

SECRET

REQUEST FOR APPROVAL OR INVESTIGATIVE ACTION <i>(Always handcarry 1 copy of this form)</i>		DATE 17 October 1961 03
TO:	<input checked="" type="checkbox"/> CI/Operational Approval and Support Division	FROM
	Security Support Division/Office of Security	WV/ops support 2712 Qtrs Eye
SUBJECT: Joaquin ODOY y Solis <i>NR</i>		PROJECT JMATE
CRYPTONYM, PSEUDONYM, AXA OR ALIASES AMRAZZ-1		CI/OA FILE NO.
		RI SCI FILE NO.
		SO FILE NO.
1. TYPE ACTION REQUESTED		
<input checked="" type="checkbox"/>	PROVISIONAL OPERATIONAL APPROVAL	PROVISIONAL PROPRIETARY APPROVAL
	OPERATIONAL APPROVAL	PROPRIETARY APPROVAL
	PROVISIONAL COVERT SECURITY APPROVAL	COVERT NAME CHECK
	COVERT SECURITY APPROVAL	SPECIAL INQUIRY (SO field investigation)
	COVERT SECURITY APPROVAL FOR LIAISON WITH U.S. OFFICIALS	
2. SPECIFIC AREA OF USE Miami, Fla.		
3. FULL DETAILS OF USE To act as contact between WAVE and MKP XXXXXXXXXXXXXXXXXXXX Local ODENVY traces requested (IN 46759 WAVE 8530)		
4. INVESTIGATION AND COVER		
A. U.S. GOVERNMENT INTEREST MAY BE SHOWN DURING INVESTIGATION?		YES NO <input checked="" type="checkbox"/> <input type="checkbox"/>
B. CIA INTEREST MAY BE SHOWN DURING INVESTIGATION?		YES NO <input type="checkbox"/> <input checked="" type="checkbox"/>
C. IS SUBJECT AWARE OF U.S. GOVERNMENT INTEREST IN HIM?		YES NO <input checked="" type="checkbox"/> <input type="checkbox"/>
D. IS SUBJECT AWARE OF CIA INTEREST IN HIM?		YES NO <input type="checkbox"/> <input checked="" type="checkbox"/>
E. INDICATE ANY LIMITATIONS ON COVERAGE IN THE INVESTIGATION OF SUBJECT. None		
F. SUGGEST "COVER PRETEXT" TO BE USED IN CONDUCTING PERSONAL INVESTIGATION OF SUBJECT.		
IF NO INVESTIGATION OUTSIDE CIA. EXPLAIN FULLY		
5. PRO AND GREEN LIST STATUS		
<input checked="" type="checkbox"/>	PRO I, OR EQUIVALENT IN (2) COPIES ATTACHED	PRO II WILL BE FORWARDED
	PRO II, OR EQUIVALENT, IN (1) COPY ATTACHED	<input checked="" type="checkbox"/> GREEN LIST ATTACHED, NO: 115433
6. RI TRACES		
<input checked="" type="checkbox"/>	NO RECORD	WILL FORWARD
		NON-DEROGATORY
		DEROGATORY ATTACHED
7. DIVISION TRACES		
<input checked="" type="checkbox"/>	NO RECORD	WILL FORWARD
		NON-DEROGATORY
		DEROGATORY ATTACHED
8. FIELD TRACES		
	NO RECORD	<input checked="" type="checkbox"/> WILL FORWARD as derog info found on unale
	NO DEROGATORY INFO.	DEROGATORY ATTACHED
LIST SOURCES CHECKED		
NOT INITIATED (Explain)		
SIGNATURE	EXTENSION	DATE
<i>[Signature]</i>	8564	

FORM 772 USE PREVIOUS EDITIONS

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(8)

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SECRET

PRO PART I

Name: Joaquin GODOY y Solis
DOB: 13 March 1927
POB: Havana, Cuba
Citizenship: Cuban
Address: 133 San Sebastian Street, Coral Gables, Florida
Spouse: Celia Puig Miyar, residing at same address as subject.
Mother: Adolfinia Solis Alonso, Calle 11 #1101 14 y 16, Vedado, Havana, Cuba
Father: Joaquin Godoy Larranaga (deceased)
Political status: Subject elected as second member of an MRP coordinating committee for Miami.

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ROUTING AND RECORD SHEET

SUBJECT: (Optional)				
FROM: WH/4/Ops Spt 2712 Qtrs Eye			NO.	
			DATE 23 October 1961	
TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS	COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)
	RECEIVED	FORWARDED		
1. CI/OA Attn: Mr. Kohler 1411 J Bldg				
2.				
3.				
4.				
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15.				

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