

~~SECRET~~ (When filled in)

PLEASE RETURN TO CI WHEN COMPLETED.

201-274130

03

DATE: [Redacted]

NAME: JOHN -

LAST NAME: LUIS CONTE AGUIERO

DATE CONTACT ESTABLISHED: 12 MAY 1960

HOW CONTACTED: THROUGH CO JOSEPH VIDAL

TYPE OF TEST: ALPHABET TEST

WHERE TESTED: WASH. D.C. COVERT TESTING SITE

TEST CENTER COVER: US. GOVERNMENT

Case Officer Estimate of Acceptance of Subject: Subj. Believes STATE DEPT. COVERTLY POSSIBLY CIA

Other Present: JOSEPH VIDAL - CO
03 [Redacted] - INTERPRETER

Officers Knowledgeable of Relationship: -

Case Officer Estimate of His Personal Knowledge: ADEQUATE FOR Psy. TESTING.

Name Branches Under: -

Clearance Required and Obtained: -

Appropriate Security Clearance Required: (TESTING SITE HAS SINCE BEEN CHANGED)

Was Contact Given Branch Sterile Phone Number: YES _____ NO _____

IF SO, WHAT NUMBER: _____ (In addition please fill out telephone number card and attach)

RETURN TO CIA
Background Use Only
Do Not Reproduce