APPROVED	
<p>DEPUTY DIRECTOR</p> <p><i>Ray L. Hellmich</i></p>	<p>DATE</p> <p><i>1/9/78</i></p>
APPROVED	
EMPLOYEE CERTIFICATION	
<p>I have read and understand my service obligations and travel entitlements as specified in this agreement.</p>	
<p><i>[Signature]</i></p>	

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-8	NAME		
	LAST (Print)	FIRST 7-26	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. '88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
28-28	27-28	29-30	31-31	32-34	33-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
03	08	77	03	11	77	2 - TDY (Basic) 3 - CORRECTION 4 - CANCELLATION	2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. AA 10-77	DOCUMENT DATE/PERIOD 3/8-3/11/77
---	-------------------------------------

REMARKS

PREPARED BY [Signature]	REPORT SUBMITTED ON [Date]	ADDER DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 7/1/77	SIGNATURE [Signature]	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE
Internal Use Only**

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 1-24	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 96, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
02-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	WESTERN HEMISPHERE	40-42
02	04	77	02	06	77		2			8 11

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 2/3-2/6/77

REMARKS

PREPARED BY	REPORT APPROVED BY (Control Document)	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	SIGNATURE	
2/1/77	<i>Mike Mangan</i>	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-8	NAME		
	LAST (Print)	FIRST I-24	MIDDLE
0316130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39
								40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	1 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39
04	12	77	04	15	77		2	40-42
								40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS, OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 4/12-4/15/77

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	7/14/77	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION GIVEN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRP 20-7 PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) (First) (Middle)
Flores Daniel

1. MARITAL STATUS (Check one)
 SINGLE MARRIED SEPARATED DIVORCED WIDOWED ANNULLED
 IF MARRIED, PLACE OF MARRIAGE: **Lima, Peru** DATE OF MARRIAGE: **18 Nov 1960**
 IF DIVORCED, PLACE OF DIVORCE DECREE: **N/A** DATE OF DECREE:

2. MEMBERS OF FAMILY
 NAME OF SPOUSE: [] ADDRESS (No., Street, City, State, Zip Code): **Vienna, Va. 22180** TELEPHONE NO.: **573-0797**
 NAME OF CHILDREN: [] ADDRESS: **Vienna, Va. 22180** SEX: **F** DATE OF BIRTH: []

NAME OF PARENT (or sole guardian): [] ADDRESS: **Gonzales, Texas 78629** TELEPHONE NO.: **512-672-6061**

NAME OF MOTHER, INCLUDING MAIDEN NAME (of female guardian): **N/A** ADDRESS: [] TELEPHONE NO.:

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY?
None

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 5% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 27-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME: **N/A** DATE OF BIRTH: [] RELATIONSHIP:

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Last, First, Middle): **Mr. Vicente Patlan** RELATIONSHIP: **Brother-in-law**
 HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE: **627 S. River St., Seguin, Texas 78155** HOME TELEPHONE NUMBER: **512-379-1087**
 BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE: **Seguin School District** BUSINESS TELEPHONE & EXTENSION:

IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)
 YES [] NO

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)
 YES [] NO **Vienna, Va. 22180**

WAS THIS INDIVIDUAL EVER THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.)
 YES NO []

The persons named in item 2 or 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.

CONFIDENTIAL
(When Filled In)

5. VOLUNTARY ENTRIES		
<p>Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.</p> <p>INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.</p> <p align="center">Riggs National Bank Joint account: Daniel and/or Flores </p>		
<p>ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>IF YES, DO YOU HAVE A JOINT ACCOUNT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" where is document located?)</p> <p align="center">At home. New is being prepared.</p>		
<p>HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes" give name(s) and address) Mr. and Mrs. </p>		
<p>HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)</p>		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY (No Approval Required)		
<p>RESIDENCE WHEN EMPLOYED (Full Address)</p>	<p>PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)</p>	
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
<p>FULL ADDRESS</p>	<p>DEPUTY DIRECTOR OR ASSISTANT</p>	<p>DATE</p>
<p>SIGNED AT</p>	<p>DATE</p>	<p>DIRECTOR OF PERSONNEL (when applicable per HR 22-3) DATE</p>
<p><i>Daniel Flores</i></p>	<p><i>Dec 30 1977</i></p>	<p>SIGNATURE</p>

CONFIDENTIAL

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST	MIDDLE
026130	FRICK	DONALD	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Opp only) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY		
MONTH	DAY	YEAR	MONTH	DAY	YEAR				1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39
25-26	27-28	29-30	31-32	33-34	35-36						40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37
12	14	77	12	15	77		2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

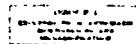
SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	
DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & L DIVISION, CTRB.	DATE 2/1/78	SIGNATURE <i>Donald J. Frick</i>

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
020130	FLORIS	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
01	16	78	01	19	78	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	2		WESTERN H.	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
-----------------------------	----------------------

REMARKS

PREPARED BY	REPORT ANNOTATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE 2/6/78	SIGNATURE Daniel J. Ford
C & L DIVISION, CTDD.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ASSAID

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
026130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38	39
									40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	
10	28	77	11	03	77	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39
									40-42
									WESTERN HEMISPHERE 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
-----------------------------	----------------------

REMARKS

PREPARED BY DCO	REPORT ANNOTATED IN CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> C & L DIVISION CYRR.	DATE 1/23/78	SIGNATURE Dorit L. Jan
<input type="checkbox"/> C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 7-24	MIDDLE
026130	Flanagan	David	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY		
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE		CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38	39	40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)		
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE		CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39	40-42
10	17	77	10	20	77		2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	


DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	16 Dec 77

REMARKS

PREPARED BY	DATE	APPROVED BY (OFFICIAL SIGNATURE)	DATE	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

CONFIDENTIAL

SE TRAINING REPORT		SOVIET/EAST EUROPEAN OPERATIONS COURSE	
STUDENT Flores, Daniel		YEAR OF BIRTH 1935	GRADE GS-12
ENR DATE March 1962	OFFICE LA	SERVICE DESIGNATION D	COURSE DATES 7 - 15 November 1977
<p align="center">COURSE OBJECTIVES</p> <p>To orient the student on the special nature of the Directorate of Operation's Soviet/East European target and to examine the application of clandestine methods for collecting information on assessing and preparing recruitment operations against Soviet/East European personalities.</p>			
<p align="center">ACHIEVEMENT RECORD</p> <p>This is a certificate of attendance. No evaluation is made of individual performance in the course.</p>			
<p align="right">  SE Training Officer </p>			

FORM 3687 OBSOLETE PREVIOUS EDITIONS

CONFIDENTIAL

E-2. IMPDET CL. BY. 059524 (04-45)

CONFIDENTIAL

OFFICE OF TECHNICAL SERVICES

BEHAVIORAL ACTIVITIES BRANCH

[Redacted]

1. This certifies that Daniel Flores - LA has completed five days of training in the course, [Redacted]

2. Primary goals of the course are to familiarize Agency case officers with [Redacted]

[Redacted]

3. This is a certificate of attendance only. Student achievement was not evaluated.



OTS/Training Branch

E2 IMPDET CL BY 019432

CONFIDENTIAL

S-E-C-R-E-T

TRAINING REPORT/CERTIFICATION OF HANDGUN QUALIFICATION

TITLE: Countering Terrorist Tactics Course No. 16-77 DATES: 19-23 September 1977

STUDENT: FLORES, Daniel OFFICE: IA SD: D

PURPOSE AND SCOPE OF COURSE:

(S) This course stressed countermeasures to thwart terrorist acts against U.S. personnel abroad.

PERFORMANCE RECORD:

(U/ALUO) This is to certify that the student has satisfactorily completed the prescribed course of instruction.

HANDGUN QUALIFICATION:

(C) Student completed 24 hours of instruction on handguns at the [] on 23 September 1977; subsequently fired the handgun Qualification test achieving a score of:

Revolver (Cal. - .38)	<u>289</u>
Automatic (Cal. - 9mm)	<u>255</u>
_____	_____

out of a possible 300.

(U/ALUO) The student demonstrated satisfactory application of safety procedures; mechanical aptitude; marksmanship techniques; and maintenance during range firing/classroom sessions; and is qualified to use the handguns (or similar guns) listed above.

FOR THE DIRECTOR OF TRAINING:

[]
Chief, Special Activities Branch/OTD
[]

9/26/77
Date

S-E-C-R-E-T

E2 IMPDET
CL by 056382

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-5	NAME		
	LAST (Print)	FIRST	MIDDLE
5-16-134	Price	Ronald	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATED BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
25-26	27-29	29-30	31-32	33-34	35-35	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
2	0	16	1	0	16	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2				120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. BPC 24-1-77	DOCUMENT DATE/PERIOD 1. 26, 26 25 30 Sept, 77
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REMARKS

PREPARED BY [Signature]	REPORT APPROVED BY CONTROL DIVISION	DATE 10/6	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
SIGNATURE [Signature]			

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE
Internal Use Only**

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 156150	(Print) Hess	7-28 Dunst	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	28-99		
28-28	27-28	28-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 8 - CANCELLATION	37	28-99		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		ARTICLE	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	28-99		
28-28	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	28-99	W11	40-42
9	11	77	01	23	77		2			11

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 41-10-77 DOCUMENT DATE/PERIOD 1 Dec 76 to 30 Sept 77

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCM	DATE <u>2/12/77</u>	SIGNATURE <u>[Signature]</u>
<input checked="" type="checkbox"/> C & L DIVISION, CTDD		
<input type="checkbox"/> C & P DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-0 036130	NAME		
	LAST <i>(Print)</i> FLORES	FIRST 7-24 DANIEL	MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (<i>Basic</i>) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE			
02	09	77	02	18	77	2 - TDY (<i>Basic</i>) 4 - CORRECTION 6 - CANCELLATION	37	38 39		40-42
							2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

per. Jaque 5467

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (<i>Specify</i>)	

DOCUMENT IDENTIFICATION NO. LA 10-77	DOCUMENT DATE/PERIOD 2/9 - 2/18/77
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REMARKS

PREPARED BY BCC <input checked="" type="checkbox"/> C & L DIVISION, CTDR. <input type="checkbox"/> C & T DIVISION	REPORT ANNOTATED ON CONTROL DOCUMENT DATE 3/25/77	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE Strike Mawanga
--	--	--

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

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Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST 2-24	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	37	38 39	40-42
						1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION		

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	37	38 39	40-42
02	22	77	02	25	77	2 4 - CORRECTION 6 - CANCELLATION	2	120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 2/22-2/25/77

REMARKS

PREPARED BY DCO C & L DIVISION, CYDR. C & T DIVISION	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 3/25/77	SIGNATURE <i>Walter Mawung</i>	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-8	NAME		
	LAST (Print)	FIRST	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (OPP ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 33, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38-39
								40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38-39
03	03	77	03	05	77	2		WESTERN HEMISPHERE 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE PERIOD 3/3-3/5/77

REMARKS

PREPARED BY 1-8	REPORT SUBMITTED BY CONTROL DOCUMENT	ADDITIONAL DATA CERTIFIED CORRECTLY BASED UPON SOURCE DOCUMENT LISTED
DATE 3/25/77	SIGNATURE Suzanne M. [unclear]	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HRB 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) Flores (First) Daniel (Middle)

1. MARITAL STATUS (Check one)

<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED	<input type="checkbox"/> ANNULLED
---------------------------------	---	------------------------------------	-----------------------------------	----------------------------------	-----------------------------------

IF MARRIED, PLACE OF MARRIAGE: Lima, Peru DATE OF MARRIAGE: 18 Nov 1960

IF DIVORCED, PLACE OF DIVORCE DECREE: DATE OF DECREE:

2. MEMBERS OF FAMILY

NAME OF SPOUSE	ADDRESS (No. Street, City, State, Zip Code)	TELEPHONE NO.
	Vienna, Va. 22180	573-0797
NAMES OF CHILDREN	ADDRESS (Same as above)	SEX DATE OF BIRTH
		F
NAME OF FATHER (or male guardian)	ADDRESS	TELEPHONE NO.
NAME OF MOTHER, INCLUDING MACHIN NAME (or female guardian)	ADDRESS	TELEPHONE NO.

WHAT MEMBERS OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.

Mr. [redacted] - Brother-in-law

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 5% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HRB 22-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

Name (Mr, Mrs, Miss) Mr. Vincente Patlan Relationship Brother-in-law

Home address (No. Street, City, State, Zip Code) and name of employer, if applicable 627 South River St., Seguin, Tex. 78155 Home telephone number 512-379-1087

Business address (No. Street, City, State, Zip Code) and name of employer, if applicable Seguin School District System

Is the above listed name above address of your present professional affiliation? Yes No

Is the above listed name above address of your present residential address? Yes No

Is the above listed name above address of your present mailing address? Yes No

Is the above listed name above address of your present residential address? Yes No

The person named in item 4 above has also to be notified in case of emergency. If your notification is not to be made, please check the box below. Please do not check this box if the person is to be notified.

CONFIDENTIAL

CONFIDENTIAL
(When Filled In)

5. VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? YES NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? YES NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. (If "Yes" where is document located?)

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? YES NO. (If "Yes" give name(s) and address)

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes", who possess the power of attorney?)

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY
(No Approval Required)

RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN NR 22-2 (Full Address)
--	---

8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See NR 22-2)
(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)

FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (When Applicable) (See NR 22-2)	DATE
SIGNED BY	DATE	SIGNATURE

[Handwritten signature and date]

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY *[Signature]*

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

NAME

LAST

FIRST

MIDDLE

036130

^{Princ}FLORES

²⁴DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Only one) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO GFI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		5928	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		5928	38 39		
04	26	76	05	08	76	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2	38 39	WESTERN Hem	40-42 8 6 1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *870-7-76* DOCUMENT DATE (PERIOD) *April 26 - May 8 76*

REMARKS

PREPARED BY: *[Signature]* REPORT SUBMITTED ON: *6-8-76* ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT FILED: *[Signature]*

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ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY**

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO 036130 **NAME** FLORES DANIEL

LAST (Print) FIRST MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	ONLY		
28-28	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	ONLY		
06	15	76	06	20	76	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	WESTERN HEMISPHERE	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 07-76 **DOCUMENT DATE/PERIOD** 6-14-76

REMARKS

PREPARED BY **REPORT APPROVED BY** **DATE** 9-20-76 **SIGNATURE** C. Washet

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Instructor Training Workshop

Student: Flores, Daniel Office: OTR
Year of Birth: 1935 SD: D
Grade: GS-12 EOD Date: 1962
Number of Students Enrolled: 6 Date of Course: 7/26 - 8/8/76

COURSE OBJECTIVES--CONTENT AND METHODS

The Workshop objectives provide participants with a knowledge of the major principles, methods, and practices of effective instruction, and an opportunity to develop skills as an instructor by applying this knowledge in an instructional setting. Participants are able to analyze their audience and teaching objectives, prepare lesson plans, effectively present the material to be learned, and then evaluate the results of their training efforts.

The instruction required maximum student involvement with major emphasis on the application of instructional methods in the students presentation of units of instruction. Students were not graded during the Workshop, but they were constructively evaluated by the instructor and fellow participants both verbally and through the use of video tape.

Students were required to give a fifteen-minute lecture, a twenty-minute demonstration, and a fifty-minute lesson in his basic subject.

ACHIEVEMENT RECORD

This is a certificate of attendance only, since examinations are not used in the course.

FOR THE DIRECTOR OF TRAINING

11/10/76 *Stanley W. Specker*
LATE STANLEY W. SPECKER
Chief Instructor

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C-O-N-F-I-D-E-N-T-I-A-L

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ADMINISTRATIVE
Internal Use Only

0.361.30
3/2 135/4534

REPORT OF SERVICE ABROAD												
TO: Office of Personnel, Control Division, Statistical Reporting												
SERIAL NO.			LAST			FIRST			NAME			
1-6 0.361.30			(Print) Flancs			7-26 Amice						
INSTRUCTIONS												
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 98, REVISED.												
PCS DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38	39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION					40-42	
						3 - CANCELLATION						
TDY DATES OF SERVICE												
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	37	38	39	CODE	
07	16	75	07	19	75	4 - CORRECTION					40-42	
						5 - CANCELLATION						
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA												
SOURCE DOCUMENT AND CERTIFICATION												
<input checked="" type="checkbox"/> TRAVEL VOUCHER						DISPATCH						
CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT						
OTHER (Specify)												
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD						
REMARKS												
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT			ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED						
D & S DIVISION, CTDR.			DATE			SIGNATURE						
1 & 2 DIVISION			11/1/75			R. Henry						
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER												

FILE
PUNCHED
BY

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

**FILE
PUNCHED
BY:**

SERIAL NO. 1-5	NAME	
	LAST (Print)	FIRST 7-24
036130	FLORES	DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Use only) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 38, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				37	38 39
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				37	38 39
07	25	75	07	29	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		LATIN AMERICAN	825

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCB	DATE	SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION, CTDD.	12/1/75	[Signature]
<input type="checkbox"/> C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel Control Division, Statistical Reporting Branch

FILE PUNCHED BY
FLORES

SERIAL NO.

NAME

036130

LAST (initial)
FLORES

FIRST

7-24 DANIEL

MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
1	20	87	5	12	13	75	2			WH AREA	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.
LA-07-76

DOCUMENT DATE/PERIOD
DEC 3-13-75

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO	DATE	SIGNATURE
A & L DIVISION, CTRD.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting

FILE
PUNCHED
BY

SERIAL NO. 036130
NAME: LAST FLORES, FIRST DANIEL, MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
10	15	75	10	22	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	WESTERN HEM.	40-42
							2		811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify):	

DOCUMENT IDENTIFICATION NO. LA-145-76
DOCUMENT DATE/PERIOD 10/15-22/75

REMARKS

PREPARED BY: [Signature]
DATE: [Signature]
REPORT ANNOTATED FOR CONTROL DOCUMENT? [Signature]
ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED [Signature]

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 036130	(Print) FLORES	7-24 DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		CODE	38 39		
10	30	75	11	04	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	WM BRET	40-42 811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 166-76	DOCUMENT DATE/PERIOD OCT 30 - NOV 4-75
--	---

PREPARED BY	REPORT SUBMITTED ON	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT #1210
	DATE	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

SIE

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Report

FILE
PUNCHED
BY
MICHAEL

SERIAL NO.	NAME
1-6	LAST FIRST
036130	ELKINS JAMES

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 55, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	D/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
08	16	75	09	02	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	LATIN AMERICAN S.O.S	40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS

PREPARED BY	REPORT APPROVED BY	DATE	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

S/E

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical **FILE** Branch

FILE
PUNCHED
NAME BY MIDDLE

SERIAL NO.

036130

LAST

(Print)

Flores

FIRST

7-26

Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 38, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE
06	05	75	06	11	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2			Europe 801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY

CD
C & P DIVISION, CDR.
C & P DIVISION

REPORT SUBMITTED BY
GLOBAL REGISTRY

DATE

5/8/75
11/11/75

ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

SIGNATURE

[Signature]

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

FORM 1451a PREVIOUS EDITIONS OBSOLETE

SECRET

18-101

SECRET

OFF

18 NOV 1975

MEMORANDUM FOR THE RECORD

SUBJECT: Meritorious Unit Citation -- Cuban Operations Group,
Latin America Division

On 13 November 1975 the Director of Central Intelligence approved award of the Meritorious Unit Citation to the Cuban Operations Group in recognition of the outstanding performance of the following employees from 1 October 1974 to 30 September 1975:

Felipe Acevedo
Carol A. Barr
Vivian A. Barry

[REDACTED]
Thomas G. Clines

[REDACTED]
Mary D. Felton
Daniel Flores

[REDACTED]
Ann Goldsworthy
Clyde I. Hinkley
Christine Hopkins

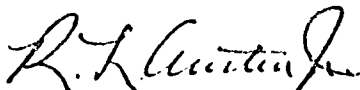
[REDACTED]
Myron M. Kline

[REDACTED]
Mary Musgrave

[REDACTED]
Nestor D. Sanchez

[REDACTED]
Len Therry

[REDACTED]
Donald Venute
William Watkins



R. L. Austin, Jr.
Recorder

Honor and Merit Awards Board

Distribution:

- 1 - Each OFF
- 1 - C/LA
- 1 - Recorder/HMAB
- 1 - Exec Sec/HMAB

SECRET

E2 Impdet CI By 014029

ADMINISTRATIVE
Internal Use Only

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY *BY/6*

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. 1-5	NAME		
	LAST	FIRST	MIDDLE
<i>36130</i>	<i>FLORES</i>	<i>DANIEL</i>	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (*One only*). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
07	09	75	07	14	75	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	<i>WH</i>	<i>811</i>

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED AS CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITES
<i>B. B. BISHOP</i>	DATE <i>7/15/75</i>	SIGNATURE <i>B. B. Bishop</i>

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

FILE
POSTED
BY/W

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. - NAME
LAST FIRST MIDDLE

036130 Flores Daniel

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	G/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42
			03	05	74		1		570

TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	G/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TOY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 135131 DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY: [] REPORT APPROVED BY: [] ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED

DATE: 3/28/74 SIGNATURE: [Signature]

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY [initials]

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO. 1-8	NAME	
	LAST (PRINT)	FIRST 1-24
026130	FLORES	DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only) REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
10	05	74	10	07	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2		Europe	801

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. WH 119-75 DOCUMENT DATE/PERIOD 10/4-10/2/74

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	12/23/74	SIGNATURE <u>Daniel L. Harner</u>

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
INDEXED
BY *AR*

TO: Office of Personnel, Transactions and Records Branch, State Department

SERIAL NO. 1-6	NAME		
	LAST (Print)	FIRST	MIDDLE
020 20	FLORES	JOSE	ALBERT

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION					

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR			37	38		
07	07	74	07	11	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	2			USFI	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
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REMARKS

PREPARED BY	REPORT ANNOTATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
SEC	DATE <i>8/1/74</i>	SIGNATURE <i>[Signature]</i>
C & A DIVISION, CTRD.		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY *[initials]*

TO: Office of Personnel, Control Division, Statistical Reporting

SERIAL NO. 1-6	NAME		
	LAST	FIRST	MIDDLE
036130	(Print) FLORES	(Print) DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39	40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	40-42
06	13	74	06	21	74		2	WA P/1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. *WA 542-74* DOCUMENT DATE/PERIOD *6/13-6/21/74*

REMARKS

PREPARED BY: *[Signature]* DATE: *9 May 74* SIGNATURE: *[Signature]*

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

FILE
PUNCHED
BY *[Signature]*

SERIAL NO.

NAME

1-6
036130

LAST

FIRST

(Print)

FLCRES

3-24

DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
08	12	74	08	16	74	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	LA AREA	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
Other (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE PERIOD

12-17 June 74

WITNESSES

PREPARED BY: *[Signature]*
 CHECKED BY: *[Signature]*
 APPROVED BY: *[Signature]*

THIS REPORT SHALL BE FILED IN THE OFFICE OF PERSONNEL
 IN THE INSTITUTION'S OFFICIAL PERSONNEL FILES

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY				
1. NAME OF EMPLOYEE (use pseudo only if SA) Daniel Flores		2. DATE (from item 3-1) 27 Feb 73	3. NAME OF SUPERVISOR (true) Richard Welch	
4. DATE RECEIVED AT HEADQUARTERS: 2 March 1973		5. DISPATCH NUMBER: HPLT-6502	6. DATE RECEIVED BY CARRIER SERVICE: 27 Feb 73	
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH 4 Aug 1935	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE GS-11 FI Case Officer		4. STATION OR BASE <input type="text"/>
5. CRYPT FOR CURRENT COVER LNFALL	6A. DATE OF PCS ARRIVAL IN FIELD 24 Sept 1971	6B. REQUESTED DATE OF DEPARTURE 30 Nov 1974	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ 1 Feb 1975	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE 15 Feb 1975 (depending on training.)
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU: Wife: 37, daughter: 3				
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)				
September 1971 - July 1972 - Activities of the <input type="text"/> and <input type="text"/> Preparation of project outlines and progress reports.				
August 1972 - Present - <input type="text"/> Operations. <input type="text"/> capability. Preparation of project outlines and progress reports.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS In the near future I would like to take an advanced operations course. In connection with this, I would like to concentrate on the <input type="text"/> and <input type="text"/> targets in Latin America. Special courses in these two areas would be extremely helpful. Some time in the future I would like to attend the mid-career course.				

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.	
At this point in my career the [] and [] targets are of major interest to me. Although I would prefer to work on [] operations in my next assignment, as an alternative I would consider working on [] operations.	
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.	
<input checked="" type="checkbox"/>	EXTEND TOUR <u>14</u> MONTHS AT CURRENT STATION TO <u>31 November 1974</u> (date)
<input type="checkbox"/>	BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE. 1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____
<input checked="" type="checkbox"/>	BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION 1ST CHOICE <u>Caracas</u> 2ND CHOICE <u>Mexico</u> 3RD CHOICE []
<input type="checkbox"/>	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:	
Concur. This officer is doing a good job on his assigned targets and his overall abilities give the Station a flexibility it often needs to call on.	
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.	
Subject's tour has been extended fourteen months to 31 November 1974.	
DATE <u>4/23/73</u> TITLE <u>C/MI/Pers</u> SIGNATURE <u>H. L. Beythold</u>	
FOR USE BY CABLE SERVICE	
14. APPROVED ASSIGNMENT:	
15. EMPLOYEE NOTIFIED BY DISPATCH NO. <u>HPIS-3284</u> DATE (typed) <u>23 Apr 73</u>	
CABLE NO. _____	DATE: _____
CABLE SERVICE REPRESENTATIVE: _____	DATE: _____

SECRET

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(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED
BY

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. 1-6 036130	NAME		
	LAST (Print) FLORES	FIRST 7-24 DANIEL	MIDDLE

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		1988	38 39		
			05	28	71	1 - PCS (Basic)	1		EQUADOR	195
						3 - CORRECTION				40-42
						8 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY		AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR		1988	38 39		
						2 - TDY (Basic)				40-42
						4 - CORRECTION				
						8 - CANCELLATION				

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OF TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 16318	DOCUMENT DATE/PERIOD 28 May 1971
--------------------------------------	-------------------------------------

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT SUBMITTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE 6/9/71	SIGNATURE <i>[Signature]</i>	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

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(When filled in)

SERVICE ABROAD AGREEMENT

I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTINGENT UPON AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE

Daniel Flores

50

D

II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

Currently Guayaquil, Ecuador and Next Assignment: Lima Peru

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS

X

C. NONSTANDARD TOUR OF DUTY OF _____ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYER SIGNING THIS AGREEMENT. (See HR 20-18)

REQUESTED (Memo attached)

OPERATING OFFICIAL

CONCUR

CAREER SERVICE

DEPUTY DIRECTOR

APPROVED

DIRECTOR OF PERSONNEL

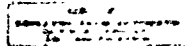
OPERATING OFFICIAL

Jan Huey, HC/44/Per

III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. ITS DESIGNATION WILL BE KEPT IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE REVERSE SIDE, YOU WILL (SEE BYRON 22-3) NORMALLY INDICATE THE PLACE WHERE YOU PHYSICALLY DWELLED IN THE UNITED STATES, ITS POSSESSIONS OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PMS TRANSFER TO A POST ABROAD. YOU MAY REQUEST IN ITEM 6 THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU CAN ESTABLISH THAT YOUR PHYSICAL DWELLING PLACE IS (OR WAS) TRANSIENT AND THAT SUCH OTHER PLACE IS YOUR DOMICILE OR HAS PREVIOUSLY BEEN USED BY YOU AS A PHYSICAL DWELLING. INFORMATION THAT CAN BE PRESENTED IN AN ATTACHED STATEMENT AS EVIDENCE INCLUDES BUT IS NOT LIMITED TO, STATE VOTING REGISTRATION, PROPERTY OWNERSHIP AND PLACE WHERE INCOME OR PERSONAL PROPERTY TAXES HAVE BEEN PAID.



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3. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof) FULL ADDRESS: Washington, D. C.		6. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 3) FULL ADDRESS:	
APPROVED		CONCUR	
DEPUTY DIRECTOR		DATE	
<i>for</i> <i>A. Busby</i>		APPROVED	
		DATE	
5-20-71		DIRECTOR OF PERSONNEL	
DATE		DATE	
IV. HOME LEAVE POINT			
7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.			
8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HR 20-30B(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.			
9. DESIGNATION PER ITEM 7 ABOVE FULL ADDRESS: Milwaukie, Oregon		10. DESIGNATION PER ITEM 8 ABOVE. FULL ADDRESS:	
RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT Parents-in-law		CONCUR	
DEPUTY DIRECTOR		DATE	
<i>for</i> <i>A. Busby</i>		APPROVED	
		DATE	
5-20-71		DIRECTOR OF PERSONNEL	
DATE		DATE	
EMPLOYEE CERTIFICATION			
I have read and understand my service obligations and travel entitlements as described in this agreement.			
SIGNATURE OF EMPLOYEE See Dispatch Attached <i>Paul Ober</i>		DATE 5/20/71	

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RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HMD 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL--DO NOT SEND TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYEE (Last) FLORES (First) Daniel (Middle) SOCIAL SECURITY NUMBER

1. MARITAL STATUS (check one) SINGLE [] MARRIED [X] SEPARATED [] DIVORCED [] WIDOWED [] ANNULLED []

IF MARRIED, PLACE OF MARRIAGE Lima, Peru DATE OF MARRIAGE 18 November 1960

IF DIVORCED, PLACE OF DIVORCE DECREE NONE DATE OF DECREE

MEMBERS OF FAMILY

2. NAME OF SPOUSE ADDRESS (No., Street, City, State, Zip Code) TELEPHONE NO.

NAMES OF CHILDREN ADDRESS (Same as above.) SEX F DATE OF BIRTH

NAME OF FATHER (or male guardian) ADDRESS TELEPHONE NO. Jose S. Flores Box 39, Gonzales, Texas 78629 512-672-6061

NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian) ADDRESS TELEPHONE NO. Agustina Flores (Deceased)

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY. Mr.

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 5% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 22-15). SPECIFY NAMES AND RELATIONSHIPS.

NAME DATE OF BIRTH RELATIONSHIP

PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., Miss) (Last-First-Middle) RELATIONSHIP Mr. Brother-in-law

HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE HOME TELEPHONE NUMBER Seguin, Texas 78155 512-379-7620

BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE BUSINESS TELEPHONE & EXTENSION

IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.) YES [] NO [X]

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.) YES [] NO [X]

DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in item 6.) YES [] NO [X]

The persons named in item 2 or 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.

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5. VOLUNTARY EMERGENCIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

The Riggs National Bank, Federal Office, 1750 Pennsylvania Avenue,
N.W., Washington D.C.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? YES NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? YES NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. (If "Yes" where is document located?)

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? YES NO. (If "Yes" give name(s) and address)

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes", who possess the power of attorney?)

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY
(No Approval Required)

RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)
--	---

8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3)
(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)

FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE

SIGNED AT <i>Headquarters</i>	DATE <i>7 June 1951</i>	SIGNATURE <i>Clair D. ...</i>
----------------------------------	----------------------------	----------------------------------

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FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use pseudo only if SA)		DATE (from item 5-D)	NAME OF SUPERVISOR (if any)	DATE (from item 5-2)
Daniel Flores			Robert Fambrini	
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
30 October 1970		HEQT 1506	04 MAR 1971	
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. LEAVE FOR CURRENT COVER
4 August 1935		Operational Officer GS-10	Guayaquil	ENCUFF
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	
13 May 1969	15 May 1971	1 June 1971	1 August 1971	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Spouse (Expecting child in March 1971)				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
NA				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 240-8)				
Case Officer responsibilities including running project targetted against [redacted] agent handling including [redacted] and related support agents; preparation of intelligence reports, dispatches and other reports related to Case Officer duties.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
1. Soviet Operations Course. (If possible, I would like to co-ordinate this course with my home leave in the summer of 1971.)				
2. Language training. Preferably [redacted] because I would like to serve in [redacted] sometime in the future.				

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.

I would like a position of increased responsibility, preferably as a Case Officer for Soviet Operations in Latin America. If this is possible I would like to take the Soviet Operations Course at Headquarters prior to my next assignment.

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 Caracas, Venez 2ND CHOICE Mexico 3RD CHOICE Lima, Peru
- 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:

It is believed that this officer's performance at his present post of assignment has provided sufficient indication of his competence as a field case officer, and that he should have no problem filling a Soviet Operations Officer slot at a medium sized field installation. He should attend the Soviet Operations Course prior to such assignment.

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.

WII Division has selected Mr. Flores for assignment to Lima in September 1971.

DATE 1 Mar 71 TITLE C/WII/PCRB SIGNATURE H. T. Barthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. 113900 DATED _____
TABLE NO. _____ DATED _____

LEADER SERVICE REPRESENTATIVE _____ DATE _____

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

**FILE
PUNCHED
BY RT**

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036135	Flores	Daniel	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	3/	36 39	Ecuador	40-42
05	13	69					1			175

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 5 - CANCELLATION	37	38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input checked="" type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 2K57300	DOCUMENT DATE/PERIOD 12 May 1967
--	-------------------------------------

REMARKS

PREPARED BY	REPORT SUBMITTED ON	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DATE	SIGNATURE	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET

Not Approved by
CS Career Service

JAR

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

SUBJECT : Recommendation for Promotion to Grade
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-09 to GS-10.

2. Mr. Flores joined the Agency in 1962; initially he was employed on a part-time basis in the MI Division while attending the American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the MI Division, he was selected for assignment as an operations officer at the [] Base where he arrived in May 1969. Mr. Flores is bi-lingual in Spanish.

3. Both as a Headquarters and field operations officer Mr. Flores has carried out his assignments with intelligence, enthusiasm and initiative. As the [] Base officer in charge of [] operations, his performance has been of high caliber. In August 1969, during the forced absence of the Chief of Base and other senior officers, Mr. Flores assumed the full responsibilities for running the base for a period of several weeks. He performed the duties of Acting Chief of Base in a superior manner. In addition to his operational competence, the [] Chief of Base has observed that Mr. Flores' ability to develop social relations with ease has been a distinct asset for the Base.

4. Mr. Flores has already proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level far higher than his current grade and a promotion at this time is strongly recommended.

William V. Broe
William V. Broe
Chief
Western Hemisphere Division

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(When filled in)

I M P O R T A N T

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

M E M O R A N D U M O F U N D E R S T A N D I N G

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.

Daniel Flores
Signature

DANIEL FLORES

7 April 1969
Date

CONFIDENTIAL

Group 1 - Excluded from
automatic downgrading
and declassification.

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(When Filled In)

Complete in original. 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. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) Flores (First) Daniel (Middle) _____ SOCIAL SECURITY NUMBER _____

1. RESIDENCE DATA

PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY Washington, D.C. LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) _____
 PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE Washington, D.C. HOME LEAVE RESIDENCE Washington, D.C.

2. MARITAL STATUS (Check one)

SINGLE MARRIED SEPARATED DIVORCED WIDOWED ANNULLED

IF MARRIED, PLACE OF MARRIAGE Lima, Peru DATE OF MARRIAGE 14/12/1960

IF DIVORCED, PLACE OF DIVORCE DECREE _____ DATE OF DECREE _____

IF WIDOWED, PLACE SPOUSE DIED _____ DATE SPOUSE DIED _____

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S) _____

3. MEMBERS OF FAMILY

ADDRESSES (No., Street, City, State, Zip Code)	TELEPHONE NO.
<u>Accompanying</u>	
NAMES OF CHILDREN	SEX DATE OF BIRTH

NAME OF YOUR FATHER (Or male guardian) José S. Flores ADDRESS Guazabato, Texas (Box 39) TELEPHONE NO. 512/672-6061

NAME OF YOUR MOTHER (Or female guardian) Deceased ADDRESS _____ TELEPHONE NO. _____

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY? _____

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr., Mrs., M) Mr. RELATIONSHIP Brother-in-law

HOME ADDRESS (No., Street, City, State, Zip Code) _____ HOME TELEPHONE NUMBER (512) FAX-7670

BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE (same as above) BUSINESS TELEPHONE & EXTENSION _____

IS THE INDIVIDUAL NAMED ABOVE FITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.) YES NO

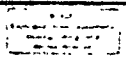
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person who has such authority in case of emergency.) YES NO

DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer to "No" explain why in item 6.) YES 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.

CONTINUED ON REVERSE SIDE

CURRENT RESIDENCE AND DEPENDENCY REPORT



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(When Filled In)

VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

Riggs National Bank : Daniel and [redacted] Flores
17th and Penn. Avenues, Washington, D.C.
(1750 Penn Avenue

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? YES NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? YES NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. (If "Yes" where is document located?)

At home. Will leave with responsible person for safe keeping

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? YES NO. (If "Yes" give name(s) and address)

N/A

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes", who possess the power of attorney?)

But may before I leave.

ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

My father should not be notified in case of an emergency because of his health and age.

SIGNED AT

DATE

7 April 1969

SIGNATURE

Daniel Flores

CONFIDENTIAL

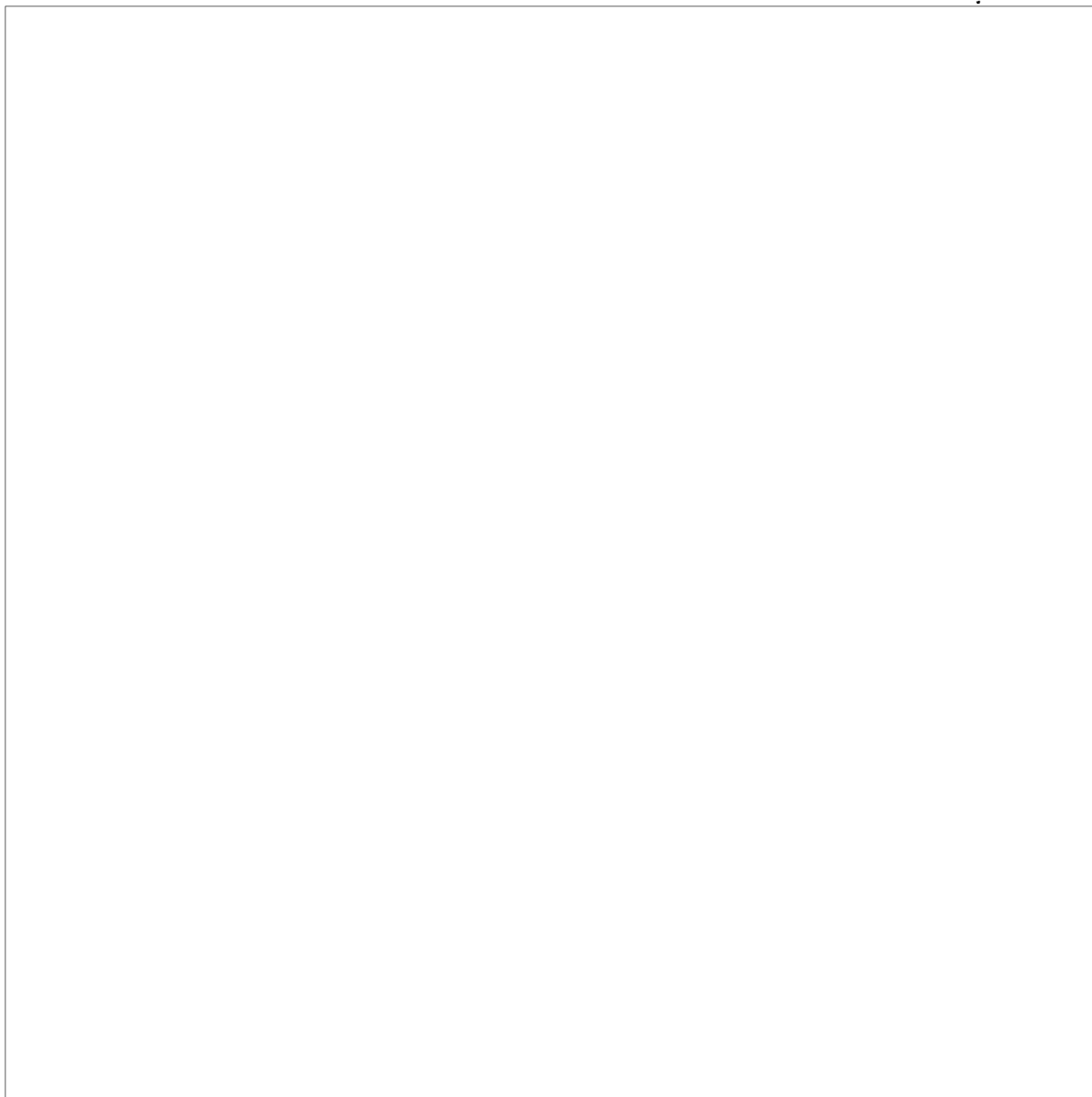
SECRET

TRR

Supplement to Staff Employee Personnel

Daniel Flores

Effective 10 April 1969



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UNITED STATES GOVERNMENT

BY *James C. Chapman*
Personnel Office

ACCEPTED:

David L. ...

3

FORM 1535c

SECRET

10 01

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) Flores (first) Daniel (middle) 036730 DATE OF BIRTH (month, day, year) 4 August 1935 SOCIAL SECURITY NUMBER []

EMPLOYING DEPARTMENT OR AGENCY [] LOCATION (City, State, ZIP Code) []

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 SLIP" THEN RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE

Signature: [Handwritten Signature]
Date: [Handwritten Date]

FOR EMPLOYING OFFICE USE ONLY

(Official recording date stamp)

Stamp: []

S-E-C-R-E-T

- TRAINING REPORT -

Operational Interrogation Course No. 2-69
(Full time - three weeks) 4 - 22 November 1968

Student: Flores, Daniel Office: WH
Grade : 08 EOD : Mar 62
Number of Students Enrolled: 9 Service Designation: D

COURSE OBJECTIVE

To teach the student to interrogate and to manage interrogation.

RATING

Class Performance : Satisfactory

Interrogation Aptitude: Average

GENERAL CLASS PERFORMANCE

Excellent: 3 Satisfactory: 6 Unsatisfactory: 0

GENERAL CLASS APTITUDE FOR INTERROGATION

High: 2 Average: 6 Low: 1

FOR THE DIRECTOR OF TRAINING:

27 DEC 1968

Date

Chief Instructor

S-E-C-R-E-T

C-E-C-R-E-T

TRAINING REPORT OPERATIONS COURSE (FULL TIME)	Course No.	No. of Students		Dates of Course	
	OC-1-3/4-68	Began	Finished	27 May -	16 August 1968
STUDENT IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	ECG DATE	OFFICE	GS	SD
FLORES, Daniel	1934	March 1967	CTP	GS	SD
PERFORMANCE EVALUATION					

- W - Weak Ranges from inadequate to less than satisfactory (in terms of a new and inexperienced case officer).
- A - Adequate Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.
- P - Proficient More than satisfactory. Has acquired a solid beginner's proficiency. This rating may be interpreted as representing "average" on our rating scale.
- S - Strong Exceptional proficiency, characterized by thoroughness, initiative, originality, and an exceptional student understanding of the case officer role in clandestine operations.
- O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of other students doing similar work as to warrant special recognition.

COURSE OBJECTIVE

This course is designed to prepare selected staff officers from the Career Trainee Program for field operations officer work with the Clandestine Services. The student's understanding of the Clandestine Services doctrines, policies and operational concepts and his ability to apply these related items is measured by a series of practical exercises. Successful completion of the Operations Familiarization Course (OFC) is a prerequisite for admission to the Operations Course.

RATING LETTER

TRADECRAFT	P
INTELLIGENCE AND OPERATIONAL INFORMATION REPORTING	P
CLANDESTINE SERVICES OPERATIONAL PROGRAMS	P

The trainee also received basic instruction and practical work in photography, including the use of a 35mm camera and in darkroom procedures; in [redacted] and in the use of [redacted]. In addition, he was given general familiarization on such subjects as [redacted] and authentication, observation and sketching.

This rating corresponds to the statement which most accurately reflects the student's level of performance and takes into account everything about him which influenced his effectiveness. This rating is a reflection of the degree to which the instructors feel that the student is both suitable and competent for overseas service in the Clandestine Services.

OVERALL PERFORMANCE
P

Overall performance ratings of all students in this class:

WEAK 0 ADEQUATE 0 PROFICIENT 40 STRONG 40 OUTSTANDING 20

S-E-C-R-E-T

NARRATIVE COMMENTS

Significant strengths and weaknesses and their relationship to overall performance in the Operations Course. This section amplifies and explains, as necessary, the rating letters given above.

Mr. Flores' overall performance in this course was at the high proficient level. He is a very friendly and personable individual who put forth a good deal of effort to do well in the course. Mr. Flores takes a very practical approach to solving problems and his attitude throughout the course was excellent.

Mr. Flores acquired a good understanding of the principles and techniques of Clandestine Services operations, and in problems requiring face-to-face encounters with simulated agents in the live exercises he came through as a very friendly and personable individual. He was particularly effective in debriefing situations and demonstrated flexibility in meeting the problems that arose during the simulated agent meetings.

Mr. Flores demonstrated a good understanding of Clandestine Services programs in Foreign Intelligence, Counterintelligence and Covert Action. His performance was graded strong in handling of a simulated walk-in defector, and in a Counterintelligence case study and a Covert Action case study his understanding and analyses were judged highly proficient. He received a rating of adequate in photography.

Mr. Flores has good writing skills and acquired a thorough understanding of intelligence and operational reporting procedures and formats of the Clandestine Services. His intelligence reports were consistently complete, accurate and clear. His operational reports suffered occasionally from weak organization, and on one occasion he had difficulty distinguishing operational from intelligence information; but his reports were generally complete and accurate and showed a sound understanding of operational reporting requirements.

Mr. Flores is a personable and intelligent individual who got along very well with his colleagues and with the instructors. With his excellent attitude and strong desire for a career in the Clandestine Services together with his willingness to work hard, Mr. Flores should have little difficulty in developing into an effective case officer as he gets greater experience.

FOR THE DIRECTOR OF TRAINING:


Arthur P. Fritzel
Chief Instructor

23 August 1968
Date

S-E-C-R-E-T

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68
(416 hours, full-time)

4 March - 3 May 1968
(Date)

Student : FLORES, Daniel Office : CTP/OTR
Year of Birth: 1935 Service Designation: SJ
Grade : GS-07 No. of Students: 60 Began; 60 Finished
EOD : March 1962

COURSE OBJECTIVES:

The course is designed to prepare junior clandestine services officers for duties related to the conduct of Special Operations. Upon completion of training, the officer will be capable of developing and implementing actions which will contribute to the elimination of subversive insurgency in the underdeveloped area of the world in furtherance of U.S. policy. He shall also be capable of developing plans for the conduct of Special Operations in support of United States military operations in wartime; and will be able to plan for the use of special ground, air, and maritime operations in direct support of other intelligence activities.

ACHIEVEMENT RECORD:

The performance rating and narrative comments below are derived from a synthesis of all observations and evaluations submitted on each trainee by the instructor staff. Student rating is indicated by the asterisk.

INCOMPLETE 0 ADEQUATE 0 PROFICIENT * 48 STRONG 12

NARRATIVE COMMENTS:

Mr. Flores is a self-sufficient, steady worker, who demonstrated an excellent ability to adapt himself to the various training situations. His proficient performance during Operations Course, Phase II-3-68 did not fluctuate appreciably from beginning to end.

Mr. Flores was always mentally alert, receptive to instruction and responsive to instructional exercises. He cheerfully accepted all responsibilities, consistently produced satisfactory results, and appeared to demonstrate a sense of pride in his accomplishments. His conscientious effort, sincerity, and cooperative attitude enabled him to develop a sound working relationship with his colleagues.

Continued on Page 2

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68
(416 hours, full-time)

4 March - 3 May 1968

Student : FLORES, Daniel

Office : CTP/OTR

Service Designation: SJ

NARRATIVE COMMENTS (Continued)

Of noteworthy mention was Mr. Flores' pleasant, industrious performance throughout the [] He established a cheerful environment for his colleagues and completed assigned responsibilities with enthusiasm, determination and cooperation. His sustained high-level performance and ability to adapt to the terrain earned him the respect and appreciation of his classmates.

The degree of performance attained in the course indicates Mr. Flores has gained a sound familiarization of the Special Operations activities, responsibilities, skills, and concepts.

FOR THE DIRECTOR OF TRAINING:


Chief Instructor, Operations Course, Phase II

2

S-E-C-R-E-T

S E C R E T

TRAINING REPORT

NAME OF TRAINEE: Flores, Daniel	COURSE: CS RECORDS I & CS RECORDS II (Biographic Research)
DOB: 1935 3D: SJ	DATE : 9 - 16 May 1968
OFFICE: CTP GS: 07	HOURS : 30 - part time

OBJECTIVES

1. To provide briefing in the CS requirement for biographic research, the importance of this research in the investigative process, and in the importance of the role of the biographic researcher.
2. To provide instruction in the nature, content and means of access to repositories of biographic information in the CS and other elements of the Agency and the community.
3. To introduce the concept of research and investigation and the processes involved therein, and to provide practical work in research as done at headquarters.
4. To alert the students to the nature of analysis in producing finished reports of biographic research.
5. To provide practice in writing the report of biographic research.

METHOD OF INSTRUCTION

The course is presented by means of lecture, discussion and demonstration. More than fifty percent of the class time is devoted to an exercise in biographic research, an exercise in analysis of the materials recovered, and preparation of a report of the research.

ADJECTIVAL RATINGS USED IN THE TRAINING REPORT

- | | |
|-----------------------|--|
| EXCELLENT | Student demonstrated unusual competence in achieving the course objectives. His understanding of the course content was unusually thorough and perceptive. Where skills were taught, he demonstrated particular facility in their use. |
| SATISFACTORY | Student's achievement of the course objectives was competent. He demonstrated good understanding of the course content. Where skills were taught, he demonstrated basic facility in their use. |
| UNSATISFACTORY | Student did not demonstrate adequate competence. Although he may have made some progress, he fell short of the minimum standards for achievement of the course objectives. |

S E C R E T

S E C R E T

NARRATIVE RATING OF ACHIEVEMENT:

Mr. Flores showed considerable ability and experience in his handling of the practical problem. He should have no trouble in doing work of this kind with a minimum of supervision.

Overall adjectival rating of achievement:

Satisfactory ✓

Overall adjectival ratings of achievement of all employees in the course:

EXCELLENT: 2 SATISFACTORY: 14 UNSATISFACTORY:

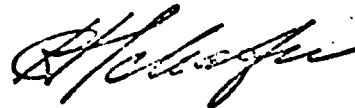
Attendance at this course does not provide the student with operational knowledge and background sufficient to qualify him as an independent researcher, capable of making operational judgments.

NOTE: CS Records I (Introduction to Records) is a prerequisite for this course.

FOR THE DIRECTOR OF TRAINING:

24 MAY 1968

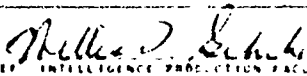
Date



Charles H. Schafer
Chief Instructor

SECRET

(When Filled In)

TRAINING REPORT INTELLIGENCE TECHNIQUES COURSE (120 Hours)		COURSE NO.	NO. STUDENTS	DATE OF COURSE	
		3-68	46	29 Jan - 13 Feb 1968	
IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	FOB DATE	OFFICE	CS	SD
FLORES, Daniel	35	Mar 1962	CTP	07	SJ
KEY TO RATINGS					
W - Weak	Ranges from inadequate to less than satisfactory.				
A - Adequate	Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.				
P - Proficient	More than satisfactory. Has acquired a solid beginner's proficiency.				
S - Strong	Exceptional proficiency. Characterized by thoroughness, initiative, originality, and an exceptional student understanding of the work involved in intelligence production.				
O - Outstanding	Performance is so exceptional in relation to requirements and in comparison to the performance of others doing similar work as to warrant special recognition.				
EVALUATION OF PERFORMANCE IN SKILLS					
BRIEFING	RATING	WRITING	RATING	ANALYSIS	RATING
	P		A+		P
OVER-ALL PERFORMANCE EVALUATION					RATING
The RATING LETTER reflects the over-all performance of the student in the course and is thus a measure of the extent to which the student possesses the skills and techniques required in the production of finished intelligence. The rating is not necessarily arrived at by mathematically averaging in the skills ratings, but takes into consideration any outstanding strengths or weaknesses that should be reflected in an evaluation of the performance of the student as a whole. The RATING LETTER is a consensus of the view of the faculty.					P-
REPORT OF OBSERVATIONS, JUDGMENTS AND IMPRESSIONS					
This is a general, unspecific, narrative report of observations, judgments, and impressions. It includes intangible factors such as the student's attitude, cooperativeness, attentiveness, maturity, and judgment. It also includes the general impression the student has made on the faculty. This report will not be included unless the instructors believe that it would add something to the previous evaluation of performance in skills as well as to the evaluation of the OVER-ALL PERFORMANCE of the student.					
FOR THE DIRECTOR OF TRAINING:			 MILLER J. SCHICK CHIEF, INTELLIGENCE PRODUCTION FACULTY INTELLIGENCE SCHOOL		DATE

S-E-C-R-E-T

PERFORMANCE RECORD

The Challenge of World-Wide Communism

CT Class 2000 - 1000

Course Description

A. Statement of Objectives

1. The student should recognize the challenge confronting the United States and the free world posed by the objectives, activities, and capabilities of World-Wide Communism.
2. The student should achieve a knowledge of the doctrine, organization and tactics of free-world Communist parties; and, similarly, of the capabilities, the policies, and the problems of the USSR and the People's Republic of China.

B. Course Method

1. Approximately one-half of the course is devoted to lectures, one-fourth to seminars, exercises and demonstrations, and one-fourth to individual study.
2. Student achievement is judged on the basis of performance in one written examination and participation in seminars and exercises.

NAME Flower, David

Written Work

Examination By Student

Oral Work

Seminars, Exercises By Student

Comment:

GROUP I
Excluded from automatic
downgrading and
declassification

S-E-C-R-E-T

TRAINING REPORT

OPERATIONS FAMILIARIZATION COURSE NO. 2-68
(192 hours, full-time)

2 Jan. - 26 Jan. 1968
(Date)

STUDENT : FLORES, Daniel

OFFICE : CIP

YEAR OF BIRTH: 1935

SERVICE DESIGNATION: SJ

GRADE : GS-07

NUMBER OF STUDENTS : 114 Begun

END DATE : March 1962

114 Finished

COURSE OBJECTIVE AND CONTENT

The Operations Familiarization Course is a four-week course designed to provide the student with an understanding of the Clandestine Services programs, operational methods and reporting techniques. Special emphasis is given the basic elements of

METHODS

The instructional methods used included class discussions, lectures, films demonstrations, practical exercises and case studies. Practical exercises were

The operational programs of various Clandestine Services Divisions were discussed by representatives of the respective Headquarters components.

EVALUATION OF PERFORMANCE

The student's rating is based on understanding of the material presented as demonstrated by his participation in class discussions, the preparation of intelligence and operational reports, the application of operational principles in the practical exercises and the grade received on a comprehensive written examination given in the final week of the course which covered all areas of course content. Other factors considered in determining the final rating were the student's interest, attitude and preparation for assignments. The number of students receiving each adjectival rating on overall course performance is shown below. This student's rating is indicated by an asterisk. Explanatory narrative comments are included with a rating of ADEQUATE or STRONG. When considered pertinent by the training staff, comments may also be included with a PROFICIENT (average) rating.

<u>UNSATISFACTORY</u>	<u>ADEQUATE</u>	* <u>PROFICIENT</u>	<u>STRONG</u>
1	1	87	25

✓ Mr. Flores' overall performance in the course was at the solid proficient level. It should be noted that he demonstrated a particularly good attitude throughout the course. He took full advantage of the training offered to increase his knowledge of the Clandestine Services.

FOR THE DIRECTOR OF TRAINING

[Signature]
ACKNOWLEDGED
JAN 28 1968
J-S-C-S-8-1

9 Feb. 1968
JTS

S-E-C-R-E-T

ORIENTATION TO INTELLIGENCE FOR CT'S
(Class of December 1967)

STUDENT	: Daniel FLORES	Duration:	11-22 December 1967 (30 hours, full time)
YEAR OF BIRTH:	1935	OFFICE	: CT
GRADE	: GS-07	SERVICE DESIGNATION:	SJ
EOD	: March 1962	NUMBER OF STUDENTS	: 88

COURSE OBJECTIVES - CONTENT AND METHODS

In the Orientation to Intelligence Course the objectives are: (1) to instruct the student in the basic concepts and terminology of intelligence; (2) to describe the history of U.S. intelligence and the current role of intelligence in the national security structure; (3) to outline the composition and mission of the intelligence community, noting the Agency's significant role therein; (4) to define the mission of CIA in supporting the DCI and to identify the functions of the Agency's major components, particularly in the collection, production, and dissemination of intelligence; and (5) to identify and discuss major problems facing the Agency. The area surveys and "Articulating the United States" elements of the course are designed to introduce the students briefly to some of the intelligence problems presented by major regions of the free world and to stimulate thought about the American way of life and its relationship to these areas.

Instructional techniques include lectures given by members of the Orientation and Briefing Faculty, guest speakers from Agency components, seminars, directed reading, review exercises, training films, and intelligence exhibits.

ACHIEVEMENT RECORD

The individual student evaluation is based on his score achieved on a written examination given at the conclusion of the course. This test, consisting of 100 items, covered all major aspects of the course content. The rating assigned to this student is:

PROFICIENT

The evaluation system used was as follows:

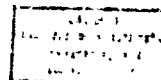
O = Outstanding	-	0-3 wrong
S = Strong	-	4-8 wrong
P = Proficient	-	9-15 wrong
A = Adequate	-	16-25 wrong
W = Weak	-	26- wrong

FOR THE DIRECTOR OF TRAINING:

Lawrence C. Beag, Jr.
Chief, Orientation & Briefing Faculty

8 January 1968
Date

S-E-C-R-E-T



CONFIDENTIAL

26 October 1967

MEMORANDUM FOR: Daniel Flores

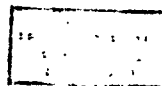
THROUGH : Executive Secretary
CSCT Selection Board

SUBJECT : Application for Career Training Program

1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.
2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.
3. Should you have any further questions, do not hesitate to call on the Program Officers.


ROBERT B. FREEMAN
Chief, CTP

CONFIDENTIAL



SECRET

(When Filled In)

MILITARY STATUS QUESTIONNAIRE (READ INSTRUCTIONS ON REVERSE SIDE)				DO NOT WRITE IN SPACES BELOW			
1. THIS DATE (Month-day-year) March 12, 1962				1-6. SERIAL NUMBER 606100			
2. NAME (Last-First-Middle) FACKES, DANIEL (VI)				7-24. NAME			
3. DATE OF BIRTH (Month-year) August 1935		4. SEX <input checked="" type="checkbox"/> (1) MALE <input type="checkbox"/> (2) FEMALE		25-28. UIC 6835		29. SER 1	
5. OFFICE TO WHICH ASSIGNED DDP/OPSER/RT		6. SCHEDULE AND GRADE GS-04		30-31. OFFICE CODE 39		32-34. SCND 35-39. GR. C-5 C-4	
7. SUBJECT TO CURRENT DRAFT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		8. INDICATE DRAFT CLASSIFICATION, IF ANY		37. DRAFT STATUS 2		38-39. CLASS.	
VETERANS COMPLETE THE FOLLOWING							
9. BRANCH OF SERVICE ON SEPARATION (Check one)				10. MIL. GRADE ON SEPARATION O-4 (E4)		40. BRANCH SERVICE 3	
<input type="checkbox"/> (1) ARMY		<input checked="" type="checkbox"/> (2) MARINE		<input type="checkbox"/> (3) COAST GUARD		<input type="checkbox"/> (4) NAVY	
				10A. YRS. MOT OF ACTIVE SERVICE 4 yrs.		41-42. MIL. GRADE E 4	
11. STATUS AT TIME OF SEPARATION (Check one)				43. STATUS AT SEPARATION 1			
<input checked="" type="checkbox"/> (1) REGULAR		<input type="checkbox"/> (2) RESERVE		<input type="checkbox"/> (3) DRAFTER		<input type="checkbox"/> (4) OTHER (Specify in Comments)	
12. TYPE OF SEPARATION (Check one)				44. TYPE OF SEPARATION (A-less than 8 yrs; B-8 yrs or more)			
PLEASE NOTE							
ALTHOUGH YOU MAY HAVE A SERVICE CONNECTED DISABILITY, DO NOT CHECK THE BOX "RETIRED-SERVICE CONNECTED DISABILITY" UNLESS YOU WERE ACTUALLY RETIRED FOR THIS REASON. IF OTHERWISE, CHECK "HONORABLE DISCHARGE" OR "RELEASED TO INACTIVE DUTY" AS APPROPRIATE, EVEN THOUGH YOU MAY BE DRAWING A DISABILITY ALLOWANCE OR COMPENSATION.							
<input type="checkbox"/> (1) RELEASED TO INACTIVE DUTY		<input type="checkbox"/> (8) RETIRED-AGE		<input checked="" type="checkbox"/> (2) HONORABLE DISCHARGE		<input type="checkbox"/> (9) RETIRED-SERVICE CONNECTED DISABILITY	
<input type="checkbox"/> (3) RETIRED-20 (or more) YRS. SERVICE		<input type="checkbox"/> (17) RETIRED-COMBAT DISABILITY		<input type="checkbox"/> (4) RETIRED-LESS THAN 20 YRS. SERVICE		<input type="checkbox"/> (18) OTHER-SPECIFY UNDER COMMENTS	
MEMBERS OF RESERVE FORCES COMPLETE THE FOLLOWING							
13. RESERVE BRANCH OR SERVICE				14. ORIGINAL ENTRY DATE IN ARMED SERVICES		45. BRANCH SERVICE	
15. SERVICE SERIAL NO.				16. MOS, AFSC, DESIGNATOR, OR RATING		46-49. ENTRY DATE	
17. MIL. GRADE		18. RESERVE CATEGORY (Check one)		50-59. SERV. SER. NO.		60-64. MOS, AFSC, ETC.	
		<input type="checkbox"/> (1) READY <input type="checkbox"/> (2) STANDBY <input type="checkbox"/> (3) RETIRED		65-66. MIL. GRADE		67. CATEGORY	
19. EXPIRATION DATE OF APPOINTMENT OR ENLISTMENT (Month and year)				68-71. EXPIRATION DATE			
20. MIL. MOBILIZATION ASSIGNMENT				72. MOBILIZATION ASSIGNMENT			
21. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED				73. ASSIGNMENT UNIT			
				74. MOBILIZATION CATEGORY			
22. COMMENTS							

OUTSIDE ACTIVITY APPROVAL REQUEST

SEE HR 10-7 BEFORE SUBMITTING TO FOR AN ORIGINAL AND 2 COPIES OF THIS FORM

TO :	DIRECTOR OF SECURITY; ATTN: EMPLOYEE ACTIVITY BRANCH		DATE	16 April 1962
THROUGH:	(Operating official, administrative and/or security officer)			
FROM :	NAME AND GRADE OF EMPLOYEE (Print or type)	COMPONENT	ROOM NO. AND BLDG.	PHONE
	FLORES, Daniel GS-04	DDP/OPSER/RID/RB/IN	A B 4003	6187

JOHN A. MAYO, Jr.
Security Officer, RID

1. DESCRIPTION OF OUTSIDE ACTIVITY FOR WHICH APPROVAL IS REQUESTED:

Bartender

2. FULL NAMES OF ORGANIZATION AND/OR PERSONS INVOLVED

Bartenders Union Local 01A 75

Mr. Patrick Duffy

3. DATE(S) OF PARTICIPATION AND LOCALE OF ACTIVITY

On call different days of the week.
914 F Street, N. W.
Washington, D. C.

4. REMARKS

In engaging in the requested activity I will make no reference to, or discuss my CIA assignments or duties nor will I make reference to or discuss my CIA employment except as authorized by Headquarters Regulation 10-7.

John M. Wiggleworth
SIGNATURE OF REQUESTING EMPLOYEE
(signed) John M. Wiggleworth
JOHN M. WIGGLEWORTH
Chief, RID/ADMIN

5. CONCURRENCES AND/OR APPROVAL WITHIN OPERATING OFFICE

FOR COMPLETION BY EMPLOYEE ACTIVITY BRANCH AND RETURN OF ORIGINAL TO EMPLOYEE

OP

20 Apr 62
W. A. ...

PART A
 ALL WHO REGISTER MUST FILE IN THIS PART

1. NAME (LAST, FIRST, MIDDLE INITIAL) **FLORES, D. J.** 2. DATE OF BIRTH (Month, Day, Year) **12 7 51** 3. Are you now married? YES NO

4. YOUR MARITAL ADDRESS (INSURER AND STREET) **1187 1/2 ...** (CITY AND ZONE NUMBER) **...** (STATE)

5. SEX: MALE FEMALE

6. Are you covered by, or do you or any family member hold below coverage by, or enrolling in a plan under the Federal Employees Health Benefits Act of 1959 (through the services of another United States or District of Columbia Government employee or annuitant)? YES NO

7. Place an **X** in proper box to show your annual basic salary range:
 UNDER \$4,000 \$4,000 TO \$5,000 \$5,000 TO \$6,000 \$6,000 TO \$7,000 \$7,000 TO \$8,000

PART B
 FILE IN THIS PART IF YOU WISH TO ENROLL IN A HEALTH BENEFITS PLAN

1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or annuity to cover my share of the enrollment. (Using the information requested below from inside cover of brochure of the plan you select.)

NAME OF PLAN: **Medicare General Plan** OPTION: **HIGH** PLAN CODE NUMBER: **1 1 2**

2. In space below list all eligible family members (with exception list your wife or husband first, then your unmarried child under age 19, including legally adopted children, and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)

NAME OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)	NAME OF FAMILY MEMBERS	DATE OF BIRTH (Month, Day, Year)
Wife or Husband ...	11/17/51		

3. If enrollment is for self only, answer item 3. If enrollment is for self and family also answer item 3 or item 3 if it applies.

4. If a female (employee or annuitant) does the family listed above include a husband who is incapable of self-support (on account of mental or physical disability which can be expected to continue for more than one year)? (If answer attach a doctor's certificate.) YES NO

THIS PART MUST ALSO BE FILED IN IF YOU CHANGE YOUR ENROLLMENT

PART C
 FILE IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT

1. ITEM 1 OF ITEM 2, WHICH ONE APPLIES AND ANSWER ITEM 3

2. I wish to enroll in any plan under the Health Benefits Act.

3. The reason for my election is (Place an **X** in proper box):
 (a) I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent.
 (b) I am covered by a health insurance plan which is not under the Health Benefits Act.
 (c) Any other reason.

2. I elect to cancel my present enrollment under the Health Benefits Act.

PART D
 FILE IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT

1. I want to change my enrollment as shown by the enrollment number and other information in Part B

1. Enrollment code number of present plan: **...**

2. Date of event which permits change (The date on face of diploma is proper unless otherwise stated.)

3. Date of event which permits change: MONTH **...** DAY **...** YEAR **...**

PART E
 ALL WHO REGISTER MUST FILE IN THIS PART

Warning - Any intentional false statement in this application or willful misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001)

Signature: *David Flores*

PART F
 TO BE COMPLETED BY AGENCY

1. NAME AND ADDRESS OF EMPLOYING OFFICE: **...**

2. DATE RECEIVED BY EMPLOYING OFFICE: **1/16/52**

3. EFFECTIVE DATE OF ELECTION: **1/1/52**

4. PAYROLL OFFICE AND: **...**

5. PAYROLL ACTION (INITIALS AND DATE): **...**

SIGNATURE OF AUTHORIZED AGENCY OFFICIAL: **...**

REMARKS
 FOR USE ONLY BY ANNUITANTS AND AGENTS

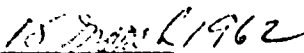
...

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 29 August 1961.


Signature


Date

CONFIDENTIAL

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)

WASHINGTON, D. C.

(Bureau or division)

(Place of employment)

I, FLORES, DANIEL, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

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

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

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

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

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

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

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

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

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

11 March 1962

(Date of entrance on duty)

Daniel Flores

(Signature of appointee)

Subscribed and sworn before me this 12th day of March, A. D. 19 62.

at Washington, D. C.

(City)

(State)

[SEAL]

Shelby L. Lewis

(Signature of official)

Appointment Clerk

(Title)

NOTE - The oath of office must be administered by a person specified in 5 U. S. C. 18 or by a person designated to administer oaths under Section 206, Act of June 10, 1943, 5 U. S. C. 106. If by 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. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1 PRESENT ADDRESS (street and number, city and State)
 5228 Connecticut Ave. N.W., #205, WASHINGTON 8, D.C.

2 (A) DATE OF BIRTH
 August 11, 1905

(B) PLACE OF BIRTH (city and State or city and foreign country)
 SAN MARCOS, TEXAS

3 (A) IN CASE OF EMERGENCY, PLEASE NOTIFY
 MRS. DORRIS TOLLES

(B) RELATIONSHIP
 WIFE

(C) STREET AND NUMBER, CITY AND STATE
 2925 Connecticut Ave., N.W., WASH., D.C.

(D) TELEPHONE NO.
 265-5322

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 PAST 24 MONTHS? YES NO

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

NAME	PAST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR. RIED (Check one)	SIN. GLE

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
8 (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA OR (B) AS A NATIVE OF AMERICA, SAMOA DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?	X		10 (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES GROUP LIFE INSURANCE ACT?		X
9 ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes" give details in Item 12	X		(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?		X
10 (A) DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PERSON OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes" give details in Item 12	X		11 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
8 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED OR CHARGED OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AGENCIES FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCE? DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OR LOSS WAS INCURRED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED. If your answer is "Yes" give in Item 12 for each case, (1) approximate date, (2) charge, (3) place, (4) action taken.	X		B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		X
9 SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EMPLOYMENT OR ACCEPTING THIS SERVICE APPOINTMENT? If your answer is "Yes" give dates of and reasons for such bar in Item 12	X		C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS? If your answer to A, B or C is "Yes" give details in Item 12 as to date, as you can remember, including the name and address of employer, approximate date, and reasons in each case.		X

12 SPACE FOR DETAIL ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)

ITEM NO. _____

ITEM NO. _____

INSTRUCTIONS TO APPLICANTS (OFFICER) You must determine that the appointment award is in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and any of the laws pertaining to appointment. This form should be checked for the signing of officer, presence, any record of record of charges or arrest, age, citizenship and work history of former. Also to establish the identity of the appointee, you should postmark check (1) by signature and handwriting against the application and in other pertinent papers and (2) by photo of appointee against the medical certificate.

**STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE
 AND DETERMINATION OF COMPETITIVE STATUS**

IMPORTANT: The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in recording agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I.—EMPLOYEE'S STATEMENT

PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial) FLORES, DANIEL 2. DATE OF BIRTH August 4, 1935

9. RETENTION GROUP _____
 10. A. CIVIL STATUS YES NO
 B. TYPE OF PRESENT APPOINTMENT _____

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.)

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	

11. SERVICE

YEAR	MONTH	DAY

4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE"

BRANCH	FROM—			TO—			DISCHARGE (Hon or dishon?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
<u>UNITED STATES MARINE CORPS</u>	<u>1957</u>	<u>JULY</u>	<u>25</u>	<u>1961</u>	<u>JULY</u>	<u>25</u>	<u>HONORABLE</u>

12. TOTAL SERVICE 4

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? YES NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.

TYPE IF KNOWN (LWOP, Full, Susp, AWOL, Mes Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

13. NONCREDITABLE SERVICE (Leave purposes only):

14. NONCREDITABLE SERVICE (RIF purposes only):

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? YES NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)

15. REEMPLOYMENT RIGHTS YES NO

16. RETENTION RIGHTS YES NO

7. ARE YOU
 A. THE WIFE OF A DISABLED VETERAN? YES NO
 B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? YES NO
 C. THE UNREMARKED SPOUSE OF A VETERAN? YES NO

17. EXPIRATION DATE OF RETENTION RIGHTS

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

12 March 1962
(DATE)

Daniel Flores
(SIGNATURE)

Subscribed and sworn to before me on this 12th day of Mar 1962 at Washington, D. C.

SEAL

Shirley L. Smith
(SIGNATURE)

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

INSTRUCTIONS: Do this form on the personnel side of the employee's official personnel folder immediately before or after the personnel action involved.

CONFIDENTIAL

(When Filled In)

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave of 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 will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) <i>FLORES</i>	(First) <i>DANIEL</i>	(Middle) <i>CR.</i>	SOCIAL SECURITY NUMBER
--	--------------------------	------------------------	------------------------

1. RESIDENCE DATA	
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED <i>2525 Connecticut Ave., Wash. D.C.</i>	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <i>2525 Connecticut Ave., Wash. D.C.</i>	HOME LEAVE RESIDENCE

2. MARITAL STATUS (Check one)					
<input type="checkbox"/> SINGLE	<input checked="" type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> WIDOWED	<input type="checkbox"/> ANNULLED
IF MARRIED, PLACE OF MARRIAGE <i>LIMA, PERU, SOUTH AMERICA</i>				DATE OF MARRIAGE <i>11/14/1961</i>	
IF DIVORCED, PLACE OF DIVORCE DECREE				DATE OF DECREE	
IF WIDOWED, PLACE SPOUSE DIED				DATE SPOUSE DIED	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)					

3. MEMBERS OF FAMILY		
NAMES OF CHILDREN	ADDRESS (No., Street, City, Zone, State) <i>2525 Connecticut Ave. N.W.</i>	TELEPHONE NO. <i>265-8322</i>
	ADDRESS	SEX DATE OF BIRTH
NAME OF FATHER (Or male guardian) <i>JOSE F. FLORES</i>	ADDRESS <i>501 S. QUADRADE ST. SAN ANTONIO, TEXAS</i>	TELEPHONE NO.
NAME OF MOTHER (Or female guardian) <i>CARMEN R. FLORES</i>	ADDRESS <i>501 S. QUADRADE ST. SAN ANTONIO, TEXAS</i>	TELEPHONE NO.
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.		

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
NAME (Mr., Mrs., Miss) (Last-First-Middle) <i>FLORES DANIEL ARNETT</i>	RELATIONSHIP <i>WIFE</i>	
HOME ADDRESS (No., Street, City, Zone, State) <i>2525 CONN. AVE. N.W., WASH., D.C.</i>	HOME TELEPHONE NUMBER <i>265-5322</i>	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE <i>1800 16TH ST. N.W., WASHINGTON 6, DC</i>	BUSINESS TELEPHONE & EXTENSION <i>RE 7-5444</i>	
IS THE INDIVIDUAL NAME(S) ABOVE WITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)		
	YES	<input checked="" type="checkbox"/>
	NO	<input type="checkbox"/>
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)		
	YES	<input checked="" type="checkbox"/>
	NO	<input type="checkbox"/>
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer to "No" explain why in item 5.)		
	YES	<input checked="" type="checkbox"/>
	NO	<input type="checkbox"/>
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 5 on the reverse side of this form.		

CURRENT RESIDENCE AND DEPENDENCY REPORT

CONFIDENTIAL
(When Filled In)

5. VOLUNTARY ENTRIES

Experience in the handling of ~~emergency~~ emergencies has shown that the absence of certain personal data often delays and compli-
cates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family
or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE AC-
COUNTS ARE CARRIED.

UNION TRUST Co., WASH., D.C. - DANIEL CR [] FLORES
BANK OF CALIFORNIA, PORTLAND ORE, DANIEL CR [] FLORES

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. (If "Yes" where is document located?)

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?
 YES NO. (If "Yes" give name(s) and address)

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes", who possess the power of attorney?)

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

[Empty space for additional data and/or continuation of preceding items]

SIGNED AT: Washington DC DATE: March 12 1962 SIGNATURE: Daniel X Flores

SECRET

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UNCLASSIFIED

REQUEST FOR MEDICAL EVALUATION

12 Sept 77

APPLICANT HAS APPLICANT PREVIOUSLY BEEN SEEN BY OMS YES NO

Flores, Daniel

4 Aug 35

13 All

BDO/LA

5270

Ops Officer

15 DEPENDENT NAME (S) (M)

16 SOC SEC NO

17 SEX

18 RELATIONSHIP

19 DEPENDENT PREVIOUSLY SEEN BY OMS (YES/NO)



F

wife

yes

F

dau

yes

20 REQUESTED ACTION (see instructions)

APPLICANT

TYPE EMPLOYMENT

EOD

US PCS

Mexico City

14 Oct 77

NO OF DEPENDENTS TO ACCOMPANY IN RETURN

2

ASSIGNMENTS

US TOY

Ops Officer

US RETURNEE

FITNESS FOR DUTY

US TOY STANDBY

RETURN TO DUTY

US PLANNING

SPECIAL TRAINING

SEPARATION

RETIREMENT

MDR/CIARDS

MDR/CSC

ROUTINE

REGULAR ANNUAL

EXECUTIVE ANNUAL

MPT/PHE

21 COMMENTS

Assignment to Tokyo, Japan has been cancelled, Subject is now being considered for Mexico City.

22 REQUESTING OFFICER'S OFFICE DIV

23 ROOM/BLOG

24 EXTENSION

25 SIGNATURE OF REQUESTING OFFICER

BDO/LA/PPRS

31313 Jcg

5270

FOR APPLICANTS

APPROVE PROCESSING FOR EOD

HOLD PENDING RECEIPT OF ADDITIONAL MEDICAL INFORMATION (see instructions)

REQUEST PRE EMP MEDICAL EVALUATION

OTHER (see instructions)

FOR OMS USE ONLY

COMMENTS

DATE

OMS SIGNATURE

FOR OTHER ACTIONS

REQUESTED ACTION

QUAL

COND QUAL

DEFER

DISQUAL

QUALIFIED FOR OMS. OMS MUST BE EVALUATED PRIOR TO FUTURE OMS.

DATE

26 OCT 1977

OMS SIGNATURE

UNCLASSIFIED

INTERNAL USE ONLY

CONFIDENTIAL

SECRET

FORM 10-75

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) Flores, Danfel DOB: 4 August 1935		3. POSITION TITLE Instructor	4. GRADE GS-12
5. OFFICE DIVISION BRANCH OTR/FTD/OTB		6. EMPLOYEE'S EXT. 5191	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQS/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input checked="" type="checkbox"/> TDY STANDBY		ETD	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		TDY OR PCB	
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER	
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES		SIGNATURE <i>Phronie A. Joyner</i>	
<input type="checkbox"/> NO		Phronie A. Joyner	
		ROOM NO. & BUILDING 6067 Hqs	EXT. 5191
10. COMMENTS Destination: World-Wide			
11. REPORT OF EVALUATION Qualified for TDY Standby until 1 August 1978.			
DATE 31 August 1976		SIGNATURE FOR CHIEF OF MEDICAL STAFF William T. Golder, OMS/PEO	

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION			1. DATE OF REQUEST	
2. NAME (Last, First, Middle) Flores, Daniel		DOB 1935	3. POSITION TITLE Instructor	4. GRADE GS-13
5. OFFICE DIVISION BRANCH OTR/FTD/OTB			6. EMPLOYEE'S EXT. 5191	
7. PURPOSE OF EVALUATION				
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQS/TDY		
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT		
<input checked="" type="checkbox"/> TDY STANDBY		ETA		
<input type="checkbox"/> SPECIAL TRAINING		STATION		
<input type="checkbox"/> ANNUAL		TDY OR PCS		
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER		
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY		
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED		
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER		
<input type="checkbox"/> YES		SIGNATURE <i>Phronie A. Joynes</i>		
<input type="checkbox"/> NO		ROOM NO. & BUILDING GD57 Hqs.		EXT. 5191
10. COMMENTS				
11. REPORT OF EVALUATION Qualified for TDY Standby until 1 August 1978.				
DATE 31 August 1976		SIGNATURE FOR CHIEF OF MEDICAL STAFF William T. Golder, OMS/PEO		

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION			1. DATE OF REQUEST
2. NAME (Last, First, Middle) Flores, Daniel (NMN) 4-35		3. POSITION TITLE Ops Officer	4. GRADE GS-12
5. OFFICE DIVISION BRANCH DDO/LA/COG		6. EMPLOYEE'S EXT. 7265	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQS/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input checked="" type="checkbox"/> TDY STANDBY		ETD	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		TDY OR PCS	
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER	
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
<input type="checkbox"/> RETURN FROM OVERSEAS		ETA	
		STATION	
		NO. OF DEP.'S	
8. OVERSEAS PLANNING EVALUATIONS (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES		SIGNATURE <i>Kathy Hill</i>	
<input type="checkbox"/> NO		Kathy Hill, LA/Trng	
		ROOM NO. & BUILDING 3D5317 Hqs	
		EXT. 7431	

10. COMMENTS	
11. REPORT OF EVALUATION	
Disposition deferred until subject fulfills medical requirements.	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF
1 April 1975	William T. Golder, O4S/Registrar

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 Aug 1935		3. GRADE GS-10	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WII/Guayaquil		5. PRESENT POSITION 0376		6. EMPLOYEE EXTENSION 7431	
7. PROPOSED STATION Lima, Peru			8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/0636/GS-13		
9. TYPE OF COVER AT NEW STATION <input type="checkbox"/>		10. ESTIMATED DATE OF DEPARTURE Sept 71	11. NO. OF DEPENDENTS TO ACCOMPANY two		
12. COMMENTS <p>Vice: Donald J. Venuto Please schedule appointments week of 31 May 1971/</p> <p>Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.</p> <p align="right"><i>Gregory W. Smith</i> <i>2576/S06 13 May 71</i></p>					
13. DATE OF REQUEST 11 Mar 71		14. SIGNATURE OF REQUESTING OFFICIAL <i>Joan Wright</i>		15. ROOM NUMBER AND BUILDING 3D 5309 Hqs	16. EXTENSION 7431
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <p align="right">15 JUN 1971</p> <p align="center">QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS</p> <p align="center"><i>S. E. Lott</i> Chairman, Overseas Candidate Review Panel</p>					
REQUEST FOR PCS OVERSEAS EVALUATION					

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST: 11 Mar 71	
2. NAME (Last, First, Middle) Flores, Daniel (Dependents of)		3. POSITION TITLE Ops Officer	4. GRADE GS-10
5. OFFICE DIVISION, BRANCH DDP/WH/Quayaquil		6. EMPLOYEE'S EXT. 7431	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HDQS/TDY <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT ETD September 1971 STATION Lima, Peru TDY OR PCS PCS TYPE OF COVER <input type="checkbox"/> NO. OF DEPENDENTS TO ACCOMPANY Two NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED <input type="checkbox"/> RETURN FROM OVERSEAS ETA STATION NO. OF DEP.'S	
8. OVERSEAS PLANNING EVALUATION (One Mark must be checked)		9. REQUESTING OFFICER	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE Joan Wright	
		ROOM NO & BUILDING 3D 5300 Hqs	EXT. 7431

10. COMMENTS		
<input type="checkbox"/>	wife	<input type="checkbox"/>
<input type="checkbox"/>	dau	<input type="checkbox"/>
Please schedule appointments week of 31 May 1971.		
11. REPORT OF EVALUATION SPERRY PRESTON		
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF	

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST									
2. NAME (Last, First, Middle) Flores, Daniel (Dependents of)		11 Mar 71									
3. POSITION TITLE Ops Officer		4. GRADE OS-10									
5. OFFICE DIVISION BRANCH DDP/WH/Guayaquil		6. EMPLOYEE'S EXT. 7431									
7. PURPOSE OF EVALUATION											
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/TDY	<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT									
<input type="checkbox"/> ENTRANCE ON DUTY	<table border="1"><tr><td>ETD</td></tr><tr><td>September 1971</td></tr><tr><td>STATION</td></tr><tr><td>TDY OR PCS</td></tr><tr><td>PCS</td></tr><tr><td>TYPE OF COVER</td></tr><tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td>Two</td></tr><tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</td></tr></table>		ETD	September 1971	STATION	TDY OR PCS	PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	Two	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED
ETD											
September 1971											
STATION											
TDY OR PCS											
PCS											
TYPE OF COVER											
NO. OF DEPENDENTS TO ACCOMPANY											
Two											
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED											
<input type="checkbox"/> TDY STANDBY	<input type="checkbox"/> RETURN FROM OVERSEAS										
<input type="checkbox"/> SPECIAL TRAINING	<table border="1"><tr><td>ETA</td></tr><tr><td>STATION</td></tr><tr><td>NO. OF DEP.'S</td></tr></table>		ETA	STATION	NO. OF DEP.'S						
ETA											
STATION											
NO. OF DEP.'S											
<input type="checkbox"/> ANNUAL											
<input type="checkbox"/> RETURN TO DUTY											
<input type="checkbox"/> FITNESS FOR DUTY											
<input type="checkbox"/> MEDICAL RETIREMENT											
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER									
<input checked="" type="checkbox"/> YES	SIGNATURE Joan Wright										
<input type="checkbox"/> NO	ROOM NO. & BUILDING 3D 5300 Hqs	EXT. 7431									

10. COMMENTS		
<input type="checkbox"/>	wife	<input type="checkbox"/>
<input type="checkbox"/>	dau	<input type="checkbox"/>
Please schedule appointments week of 31 May 1971.		
11. REPORT OF EVALUATION QUINCY LEE FOR OS PCS		16-87R
SPERRY PRESTON		
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF	

SECRET

1. FLORES, DONALD J. (110)		2. FAMILY STATUS	3. GRADE
4. OFFICE, DIVISION, BRANCH (OF <input type="text"/> and <input type="text"/>) DIO/MI/Consular		5. PRESENT POSITION 1076	6. EXTENSION 7431
7. PROPOSED STATION Lima, Peru		8. PROPOSED POSITION (Title, Number & Grade) Case Officer/0630/CS-13	
9. TYPE OF COVER AT NEW STATION <input type="text"/>		10. ESTIMATED DATE OF DEPARTURE September	11. NO. OF DEPENDENTS TO ACCOMPANY 7
12. COMMENTS Vico: Donald J. Venuto Please schedule appointments week of 31 May 1971/ Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.			
13. DATE OF REQUEST 11 Mar 71	14. SIGNATURE OF REQUESTING OFFICIAL Joan Wright	15. ROOM NUMBER AND BUILDING & EXTENSION 3D 9309 Bldg 7431	
17. OFFERED BY Qualified Overseas POS 11 June 1971 Joe W. Cline, OMS/pro			
16. OFFICE OF SECURITY DISPOSITION			
18. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION			
REQUEST FOR PCS OVERSEAS EVALUATION			

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		2. DATE OF BIRTH 4 August 1935	3. GRADE GS-08
4. OFFICE DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WH/4		5. PRESENT POSITION Ops Officer	6. EMPLOYEE EXTENSION 6815
7. PROPOSED STATION <input type="text"/>		8. PROPOSED POSITION (Title, Number, Grade) Ops Off 0376 GS-09	
9. TYPE OF COVER AT NEW STATION <input type="text"/>		10. ESTIMATED DATE OF DEPARTURE o/a 27 April 69	11. NO. OF DEPENDENTS TO ACCOMPANY 1
12. COMMENTS VICE KENNETH R. GOODMAN <input type="text"/> 89'B ATTACHED.			
13. DATE OF REQUEST 6 March 1969		14. SIGNATURE OF REQUESTING OFFICIAL <i>PPMacDougall</i> PPMacDougall	15. ROOM NUMBER AND BUILDING 3D5309 Hqs.
16. EXTENSION 6815			
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION 25 MAR 1969 QUALIFIED <i>726011</i> CHAIRMAN, OVERSEAS			
REQUEST FOR PCS OVERSEAS EVALUATION			

PPMac
25 MAR 1969
10 MAR 1969

SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 6 March 1969
2. NAME (Last, First, Middle) Flores, Daniel (dependent)		3. POSITION TITLE Ops Officer
5. OFFICE, DIVISION, BRANCH DDP/WII/4		4. GRADE GS-08
		6. EMPLOYEE'S EXT. 6815

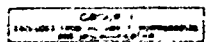
7. PURPOSE OF EVALUATION																			
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> HOUSING <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>PTD</td></tr> <tr><td>o/a 27 April 1969</td></tr> <tr><td>STATION</td></tr> <tr><td> </td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td> </td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>1</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 50) ATTACHED</td></tr> <tr><td>2</td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS <table border="1" style="width:100%; border-collapse: collapse;"> <tr><td>LTA</td></tr> <tr><td> </td></tr> <tr><td>STATION</td></tr> <tr><td> </td></tr> <tr><td>NO. OF DEP.'S</td></tr> <tr><td> </td></tr> </table>	PTD	o/a 27 April 1969	STATION		TDY OR PCS	PCS	TYPE OF COVER		NO. OF DEPENDENTS TO ACCOMPANY	1	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 50) ATTACHED	2	LTA		STATION		NO. OF DEP.'S	
PTD																			
o/a 27 April 1969																			
STATION																			
TDY OR PCS																			
PCS																			
TYPE OF COVER																			
NO. OF DEPENDENTS TO ACCOMPANY																			
1																			
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 50) ATTACHED																			
2																			
LTA																			
STATION																			
NO. OF DEP.'S																			

8. OVERSEAS PLANNING EVALUATION (One block must be checked) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	9. REQUESTING OFFICER SIGNATURE PPMacDougall WII/Personnel ROOM NO. & BUILDING 3D5309 Hqs. EXT. 6815
---	---

10. COMMENTS Wife - <input type="checkbox"/> - <input type="checkbox"/>	
<i>PPMacDougall</i> PA 21-53	
11. REPORT SUBJECT QUALIFIED FOR PROPOSED OS PCS	
DATE 8 FEBRUARY 1969	SIGNATURE FOR CHIEF OF MEDICAL STAFF

SECRET

1. NAME (Last, First, Middle) Flores, Daniel		7. DATE OF BIRTH 4 August 1935		3. GRADE GS-09	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/WI/4		5. PRESENT POSITION Ops Officer		8. EMPLOYEE EXTENSION 6815	
7. PROPOSED STATION <input type="text"/>		8. PROPOSED POSITION (Title, Number, Grade) Ops Off 0378 GS-09			
9. TYPE OF COVER AT NEW STATION <input type="text"/>		10. ESTIMATED DATE OF DEPARTURE o/a 27 April 69		11. NO. OF DEPENDENTS TO ACCOMPANY 1	
12. COMMENTS VICE KENNETH R. GOODMAN <input type="text"/> 89's ATTACHED.					
13. DATE OF REQUEST 6 March 1969		14. SIGNATURE OF REQUESTING OFFICIAL P MacDougall		15. ROOM NUMBER AND BUILDING 3D3309 Hqs.	16. EXTENSION 6815
17. OFFICE OF MEDICAL SERVICES DISPOSITION					
18. OFFICE OF SECURITY DISPOSITION					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION MEDICALLY QUALIFIED FOR PROPOSED OS PCS. DONALD FARLEY 13 21 69					
REQUEST FOR PCS OVERSEAS EVALUATION					



SECRET
(When Filled In)

100

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 6 October 1961										
2. NAME (Last, First, Middle) FIDRUS, DANIEL		3. POSITION TITLE File Clerk	4. GRADE GS-04									
5. OFFICE, DIVISION, BRANCH DDP/OPBR		6. EMPLOYEE'S EXT.										
7. PURPOSE OF EVALUATION												
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY XXXXXXXXXXXXXXXXXXXX <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT <table border="1"> <tr><td>ETD</td></tr> <tr><td>STATION</td></tr> <tr><td>TDY OR PCS</td></tr> <tr><td>TYPE OF COVER</td></tr> <tr><td>NO. OF DEPENDENTS TO ACCOMPANY</td></tr> <tr><td>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr> </table> <input type="checkbox"/> RETURN FROM OVERSEAS <table border="1"> <tr><td>EZA</td></tr> <tr><td>STATION</td></tr> <tr><td>NO. OF DEPTS</td></tr> </table>		ETD	STATION	TDY OR PCS	TYPE OF COVER	NO. OF DEPENDENTS TO ACCOMPANY	NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	EZA	STATION	NO. OF DEPTS
ETD												
STATION												
TDY OR PCS												
TYPE OF COVER												
NO. OF DEPENDENTS TO ACCOMPANY												
NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED												
EZA												
STATION												
NO. OF DEPTS												
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER										
<input type="checkbox"/> YES <input type="checkbox"/> NO		SIGNATURE Chirley Wells ROOM NO. & BUILDING BOL 1016 16th Street										
		EXT. 2701										

10. COMMENTS	
MILITARY SECTION	
18 OCT 1961	
11. REPORT OF EVALUATION	
DATE 22 NOV 61	SIGNATURE FOR CHIEF OF MEDICAL STAFF OFFICE OF THE CHIEF

SECRET
(When Filled In)

File

QUALIFICATIONS UPDATE

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

Note that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 58-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 036130	NAME (Last-First-Middle) Flores, Daniel	DATE OF BIRTH 08/04/35
-------------------------	--	---------------------------

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/CTR. HRS. (Specify)
	MAJOR	MINOR				
1. American University, Washington, DC	Political Science		1962-1967	B.A.	1967	120 hrs
2.						

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

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

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

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

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

SECTION III MARITAL STATUS

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

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

3. DATE OF BIRTH

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

5. OCCUPATION

6. PRESENT EMPLOYER

7. CITIZENSHIP

8. FORMER CITIZENSHIP(S) COUNTRY(IES)

9. DATE U.S. CITIZENSHIP ACQUIRED

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT RECORD
1	<input type="checkbox"/> ADD				
2	<input type="checkbox"/> DELETE				
3	<input type="checkbox"/> ADD				
4	<input type="checkbox"/> DELETE				

FORM 8-68 8944

SECRET

64-111-10-111

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 LIST			
				TRAVEL	STUDY	WORK	RESIDENCE
			JUL 30 - 5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SECTION VI: TYPING AND STENOGRAPHIC SKILLS

1. TYPING (P/M) 2. SHORTHAND (M/M) 3. INDICATE SHORTHAND SYSTEM USED--CHECK ALL APPROPRIATE ITEM

GREGG SPEEDWRITING STENOTYPE 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? YES NO

2. NEW CLASSIFICATION

3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS

4. IF DEFERRED, GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS

CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG

ARMY MARINE CORPS COAST GUARD NATIONAL GUARD

NAVY AIR FORCE 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 READY RESERVE STANDBY (Active) STANDBY (Inactive) RETIRED 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	
			YES	NO

SECTION IX: PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO

SECTION X: REMARKS

21 June 1961

SECRET

Name: **HEUER, Daniel**
 SSN: **155715**
 Date of Birth: **4-8-35**

Date & Place of Birth: **4-8-35, San Marco, Texas**
 Non-degree Wash. Sem.

DCS
 P
 F
 X

THE AMERICAN COLLEGE
 WASHINGTON, DISTRICT OF COLUMBIA

ADMISSION RECORD: **Full Standing**
 PREVIOUS RECORD: **San Marcos High School, Texas 5/55**
 TOOLS OF RESNAIG PASSAGE: _____ COMPREHENSIVE EXAMINATIONS PASSED: _____

CATALOG NUMBER	TITLE OF COURSE	SEMI. HOURS	GRADE	QUALITY POINTS
FALL 62				
10100	INTRO ECONOMICS I	3	C	3
10100	ENGLISH COMP I	3	C	3
10100	BACKGROUNDS CIV I	3	D	
10100	INTRO WORLD POL	3	C	3
SPR 63				
10100	INTRO ECONOMICS II	3	D	
10100	AMERICAN GOVT NATL	3	D	
21101	ENGLISH COMP II	3	F	1-63
21101	BACKGROUNDS CIV II	3	C	3
FALL 1963				
31101	COMP & READING II	3	B	6
41112	GEOM ANAL INCOME	3	F	1
SPRING 1964				
10100	INTRO PHILOSOPHY	3	C	3
10100	INTRO GOVT ST & SOC	3	F	1
SPRING 1965				
10100	APPLY BIOLOGY	3	C	3
10100	INTRO POL BY POWRS	3	B	6
10100	INTRO TO PHILOSOPHY	3	C	3
10100	STATE GOVERNMENT	3	B	6
SUMMER 1965				
10100	PHYSICAL SCIENCES	3	B	6
10100	INT & MOD TESTAMNT (Course cancelled by Univ.)			
FALL 1965				
10100	INTERNATL LAW & ORGANIZA 460-48-6230			
10100	INTRO LATIN AMER	3	A	9
10100	SPANISH DRAMA	3	C	3
10100	SPANISH 19TH C NOVEL	3	C	3
10100	INTRO POLIT THEORY	3	C	3
10100	GENERAL PSYCHOLOGY	3	D	
SPRING 1966				
COLLEGE OF ARTS & SCIENCES				
10100	INTRO POLIT THEORY	3	A	9
10100	INTRO POLIT THEORY	3	A	9

CATALOG NUMBER	TITLE OF COURSE	SEMI. HOURS	GRADE	QUALITY POINTS
NEW STUDENT NUMBER				
10306	INTRO ACCOUNTING I	3	C	3
37458	ADV SPANISH II	3	A	9
53511	MODERN POLIT THEORY	3	A	9
SUMMER 1966				
COLLEGE OF ARTS & SCIENCES				
24931	RUSSIA SINCE 1917	3	C	6
37550	TECHRS ADV SPAN II	3	B	6
47376	PROB RELIG THOUGHT	3	C	3
FALL 1966				
COLLEGE OF ARTS & SCIENCES				
33450	CONTEMP INT POLIT	3	B	6
33584	LATIN AMER SEM I	9	A	27
37550	GOLDEN AGE NOVEL	3	A	9
53548	GOV & POL LAT AMER	3	C	3
SPRING 1967				
COLLEGE OF ARTS & SCIENCES				
33440	INTERNATL LAW & ORGANIZA	3	B	6
33529	LAT AMER INTERNATL RELA	3	A	9
37354	MODERN SPANISH DRAMA	3	A	9
37551	SPANISH 19TH C NOVEL	3	B	6
53150	U S POLITICAL SYSTEM I	3	C	3

TERMS: Spring 1966, Fall 1966.

REGISTERED OFFICER
 JUL 12 1967
John E. Blum

SECRET

(When Filled In)

AFSA

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llc

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. 086130	2. NAME (Last, First, Middle) FLORES DANIEL	3. SEX M	4. DATE OF BIRTH 08/04/35	5. SCHEDULE GRADE STEP GS-05-04
6. SO D	7. POSITION TITLE INTELLIGENCE CLERK	8. OFFICE OF ASSIGNMENT WH	9. LOCATION (Agency, City) WASH., D.C.	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	DATE TO	FROM	TO
AC OVERSEAS SERVICE			

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	SCHOOL	YEAR
AC COLLEGE DEGREE ON RECORD			

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

07 MAY 1970

14-00000

SECRET

When Filled In

SECTION III EDUCATION (Cont'd)						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED	ADDRESS AND CITY/STATE		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 (MOS. (Specify))
	MAJOR	MINOR				
1 The American University Washington, D.C.	Pol.Sci.	Spanish Literature	1962 - 1967	A degree will be conferred in July 1967.		11 1/2 Sem. hrs.
2						
3						
4						
5 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	
1						
2						
3						
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
4						
5						
AGENCY SPONSORED EDUCATION						
Specify which, if any, of the education shown in Section III was Agency sponsored						
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1						
2						
3						
4						
5						

SECRET

(When Filled In)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			CHECK IN WORK ASSIGNMENT
				FIELD OF STUDY	TRAVEL	STUDY	
Bolivia	Economic, topographic, cultural and political.	Nov. 1959- Jan. 1960	American Univ. 1962-1967	X		X	
Peru	Topographic, cultural, and political.	Jan. 1960- Nov. 1960	American Univ. 1962-1967	X		X	
Latin America in general.	Economic, topographic, cultural, and political.		American Univ. 1962-1967			X	

SECTION V TYPING AND STENOGRAPHIC SKILLS

1. TYPING (WPM) 45 2. SHORTHAND (WPM) _____ 3. INDICATE SHORTHAND SYSTEM USED. CHECK IN APPROPRIATE ITEM
 GREGG SPEEDWRITING STENOTYPE OTHER, SPECIFY _____

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (computer, mimeograph, card punch, etc.)

SECTION VI SPECIAL QUALIFICATIONS

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, sending & receiving), OFFSET PRESS, TURRET LATHE, LDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES.

3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PROF. ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? YES NO

4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number, if known)

5. FIRST LICENSE/CERTIFICATE year of issue _____

6. LATEST LICENSE/CERTIFICATE year of issue _____

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

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

9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE.

SECRET

SECRET

(When filled in)

SECTION II		MARITAL STATUS			
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) No change					
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 CITIZENSHIPS (COUNTRY IS)		9. DATE U.S. CITIZENSHIP ACQUIRED	
SECTION III					
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE					
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS	
SECTION IV				PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS	
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP		FROM	TO
DATE	SIGNATURE OF EMPLOYEE				
29 March 1967	<i>[Handwritten Signature]</i>				

SECRET
(When Filled In)

11-61		LANGUAGE DATA RECORD		
PART I-GENERAL				
1. NAME (Last-First-Middle) <i>FLORES, RONIEV</i>		2. DATE OF BIRTH (2A-3D) MONTH DAY YEAR <i>Aug. 1, 1955</i>		
3. LANGUAGE (31-33) <i>SPANISH 720</i>	4. TODAY'S DATE (34-37) MONTH DAY YEAR <i>MARCH 12 1962</i>		5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
② 2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.				
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS; NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.				
5. I HAVE NO READING ABILITY IN THE LANGUAGE.				
SECTION B. Writing (41)				
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.				
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.				
③ 3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
5. I CANNOT WRITE IN THE LANGUAGE.				
SECTION C. Pronunciation (42)				
① 1. MY PRONUNCIATION IS NATIVE.				
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.				
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.				
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

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

SECTION E.

Understanding (44)

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

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

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

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

PART IV—CERTIFICATION

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

DATE SIGNED

March 13, 1962

SIGNATURE

David E. Lee

1461

1471

DO NOT USE THIS SPACE		PERSONAL HISTORY STATEMENT		THIS DATE: 8 SEP 69, 1961	
INSTRUCTIONS					
<p>1. Answer all questions completely or check appropriate box. If question is not applicable, write "NA". Write "Unknown" only if you do not know the answer and it cannot be determined from personal records. Use blank space at end of form for extra details on any question for which you have insufficient space.</p> <p>2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.</p> <p>3. Consider your answers carefully. Your signature at the end of this form will certify to their correctness. Careful completion of all applicable questions will permit review of your qualifications to the best advantage.</p>					
SECTION I GENERAL PERSONAL AND PHYSICAL DATA					
1. FULL NAME (Last-First-Middle)		2. AGE		3. SEX	
FLORES, Daniel		26		<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
4. HEIGHT	5. WEIGHT	6. COLOR OF EYES	7. COLOR OF HAIR	8. TYPE COMPLEXION	9. TYPE BUILD
5' 8"	165 lbs.	Brown	Black	Dark	Medium
10. SCARS (Type and Location): Right cheek, one-half inch scar; left upper lip, one-quarter inch scar; both received playing football					
11. OTHER DISTINGUISHING PHYSICAL FEATURES: None					
12. CURRENT ADDRESS (No., Street, City, Zone, State and Country):			13. PERMANENT ADDRESS (No., Street, City, Zone, State and Country) AND PHONE NO.:		
2828 Connecticut Avenue, N. W., #203 Washington 8, D. C.			2828 Connecticut Avenue, N. W. #203 - Washington 8, D. C.		
14. CURRENT PHONE NO.	15. OFFICE PHONE NO. & EXT.	16. LEGAL RESIDENCE (State, Territory or Country)			
264-8322	None	Washington, District of Columbia			
17. NICKNAMES		18. OTHER NAMES YOU HAVE USED			
Dan		None			
19. INDICATE CIRCUMSTANCES (including Length of Time) UNDER WHICH YOU HAVE EVER USED THESE NAMES					
Personal acquaintances - twelve years					
20. IF LEGAL CHANGE, GIVE PARTICULARS (Date and by what authority):					
NA					
SECTION II POSITION DATA					
1. INDICATE THE TYPE OF WORK OR POSITION FOR WHICH YOU ARE APPLYING					
Any phase of communications; administration; or personnel work.					
2. INDICATE THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT (You will not be considered for any position with a lower entrance salary).			3. DATE AVAILABLE FOR EMPLOYMENT		
\$ 4,250.00			Immediately		
4. INDICATE YOUR WILLINGNESS TO TRAVEL					
<input type="checkbox"/> OCCASIONALLY <input checked="" type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY <input type="checkbox"/> OTHER:					
5. INDICATE YOUR WILLINGNESS TO ACCEPT ASSIGNMENT IN THE FOLLOWING LOCATIONS (Check (X) each item applicable)					
<input checked="" type="checkbox"/> WASHINGTON, D. C.		<input type="checkbox"/> ANYWHERE IN U. S.		<input type="checkbox"/> CERTAIN LOCATIONS ONLY (Specify):	
<input checked="" type="checkbox"/> OUTSIDE CONTINENTAL U. S.					
6. INDICATE WHAT RESERVATIONS YOU WOULD PLACE ON ASSIGNMENTS OUTSIDE THE WASHINGTON, D. C. AREA.					
I would be willing to travel within the United States provided said travel would not involve a permanent move whereby my legal residence would be changed. However, it is my wish to live overseas on a permanent basis.					



FORM 444 USE PREVIOUS EDITION.
11-58

JOY COONEY

SECTION III		CITIZENSHIP	
1. DATE OF BIRTH August 16, 1935	2. PLACE OF BIRTH (City, State, Country) San Marcos, Texas	3. PRESENT CITIZENSHIP (Country) United States of America	
4. CITIZENSHIP ACQUIRED BY BIRTH <input type="checkbox"/> MARRIAGE <input type="checkbox"/> OTHER (Specify) _____		5. DATE NATURALIZED NA	6. NATURALIZATION CERTIFICATE NO. NA
7. COURT ISSUED NATURALIZATION CERTIFICATE NA		8. ISSUED AT (City, State, Country) NA	
9. HAVE YOU HELD PREVIOUS NATIONALITY		10. IF YES, GIVE NAME OF COUNTRY NA	
11. GIVE PARTICULARS CONCERNING PREVIOUS NATIONALITY. NA			
12. HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		13. GIVE PARTICULARS NA	
14. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, WHAT IS PRESENT STATUS OF YOUR APPLICATION (First Papers, Etc.)? NA			
15. DATE OF ARRIVAL IN U.S. NA	16. PORT OF ENTRY NA	17. ON PASSPORT OF WHAT COUNTRY NA	
18. LAST U.S. VISA (No., Type, Place of Issue) NA		19. DATE VISA ISSUED NA	
SECTION IV		EDUCATION	
1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED			
<input type="checkbox"/> LESS THAN HIGH SCHOOL GRADUATE		<input type="checkbox"/> OVER TWO YEARS OF COLLEGE NO DEGREE	
<input type="checkbox"/> HIGH SCHOOL GRADUATE		<input type="checkbox"/> BACHELOR'S DEGREE	
<input type="checkbox"/> TRADE BUSINESS OR COMMERCIAL SCHOOL GRADUATE		<input type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE	
<input checked="" type="checkbox"/> TWO YEARS COLLEGE OR LESS		<input type="checkbox"/> MASTER'S DEGREE <input type="checkbox"/> DOCTOR'S DEGREE	
2. ELEMENTARY SCHOOL			
1. NAME OF ELEMENTARY SCHOOL San Marcos Elementary School		2. ADDRESS (City, State, Country) San Marcos, Texas, U.S.A.	
3. DATES ATTENDED (From and To) Sept., 1942 - May, 1951		4. GRADUATE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
3. HIGH SCHOOL			
1. NAME OF HIGH SCHOOL San Marcos High School		2. ADDRESS (City, State, Country) San Marcos, Texas, U.S.A.	
3. DATES ATTENDED (From and To) Sept., 1951 - May, 1955		4. GRADUATE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
4. COLLEGE OR UNIVERSITY STUDY			
1. NAME OF HIGH SCHOOL NA		2. ADDRESS (City, State, Country) NA	
3. DATES ATTENDED (From and To) NA		4. GRADUATE YES <input type="checkbox"/> NO <input type="checkbox"/>	
5. COLLEGE OR UNIVERSITY STUDY		6. GRADUATE	
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	7. COURSE	8. DATES ATTENDED (From and To)	9. GRADUATE
19. PRINT FULL NAME AND ADDRESS OF APPLICANT			

SECTION IV CONTINUED FROM PAGE 3

5. IF A GRADUATE DEGREE HAS BEEN NOTED, IN ITEM 4 WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

NA

6. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
NA				

7. MILITARY TRAINING (FULL TIME DUTY IN SPECIALIZED SCHOOLS SUCH AS ORDONANCE, INTELLIGENCE, COMMUNICATIONS, ETC.)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
Marine Security Guard School - Handerson Hall Hq. Marine Corps, Washington 25, D.C.	Security Guard Training	9/22/58	10/31/58	(5 wks)

8. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE.

Weapons Training in Marine Corps.
Acted as partisan during cold weather training at Bridgeport, California (Pickle Meadows - USMC).

SECTION V FOREIGN LANGUAGE ABILITIES

1. LANGUAGE (List below each language in which you possess any degree of competence. Indicate competence in Read, Write or Speak by placing a check (X) in the appropriate boxes.)	2. COMPETENCE - IN ORDER LISTED R. Read, W. Write, S. Speak							3. HOW ACQUIRED			
	FLUENT IN NATIVE SPEECH	FLUENT BUT NOT NATIVE	ADEQUATE FOR RESEARCH	ADEQUATE FOR TRAVEL	LIMITED KNOWLEDGE	NATIVE OF COUNTRY	PROLONGED RESIDENCE	CONTACT WITH NATIVE SPEAKERS (Parents, etc.)	ACADEMIC STUDY (All levels)		
	R W S	R W S	R W S	R W S	R W S						
Spanish	X	X	X						X		

4. IF YOU HAVE CHECKED "ACADEMIC STUDY" UNDER "HOW ACQ." INDICATE LENGTH AND INTENSIVENESS OF STUDY.

NA

5. IF YOU HAVE INDICATED FLUENCY FOR A LANGUAGE HAS THIS IN FLUENT DIFFERENCES IN SPOKEN AND OR WRITTEN FORM? PLEASE DESCRIBE THESE.

NA

6. DESCRIBE HOW AS LITERAL INTERPRETER YOU WOULD BE ABLE TO INTERPRET SPEECHES AND TALKS, DEBATES AND TALKS, DEBATES, ETC. IN THE SPANISH, GERMAN, FRENCH, COMMUNIST, POLISH, AND OTHER SPECIALIZED STUDY.

Could act as literal interpreter at almost any level.

7. IF YOU HAVE NOT YET DEVELOPED A LANGUAGE YOU WOULD LIKE TO LEARN, INDICATE THE LANGUAGE AND WHY YOU WANT TO LEARN IT.

SECTION VI GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL

1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES IN WHICH YOU HAVE TRAVELLED OR GAINED KNOWLEDGE AS A RESULT OF RESIDENCE, STUDY OR WORK ASSIGNMENT. INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.

NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE OR TRAVEL	DATES AND PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Bolivia	General knowledge	11/11/58 to 1/11/60		X			
Peru	General knowledge	1/11/60 to 11/30/60		X			
Chile		6/15/59 to 6/21/59			X		
Argentina		6/21/59 to 6/22/59			X		
Uruguay		6/30/59 to 7/2/59			X		

2. INDICATE THE PURPOSE OF VISIT, RESIDENCE, OR TRAVEL IN EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE.

Marine Security Guard - American Embassy - Bolivia and Peru
Vacation - Chile; Argentina; Uruguay; Panama

3. UNITED STATES PASSPORT NUMBER AND EXPIRATION DATE, IF ISSUED

No. 174850 (SP-35575) Passport has been cancelled.

SECTION VII TYPING AND STENOGRAPHIC SKILLS

1. TYPING (wpm) | 2. SHORTHAND (wpm) | 3. SHORTHAND SYSTEM USED - CHECK AN APPROPRIATE ITEM

45 wpm | None | SPEED | SPEEDWRITING | SPENSTYRE | OTHER (Specify)

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Computations, Mimeograph, Card Punch, Etc.).

Thermofax, mimeograph, switchboard

SECTION VIII SPECIAL QUALIFICATIONS

1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

Football - good
Basketball - fair
Swimming - good
Reading - average
Contract Bridge - very good

2. INDICATE ANY SPECIAL QUALIFICATIONS RESULTING FROM EXPERIENCE OR TRAINING WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OF TYPE OF WORK.

None to my knowledge

3. INCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN THIS SECTION, LIST ANY SPECIAL SKILLS YOU POSSESS RELATIVE TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATING OR MAINTAINING MACHINES (Including C.P. speed, bonding and receiving, OFFSET PRESS, TURBO LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES).

None

SECTION VIII CONTINUED PAGE 2

SECTION VIII CONTINUED FROM PAGE 1

6. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY OF THE FOLLOWING PROFESSIONS OR OCCUPATIONS: ELECTRICIAN, RADIO OPERATOR, TEACHER, LEADER, OR MEDICAL TECHNICIAN, ETC.?

YES NO

7. IF YOU HAVE ANSWERED "YES" TO ABOVE, INDICATE KIND OF LICENSE AND STATE (Include License/Registry Number, if known).

NA

8. FIRST LICENSE OR CERTIFICATE (Year of Issue): NA 9. LATEST LICENSE OR CERT. (Year of Issue): NA

8. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not include address correspondence, etc. Cite the title, publication date, and type of writing (Newspaper or Scientific articles, Technical Reports, Abstracts, Theses, Short Stories, Etc.).

None

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

None

10. LIST PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

Have spoken in my father's church and other churches approximately 150 times. Met and assisted public in Embassies during my tour of duty with the Marine Security Guard.

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

None

SECTION IX EMPLOYMENT HISTORY

NOTE: (LIST LAST POSITION FIRST.) Indicate chronological history of employment for last 15 years. Account for all periods including casual employment and all periods of unemployment. Give address and state of each job. If during period of unemployment, list all civilian employment by a future employer, regardless of date. In completing item 9, "Description of Duties" consider your experience carefully and provide meaningful, concise statements.

<p>1. INCLUSIVE DATES (From and To. If NA, use "N/A")</p> <p>From 1949 to 1953</p>	<p>3. NAME OF EMPLOYER (If NA, use "N/A")</p> <p>Hillburn's Drug Store</p>
<p>2. ADDRESS (No. Street, City, State, Country)</p> <p>San Marcos, Texas</p>	<p>4. NAME OF SUPERVISOR</p> <p>Mr. William Hillburn</p>
<p>5. KIND OF BUSINESS</p> <p>Drug Store</p>	<p>7. SALARY OR BENEFITS 8. CLASS GRADE (If Federal Service)</p> <p>\$122.50 per month</p>
<p>6. TITLE OF JOB</p> <p>Fountain attendant</p>	<p>9. DESCRIPTION OF DUTIES</p> <p>Employee at soda counter</p>
<p>10. REASONS FOR LEAVING</p> <p>To participate in school events (football).</p>	

SECTION IX CONTINUED FROM PAGE 1

SECTION II - CONTINUED FROM PAGE 1	
1. INCLUSIVE DATES (From and To - By No. and St.) July 1955 - June 1956	2. NAME OF EMPLOYING FIRM OR AGENCY Diamond Grocery Store
3. ADDRESS (No., Street, City, State, Country) South Guadalupe St. San Marcos, Texas	
4. KIND OF BUSINESS Grocery Store	5. NAME OF SUPERVISOR Mr. Ignacio Gonzales
6. TITLE OF JOB Butcher	7. SALARY OR EARNINGS \$20.00 PER WEEK
8. DESCRIPTION OF DUTIES Slaughtering and preparing meat for sale as well as actual selling.	
9. REASONS FOR LEAVING To attend college ?	
1. INCLUSIVE DATES (From and To - By No. and St.) May, 1955 - September, 1955	2. NAME OF EMPLOYING FIRM OR AGENCY San Marcos Baptist Academy
3. ADDRESS (No., Street, City, State, Country) San Marcos, Texas	
4. KIND OF BUSINESS Private School	5. NAME OF SUPERVISOR Mr. John Sparkman
6. TITLE OF JOB Painter's Assistant	7. SALARY OR EARNINGS \$15.00 PER WEEK
8. DESCRIPTION OF DUTIES Painted dormitories in the Academy	
9. REASONS FOR LEAVING To attend school	
1. INCLUSIVE DATES (From and To - By No. and St.) September, 1955 - July, 1957	2. NAME OF EMPLOYING FIRM OR AGENCY Economy Department Stores
3. ADDRESS (No., Street, City, State, Country) San Marcos, Texas	
4. KIND OF BUSINESS Clothing Store	5. NAME OF SUPERVISOR Mr. Max Mendlovitz
6. TITLE OF JOB Sales Clerk	7. SALARY OR EARNINGS \$30.00 PER WEEK
8. DESCRIPTION OF DUTIES Assisted customers in selecting and buying goods.	
9. REASONS FOR LEAVING To join the Marine Corps.	
1. INCLUSIVE DATES (From and To - By No. and St.) July 25, 1957 - July 25, 1961	2. NAME OF EMPLOYING FIRM OR AGENCY United States Marine Corps
3. ADDRESS (No., Street, City, State, Country) Marine Corps Schools, Quantico, Virginia	
4. KIND OF BUSINESS Military	5. NAME OF SUPERVISOR Col. John Magruder
6. TITLE OF JOB Marine Corps Museum Attendant	7. SALARY OR EARNINGS \$100.00 per month Sp4 (E-4)
8. DESCRIPTION OF DUTIES Sp4 (E-4)	
9. REASONS FOR LEAVING Sp4 (E-4)	

SECTION IX (CONTINUED FROM PAGE 4)

9. DESCRIPTION OF DUTIES Acted as guide to all visitors entering Museum, explaining Marine Corps history, etc. Also on several occasions acted as interpreter for visiting military personnel from Latin America.		
10. REASONS FOR LEAVING Discharged		
1. INCLUSIVE DATES (From and To - Mo, Do, and Yr.) July 28, 1961 - August 30, 1961		2. NAME OF EMPLOYER, BUSINESS OR AGENCY Ohio Valley Engineering Company
3. ADDRESS (No., Street, City, State, Country) 3. Capitol and I Streets, S. W., Washington, D. C.		
4. KIND OF BUSINESS Construction	5. NAME OF SUPERVISOR Mr. L. G. Brown	6. TITLE OF JOB Laborer
7. SALARY OR EARNINGS 2.17 PER HOUR		8. CLASS. GRADE (If Federal Service)
9. DESCRIPTION OF DUTIES Handyman for Company		
10. REASONS FOR LEAVING Temporary work while seeking permanent employment.		
1. INCLUSIVE DATES (From and To - Mo, Do, and Yr.)		2. NAME OF EMPLOYER, BUSINESS OR AGENCY
3. ADDRESS (No., Street, City, State, Country)		
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR	6. TITLE OF JOB
7. SALARY OR EARNINGS		8. CLASS. GRADE (If Federal Service)
9. DESCRIPTION OF DUTIES		
10. REASONS FOR LEAVING		
11. IF PRIOR SERVICE WITH THE FEDERAL GOVERNMENT IS NOTED ABOVE, INDICATE THE NUMBER OF YEARS CREDITABLE TOWARD U.S. CIVIL SERVICE RETIREMENT, IF ANY. 7 1/2 years		
12. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YOUR ANSWER TO EITHER OR BOTH QUESTIONS IS "YES", GIVE DETAILS Honorably discharged from United States Marine Corps.		

SECTION X		MILITARY SERVICE		
1. CURRENT DRAFT STATUS				
1. ARE YOU REGISTERED FOR THE DRAFT UNDER THE UNIVERSAL MILITARY TRAINING AND SERVICE ACT OF 1948 (42 USC 101)?		X YES		2. SELECTIVE SERVICE CLASSIFICATION
		NO		3. SELECTIVE SERVICE NO.
4. IF DEFERRED, GIVE REASON		5. LOCAL DRAFT BOARD NO. OR DESIGNATION AND ADDRESS		
NA		55 - 10 1/2 S. SAN ANTONIO ST.,		
2. MILITARY SERVICE RECORDS				
3. CURRENT AND OR PAST ORGANIZATIONAL MEMBERSHIP				
CHECK (X) AS APPROPRIATE				
ARMY	NAVY	MARINE CORPS	AIR FORCE	COAST GUARD
				FOREIGN OR NAVAL SERVICE
HAVE SERVED	X			
NOW SERVING				NONE
4. BRANCH OR CORPS OF ABOVE CHECKED ORGANIZATION(S)				
Personnel Administration				
5. DATE SEPARATED FROM EXTENDED ACTIVE DUTY (PAST SERVICE)		6. TOTAL LENGTH OF EXTENDED ACTIVE DUTY IN U.S. ARMED FORCES (PAST OR CURRENT SERVICE)		
25 July, 1961		10 1/2		
7. DATE ENTERED ACTIVE DUTY		8. TOTAL LENGTH OF ACTIVE DUTY IN FOREIGN MILITARY ORGANIZATION		
26 July, 1957				
9. RANK, GRADE OR RATE		10. SERVICE SERIAL OR FILE NUMBER (If now serving, provide current number)		
Capt. (E-4)				
11. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		12. CURRENT SERVICE		
Capt. - Chief Clerk				
13. SECONDARY MIL. OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		14. CURRENT SERVICE		
None				
15. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate whether applicable to past or current service)				
Past Service: Clerk - Maintained personnel service records. 2 years as Security Guard in the American Embassies in La Paz, Bolivia and Lima, Peru.				
16. CHECK (X) TYPE OF SEPARATION FROM ACTIVE DUTY				
X	HONORABLE DISCHARGE	RETIREMENT FOR SERVICE	UNCLE SAM'S	
X	RELEASE TO INACTIVE DUTY	RETIREMENT FOR COMBAT DISABILITY	OTHER:	
	RETIREMENT FOR AGE	RETIREMENT FOR PHYSICAL DISABILITY		
17. CHECK (X) COMPONENT IN WHICH YOU SERVED				
X	REGULAR	X	RESERVE (Including the National and Air National Guard)	OTHER (Including ACD)
18. MILITARY RESERVE, NATIONAL GUARD AND ROTC STATUS				
1. DO YOU NOW HAVE RESERVE STATUS?		2. ARE YOU NOW A MEMBER OF THE NATIONAL GUARD OR AIR NATIONAL GUARD?		3. ARE YOU NOW A MEMBER OF THE ROTC?
X YES		NO		X YES
NO		YES		NO
19. IF YOU HAVE ANSWERED "YES" TO ITEMS 1, 2 OR 3 ABOVE, CHECK COMPONENT MEMBERSHIP BELOW				
ARMY	X	MARINE CORPS	NAT. GUARD	COAST GUARD
NAVY		AIR FORCE	AIR NAT'L GUARD	ARMY ROTC
				AIR FORCE ROTC
20. CURRENT RANK, GRADE OR RATE		21. DATE OF APPOINTMENT IN CURRENT SERVICE		22. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION
Capt. (E-4)		May 1960		January 20, 1962
23. CHECK (X) CURRENT RESERVE CATEGORY				
READY RESERVE				
STANDBY ACTIVE				
STANDBY INACTIVE				
RETIRED				
24. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		25. SECONDARY MILITARY OCCUPATIONAL SPECIALTY (Use of Designation) AND TITLE		
Capt.		None		
26. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES				
None				
27. ARE YOU CURRENTLY ASSIGNED OR ATTACHED TO A RESERVE, NAT'L GUARD OR ROTC TRAINING UNIT?		28. IF YOU HAVE ANSWERED "YES" TO ITEM 27, GIVE UNIT OR AGENCY AND ADDRESS		
NO				
29. HAVE YOU A MILITARY MOBILIZATION ASSIGNMENT?		30. IF YOU HAVE ANSWERED "YES" TO ITEM 29, GIVE UNIT OR AGENCY AND ADDRESS		
NO				
31. INDICATE TOTAL MILITARY SERVICE YEARS FOR LONGEVITY PURPOSES INCLUDING ACTIVE AND INACTIVE DUTY		32. WHERE ARE YOUR SERVICE RECORDS KEPT?		
7 7/7		Washington, D.C.		

SECTION XI FINANCIAL STATUS	
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES NO <input checked="" type="checkbox"/> YES	
2. IF YOUR ANSWER IS "NO" TO THE ABOVE, STATE SOURCE OF OTHER INCOME Wife's Income	
3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS	
NAME OF INSTITUTION	ADDRESS (City, State, Country)
The Bank of California, N.A.	330 S.W. 5th Avenue, Portland, Oregon
Union Trust Company	15 and H Streets, N.W., Washington, D.C.
4. HAVE YOU EVER BEEN IN OR DEFICIENT FOR BANKRUPTCY? YES NO <input checked="" type="checkbox"/> YES	
5. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE PARTICULARS INCLUDING COURT AND DATE(S)	
6. GIVE THREE CREDIT REFERENCES IN THE UNITED STATES	
NAME	ADDRESS (No., Street, City, State)
General Motors Acceptance Corp.	1310 S.W. Yamhill Street, Portland 5, Oregon
Gulf Oil Corporation	P.O. Box 7225, Atlanta 9, Georgia
Minde Furniture Company	917 Carolina Street, Fredericksburg, Virginia
7. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? YES NO <input checked="" type="checkbox"/> YES	
8. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE COMPLETE DETAILS	
9. DO YOU HAVE ANY FINANCIAL INTEREST IN OR OFFICIAL CONNECTIONS WITH ANY U.S. CORPORATIONS OR BUSINESSES, OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer "YES," furnish details on separate sheet.)	
SECTION XII MARITAL STATUS	
1. PRESENT STATUS (Single, Married, Divorced, Separated, Divorced, or Annulled) SPECIFY: Married	
2. STATE DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS NA	
WIFE, HUSBAND OR FIANCEE If you have been married more than once - including annulments - use a separate sheet for former wife or husband giving data required below for all previous marriages. If marriage contemplated, fill in appropriate information for fiancee.	
1. NAME (First, Middle, Surname)	Flones
2. STATE ANY OTHER NAMES EVER USED	(INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH ANY OF THESE NAMES WERE USED. IF LEGAL CHANGE, GIVE PARTICULARS (Date and by what authority). USE EXTRA SPACE PROVIDED ON PAGE 10 OF THIS FORM TO RECORD THIS INFORMATION.)
3. DATE OF MARRIAGE	4. PLACE OF MARRIAGE (City, State, Country)
November 14, 1960	Lima, Peru
7. HIS (OR HER) ADDRESS, BEFORE MARRIAGE (No. Street, City, State, Country)	
8. LIVING 9. DATE OF DEATH 10. CAUSE OF DEATH	
11. CURRENT ADDRESS (Give full address if applicable) 2323 Connecticut Ave., N.W., 1003, Washington 5, D.C.	
12. DATE OF BIRTH	13. PLACE OF BIRTH (City, State, Country)
	Portland, Oregon
14. CITIZENSHIP United States of A.	

SECTION XII CONTINUED FROM PAGE 9

14. IF BORN OUTSIDE U.S. - DATE OF ENTRY: NA 15. PLACE OF ENTRY: NA

16. FORMER CITIZENSHIP(S) (Country, Date): NA 17. DATE U.S. CITIZENSHIP WAS ACQUIRED (City, State, Country): NA

18. OCCUPATION: Legal Secretary 19. PRESENT EMPLOYER (Give name of employer or if spouse deceased or unemployed give last employer): Boykin and De Francis
Foreign Department of State

20. EMPLOYER'S OR BUSINESS ADDRESS (No. Street, City, State, Country): 1000 16th St., N.W., Suite 601, Washington, D.C.

21. DATES OF MILITARY SERVICE (From and to - Do No. and St.): None

22. BRANCH OF SERVICE: None 23. COUNTRY OF WHICH MILITARY SERVICE AFFILIATED: None

24. DETAILS OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN: Foreign Service - Jan., 1953 - Oct., 1960; Civil Service - Jan., 1945 - June, 1952

SECTION XIII CHILDREN AND OTHER DEPENDENTS

1. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	ADDRESS
None				

2. NUMBER OF CHILDREN (including non-children and adopted children who are unmarried, under 21 yrs. of age, and not self-supporting): 0

3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, grandparents, etc., who are not self-supporting): 0

SECTION XIV FATHER (Give same information for Mother and Grandfather on a separate sheet)

1. FULL NAME (Last-First-Middle): Jose S. Flores 2. LIVING: Y YES NO 3. DATE OF DEATH: 4. CAUSE OF DEATH:

5. STATE OTHER NAMES HE HAS USED: None INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH HE HAS EVER USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS, WHEN AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 18 OF THIS FORM TO RECORD THIS INFORMATION.

6. CURRENT ADDRESS - Give last address, if deceased: No. Street, City, State, Country: 501 S. Guadalupe Street, San Marcos, Texas

7. DATE OF BIRTH: December 23, 1903 8. PLACE OF BIRTH (City, State, Country): Mexico, Mexico 9. CITIZENSHIP: USA

10. IF BORN OUTSIDE U.S. - DATE OF ENTRY: May 27, 1918 11. PLACE OF ENTRY: Mexico

12. FORMER CITIZENSHIP(S) (Country, Date): Mexican 13. DATE U.S. CITIZENSHIP ACQUIRED: 1957 14. WHERE ACQUIRED (City, State, Country): San Marcos, Texas

15. OCCUPATION: Baptist Minister 16. PRESENT EMPLOYER (Give name of employer or if father is deceased or unemployed): Mexican Baptist Church

17. EMPLOYER'S BUSINESS ADDRESS OR FATHER'S BUSINESS ADDRESS (If self-employed): 501 S. Guadalupe Street, San Marcos, Texas

18. DETAILS OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN: To my knowledge never served in any military or naval service 19. COUNTRY:

20. DATES OF OTHER GOVERNMENT SERVICE U.S. OR FOREIGN:

SECTION XV MOTHER (Give name and maiden name for Stepmother in separate item)			
1. FULL NAME (Last-First-Middle) Flores, Adelina	2. LIVING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	3. DATE OF DEATH June 1959	4. CAUSE OF DEATH Unknown
5. STATE OTHER NAMES SHE HAS USED None to my knowledge		INDICATE CIRCUMSTANCES INCLUDING DATES IF KNOWN UNDER WHICH SHE HAS EVER USED THESE NAMES. IF LOCAL CHANGE, GIVE PARTICULARS THERE and by what authority. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.	
6. CURRENT ADDRESS - GIVE LAST ADDRESS, IF DECEASED (No., Street, City, State, Country) 3, Austin and Lee Streets, San Antonio, Texas			
7. DATE OF BIRTH September 20, 1903	8. PLACE OF BIRTH (City, State, Country) Mar y Marlene, Nuevo Leon, Mexico	9. CITIZENSHIP Mexican	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY Unknown		11. PLACE OF ENTRY Unknown	
12. FORMER CITIZENSHIP(S) (Country/ies) NA	13. DATE U.S. CITIZENSHIP ACQUIRED NA	14. WHERE ACQUIRED (City, State, Country) NA	
15. OCCUPATION Housewife		16. PRESENT EMPLOYER (Give last employer, if worker; or deceased or unemployed) NA	
17. EMPLOYER'S BUSINESS ADDRESS OR MOTHER'S BUSINESS ADDRESS IF SELF EMPLOYED NA			
18. DATES OF MILITARY SERVICE (From-and-To) NA	19. BRANCH OF SERVICE NA	20. COUNTRY NA	
21. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN NA			
SECTION XVI BROTHERS AND SISTERS (Including Half-, Step- and Adopted Brothers and Sisters)			
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], Semin, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 11
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], San Antonio, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 39
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], San Marcos, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 34
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], Austin, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 12
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], San Antonio, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 27
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Sister	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], San Antonio, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 24
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], San Antonio, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 27
1. FULL NAME (Last-First-Middle) [Redacted]	2. RELATIONSHIP Brother	3. CITIZENSHIP (Country) U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country) [Redacted], San Antonio, Texas		5. LIVING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	6. AGE 27

SECTION XVII		FATHER-IN-LAW	
1. FULL NAME (Last, First, Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
Arnett, Carl Raymond	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
5. STATE OTHER NAMES HE HAS USED		INDICATE CIRCUMSTANCES (Including length of time) UNDER WHICH HE HAS BEEN USED THESE NAMES, IF LEGAL CHANGE OF NAME BY LAW, PATENT AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.	
Ray			
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
4505 Washington St., Milwaukie, 22, Oregon			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
January 2, 1909	Minot, North Dakota	U.S. of America	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY	
NA		NA	
12. FORMER CITIZENSHIP(S) (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if Father-in-Law is deceased or unemployed)		
Warehouse Foreman	Rudy Wilhelm Inc., Portland, Ore. on		

SECTION XVIII		MOTHER-IN-LAW	
1. FULL NAME (Last, First, Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
Tompkins, Alma Dean	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
5. STATE OTHER NAMES SHE HAS USED		INDICATE CIRCUMSTANCES (Including length of time) UNDER WHICH SHE HAS BEEN USED THESE NAMES, IF LEGAL CHANGE OF NAME BY LAW, PATENT AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.	
Alma Dean Arnett			
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)			
13920 S.E. Portland View Place, Portland 36, Oregon			
7. DATE OF BIRTH	8. PLACE OF BIRTH (City, State, Country)	9. CITIZENSHIP	
May 4, 1910	Portland, Oregon	U.S. of America	
10. IF BORN OUTSIDE U.S. - DATE OF ENTRY		11. PLACE OF ENTRY	
NA		NA	
12. FORMER CITIZENSHIP(S) (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)		
Homemaker			

SECTION XIX				RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO EITHER (1) LIVE ABROAD, (2) ARE NOT U.S. CITIZENS OR (3) WORK FOR A FOREIGN GOVERNMENT		
1. FULL NAME (Last, First, Middle)	2. RELATIONSHIP	3. AGE		4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	5. EMPLOYED BY	6. DATE OF LAST CONTACT
None to my knowledge						
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SECTION XIX (Continued from Page 12)

8. SPECIAL REMARKS, IF ANY, CONCERNING RELATIVES NOTED IN SECTION XIX ABOVE

NA

SECTION XX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO ARE IN THE MILITARY OR CIVIL SERVICE OF THE UNITED STATES

1. NAME (Last-First-Middle) Arnett, Raymond Wesley	2. RELATIONSHIP Bro-in-law	3. AGE 24	4. CITIZENSHIP U.S. of America
5. ADDRESS (No., Street, City, State, Country) U.S. Army Depot, Pueblo, Colorado			
1. NAME (Last-First-Middle)	2. RELATIONSHIP 2nd Cousin	3. AGE Mk	4. CITIZENSHIP U.S. of America
5. ADDRESS (No., Street, City, State, Country) Virginia Aviation - 1st S. C. HHC			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
5. ADDRESS (No., Street, City, State, Country)			

SECTION XXI REFERENCES, ACQUAINTANCES, AND NEIGHBORS

1. LIST FIVE CHARACTER REFERENCES NOT RELATIVES IN THE U.S. WHO KNOW YOU INTIMATELY

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Mr. and Mrs. [redacted]	San Marcos, Texas	San Marcos, Texas
Rev. [redacted]	Austin, Texas	Austin, Texas
Mr. [redacted]	Washington, D.C.	Alexandria, Virginia
Mr. [redacted]	[redacted]	Washington, D.C.
Col. [redacted]	WASA, PAWA	Nitacion, Lima, Peru

2. LIST FIVE PERSONS IN THE U.S. WHO KNOW YOU SOCIALLY - NOT RELATIVES SUPERVISORS OR EMPLOYERS

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Mr. [redacted]	Washington, D.C.	Wald St., Wash, D.C.
Mr. [redacted]	[redacted]	Washington, D.C.
Miss [redacted]	Washington, D.C.	State, Wash, D.C.
Miss [redacted]	[redacted]	Boulder, Colorado
Mrs. [redacted]	[redacted]	Nitacion, Lima, Peru

3. LIST THREE NEIGHBORS AT YOUR MOST RECENT NORMAL RESIDENCE IN THE U.S.

NAME (Last-First-Middle)	BUSINESS ADDRESS (No., Street, City and State)	RESIDENCE ADDRESS (No., Street, City and State)
Miss [redacted]	[redacted]	Fredericksburg, Virginia
Lt. and Mrs. [redacted]	[redacted]	Route 1, Vancott, Mo.

SECTION XXII CLUBS, SOCIETIES AND OTHER ORGANIZATIONS

NOTE: List names and addresses of all clubs, societies, professional societies, employee groups or organizations of any kind (in case membership in or support of any organization having been a part of or branch in a foreign country) to which you belong or have belonged.

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATES OF MEMBERSHIP	
		FROM	TO
Spanish Club	San Marcos High School, San Marcos, Texas	Sept., 1931	May, 1933
Distributive Education Club	San Marcos High School, San Marcos, Texas	Sept., 1931	May, 1933
Baptist Youth Organization	First Mexican Baptist Church, San Marcos, Tex.	Jan., 1937	May, 1937

SECTION XXIII RESIDENCES FOR THE PAST 15 YEARS

ADDRESS - LAST RESIDENCE FIRST (Number, Street, City, State, Country)	INCLUSIVE DATES	
	FROM	TO
4716 Kenners Ave., #201, Alexandria, Virginia	March, 1961	Aug., 1961
102 Hazards St., Fredericksburg, Virginia	Dec., 1960	Mar., 1961
172 Bartolomea Herrera, Miraflores, Lima, Peru Calle Pototí,	Jan., 1959	May, 1960
ESIS Building, 3rd & 14th Blooms, La Paz, Bolivia	Nov., 1958	Jan., 1959
#3 Company, Headquarters Marine Corps, Henderson Hall, Washington 25, D.C.	Sept., 1958	Nov., 1958
Cold Weather Training Battalion, Pickle Weavers, Folsom, California	Jan., 1957	Aug., 1958
Marine Corps Base, 29 Palms, California	Dec., 1957	Jan., 1958
Marine Corps Recruit Depot, San Diego, California	July, 1957	Nov., 1957
Marine Corps Base, Camp Pendleton, California	Nov., 1957	Dec., 1957
501 S. Guadalupe St., San Marcos, Texas	May, 1956	July, 1957
Howard Payne College, Brownwood, Texas	Sept., 1955	May, 1956
501 S. Guadalupe St., San Marcos, Texas	1956	Sept., 1955

SECTION XXIV		ADDITIONAL INFORMATION	
1. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU EVER OR WOULD YOU BEEN ASSOCIATED WITH AN ORGANIZATION, PARTY, SOCIETY OR OTHER ORGANIZATION WHICH ADVOCATES OR PRACTICES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES BY FORCE OR VIOLENCE OR OTHER UNLAWFUL MEANS OR THAT IS FOR THE PROMOTION OF VIOLENCE TO OBTAIN THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES?			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
2. IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION, EXPLAIN			
3. DO YOU USE OR HAVE YOU EVER USED "INTOXICANTS"?		4. IF SO, TO WHAT EXTENT?	
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
5. DO YOU USE OR HAVE YOU EVER USED "NARCOTICS"?		6. IF SO, TO WHAT EXTENT?	
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE ORGANIZATION OR ITS ACTIVITIES?			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF ANSWER IS "YES", GIVE COMPLETE DETAILS			
8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940			
I served 4 years in the United States Marine Corps.			
9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME OF THE AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION.			
An investigation (I do not know by whom) was conducted prior to my departure for Bolivia where I was assigned to the American Embassy. This investigation took place during August and September of 1953.			
NOTE SPECIAL: If your answer is "YES" to the following Questions 10, 11 or 12, provide the information requested for each question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.			
10. HAVE YOU, OR TO YOUR KNOWLEDGE, HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A VIOLATION OF TRAFFIC LAWS IN THE UNITED STATES OR ABROAD?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE			
11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATIONS? IF SO, DESCRIBE INCIDENTS AND PROVIDE DATES OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE INCIDENTS AND PROVIDE DATES OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
SECTION XXV		PERSON TO BE NOTIFIED IN CASE OF EMERGENCY	
1. NAME (First-Middle-Last)		2. RELATIONSHIP	
Mrs. Daniel Flores		Wife	
3. HOME ADDRESS (No. Street, City, Zone, State, Country)		4. HOME PHONE NO.	
2828 Conn. Ave. S.W., Washington 5, D.C.		365-8120	
5. BUSINESS ADDRESS (No. Street, City, Zone, State, Country) - INDICATE NAME OF FIRM OR, EMPLOYER, IF APPLICABLE		6. BUSINESS PHONE NO. & EXT.	
Boykin and De Francis 1000 15th St., Suite 603, Washington 5, D.C.		DI 7-5444	
7. IN CASE OF EMERGENCY OTHER CLOSE RELATIVES (MOTHER, FATHER) MAY ALSO BE NOTIFIED IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS. PLEASE SO STATE.			
In all cases wife: Relative, Mrs. Vicente Patlan, 631 S. River St., Seguin, Texas Telephone FR 9-1027			

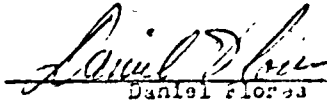
SECTION XVI		CERTIFICATION	
<p>YOU ARE INFORMED THAT THE CORRECTNESS OF ANY STATEMENT MADE IN THIS APPLICATION WILL BE INVESTIGATED.</p> <p>I have read and understand the instructions. I Certify that the foregoing answers are true and correct to the best of my knowledge and belief. I agree that any misstatement or omission as to a material fact will constitute grounds for immediate dismissal or rejection of my application. I also understand that any false statement made herein may be punishable by law (U.S. Code, Title 18, Section 1001).</p>			
<p>DATE OF SIGNATURES <i>September 5, 1961</i></p> <p>SIGNED AT (City and State) <i>Washington, District of Columbia</i></p>		<p>SIGNATURE OF APPLICANT <i>Daniel Flores</i></p> <p>SIGNATURE OF WITNESS <i>Lawrence Coolidge</i></p>	
<p>NOTE: Use the following space for extra details. Reference each continued item by section and item number to which it relates. Sign your name at the end of the added material. If additional space is required use extra pages the same size as this page and sign each such page.</p>			
<p>MARITAL STATUS: Item #4, Section XII September 1, 1956 to October 6, 1956. Married to Lt. Col. <input type="text"/> <input type="text"/> in Portland, Oregon, by Circuit Court Judge. Used name of Moran until November 14, 1960, when changed to Flores.</p> <p>FATHER-IN-LAW: Item #5, Section XVII Short name for Raymond</p> <p>GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL: Item #1, Section VI</p> <p>Argentina 2 July 1959 to 3 July 1959 Travel</p> <p>Panama 10 November 1958 to 13 November 1958 Travel</p> <p>SEE ATTACHED SHEET FOR PERTINENT INFORMATION RELATIVE TO STEP-MOTHER.</p> <p>Signed at Washington, D. C., this <u>7th</u> day of September, 1961.</p> <p style="text-align: center;"><i>Daniel Flores</i> Daniel Flores</p>			

ATTACHMENT TO FORM NO. 444 - PERSONAL HISTORY STATEMENT

Section XV - STEPMOTHER

Full name: Concepcion R. Flores
Living: Yes
Other Names She Has Used: None to my knowledge
Current Address: 501 S. Guadalupe Street, San Marcos, Texas
Date of Birth: December 9, 1914
Place of Birth: Mexico
Citizenship: Mexican
If Born Outside U.S. - Date of Entry: December 8, 1922
Place of Entry: Unknown
Former Citizenships: None
Occupation: Homemaker and Missionary
Present Employer: Mexican Baptist Church, San Marcos, Texas
Never served in Military or other Government service to my knowledge.

This paper is attached to and hereby made a part of Form No. 444.


Daniel Flores

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 19 January 1962

YOUR REFERENCE: 07100 OPEER

CASE NO. : 195221

TO : Director of Personnel

FROM : Director of Security

SUBJECT : FLORES, Daniel

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

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

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

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

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

A personal interview is not necessary.

FOR THE DIRECTOR OF SECURITY:

W. A. Osborne
Chief, Personnel Security Division

OFFICE OF PERSONNEL SECURITY

2/1/62
to Mr. Tolson
See Serial 1173
AJ