

ACTION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 27 July 1973	FILE NO. 2500 <i>7642</i>
<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP	SS NUMBER 391-24-4032		
<input checked="" type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	EMPLOYEE NUMBER 024345 <i>OS# 40696</i>		
<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 1322 dated 7 Jun 73		<input type="checkbox"/> DISCONTINUED	
SUBJECT PHILLIPS, DAVID A.	UNIT Department of State		

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 EFFECTIVE DATE:
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE BOD	SUBMIT FORM 3254 TO BE ISSUED (HBB 20-11)
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY (HBB 20-7)
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY III	EAA: CATEGORY 5 CATEGORY 11
<input checked="" type="checkbox"/> SUBMIT FORM 3254 State W-2 TO BE ISSUED. (HBB 20-11)	RETURN ALL OFFICIAL DOCUMENTATION TO COS
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-2e)	SUBMIT FORM 2688 FOR HOSPITALIZATION CARD

DO NOT WRITE IN THIS BLOCK

<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-2e)
<input checked="" type="checkbox"/> EAA: CATEGORY 7 CATEGORY 11
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR AGE HOSPITALIZATION CARD

REMARKS AND/OR COVER HISTORY

JAN 53-54 [redacted] NOC 16-23
MAY 54-FEB 56-NEW YORK/NOC
FEB 56-APR 57-HAVANNA/NOC
APR 57-JUL 58 [redacted] NOC 12-18
AUG 58-MAR 60-HAVANNA/NOC
MAR 60-22 AUG 61-HQS/NOC
23 AUG 61-JUL 65-MEXICO/STATE INT
JUL 65-JUN 67 [redacted] STATE INT 16-10
JUN 67-JUN 70-HQS/STATEINT
JUN 70-14 JUN 73 [redacted] STATE INT

DISTRIBUTION: 15 JUN 73-21 JUL 73-HQS/
COPY 1 - CD OR CPD STATE INT
COPY 2 - OPERATING COMPONENT
COPY 3 - OS/SR&CD 22 JUL 73-HQS/STATE NOM
COPY 4 - OL/TFB
COPY 5 - CCS-FILE EBP:BB

James H. Franklin
CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF