

SECRET
(When Filled In)

9-28-49

| PROCESS SHEET FOR DOMESTIC CONTACT SERVICE COLLECTIONS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---|--------------|----|----|----|----|----------------|---------------------------|----|-----------|----|-----|---------------------------|-----|----|---------------------------------|----|----|-------------------------------------|----|----|-----|----|----|--------------|----|----|-----------------------|----|----|--|
| FOR FIELD USE ONLY | | | | | | | | | | FOR HEADQUARTERS USE ONLY | | | | | | | | | | | | | | | | | | | | | | | |
| A. FIELD OFFICE | | | | B. REC. CODE | | | | | C. CASE NUMBER | | | FORWARDED | | | REPORT NO. | | | J U O | | | | | | | | | | | | | | | |
| 1 | 2 | 3 | 4 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | MO. | DA. | YR. | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | |
| X | N | I | M | 00 | 00 | | | | 5 | 8 | 0 | 0 | 1 | 0 | 6 | 1 | 3 | 2 | 1 | 6 | 2 | 6 | 5 | 7 | 2 | | | | | | | 2 | |
| D. SUBJECT AND AREA Possible Cover Support (Halt) | | | | | | | | | | | | | | | EXTRA DISSEM. RECORD | | | RELEASED | | | | | | | | | | | | | | | |
| E. CONTACT (Name, Title, Organization, Address) Joseph R. MEBOLA GORDON COOPER ASSOCIATES Hangar One, Opa-Locka Airport Opa-Locka, Florida | | | | | | | | | | | | | | | INDIVIDUAL NO. | | | 45 TYPE OOE | | | 46 * NOT DISSEMINATED | | | | | | | | | | | | |
| F. SOURCE (Name, Title, Organization, Address) Same | | | | | | | | | | | | | | | ORGANIZATION NO. | | | SUBJECT | | | AREA | | | | | | | | | | | | |
| G. SUB-SOURCE (Name, Title, Organization, Address) | | | | | | | | | | | | | | | INDIVIDUAL NO. | | | 5 S O C | | | 4. OTHER/MISC | | | | | | | | | | | | |
| H. METHOD OF COLLECTION | | | | | | | | | | | | | | | EVALUATION REQUESTED FROM | | | USSR ONLY EXCHANGES (CHECK ONE) | | | RESPONSIVE TO SPECIFIC REQUIREMENTS | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> INTERVIEW <input type="checkbox"/> TRIP REPORT <input type="checkbox"/> OTHER DOCUMENT <input type="checkbox"/> OTHER (specify below) | | | | | | | | | | | | | | | NO | | | TO USSR | | | FROM USSR | | | | | | | | | | | | |
| I. DIRECTED TO | | | | | | | | | | | | | | | ALIEN | | | OSS | | | SOV | | | INT | | | CASE OFFICER | | | HEADQUARTERS COMMENTS | | | |
| FIELD COMMENTS: Army report A FINE LEAD [Signature] | | | | | | | | | | | | | | | L Grant | | | [Signature] | | | CCS/CCB MAC PHEE 1-014C | | | | | | | | | | | | |
| J. DIVISION/STAFF/DESK | | | | | | | | | | | | | | | [Signature] | | | [Signature] | | | OSS | | | | | | | | | | | | |

FORM 7-69 25

USE PREVIOUS EDITIONS

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

2

(20-41)