

FEDERAL BUREAU OF INVESTIGATION
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF OFFICERS

FILE TITLE/NUMBER/VOLUME:

INCLUSIVE DATES: 10 July 1951 - 9-26-1972

CUSTODIAL UNIT/LOCATION: OP

ROOM: 5E13

DELETIONS, IF ANY: _____

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

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

SECRET

Personnel Actions
After Mexico City Assignment

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 11 SEPTEMBER 1963	
1. SERIAL NUMBER <input type="text"/>		2. NAME (Last-First-Middle) <input type="text"/>			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 15 63		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V		V TO CF CF TO CF		7. COST CENTER NO. CHARGE-ABLE L135-5700-1000	
8. ORGANIZATIONAL DESIGNATIONS DDP NH BRANCH 3 MEXICO, MEXICO STATION CITY			9. LOCATION OF OFFICIAL STATION MEXICO, MEXICO		
10. POSITION TITLE OPS OFFICER			11. POSITION NUMBER L18		12. CAREER SERVICE DESIGNATION D
13. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		14. OCCUPATIONAL SERIES 0136.01		15. GRADE AND STEP 12	
16. SALARY OR RATE 9290					
17. REMARKS FROM: DDP/NH/L00/MEXICO STATION					
Recorded by GSPD <i>Lhr</i>					
DATE SIGNED 9/12/63		SIGNATURE OF OFFICER <i>[Signature]</i>		DATE SIGNED 13 Sep 63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
18. ACTION CODE	19. EMPLOY. CODE	20. OFFICE CODING NUMERIC ALPHABETIC	21. STATION CODE	22. INTER-STATE CODE	23. N. Y. S. DATE OF BIRTH
37	10	100/WH	15075	3	MO. DA. YR.
24. NTE EXPIRES	25. SPECIAL REFERENCE	26. RETIREMENT DATA	27. SEPARATION DATA CODE	28. CORRECTION/CHANGE/LOCATION DATA	29. SECURITY REQ. NO.
MO. DA. YR.		1 - CSC 2 - FICA 3 - NONE			
30. VET. PREFERENCE	31. SERV. COMP. DATE	32. LONG. COMP. DATE	33. CAREER CATEGORY	34. FECA / HEALTH INSURANCE	35. SOCIAL SECURITY NO.
CODE	MO. DA. YR.	MO. DA. YR.	CAREER/PROB/TEMP	CODE	
0 - NONE 1 - 5 YR. 2 - 10 YR.				0 - NONE 1 - YES	
36. PREVIOUS GOVERNMENT SERVICE DATA		37. LEAVE CAT. CODE	38. FEDERAL TAX DATA		39. STATE TAX DATA
CODE			FORM EXECUTED	MO. TAX EXEMPTIONS	FORM EXECUTED
0 - NO PREVIOUS SERVICE 1 - NO GROSS IN SERVICE 2 - GROSS IN SERVICE (LESS THAN 3 YRS) 3 - GROSS IN SERVICE (MORE THAN 3 YRS)			1 - YES 2 - NO		1 - YES 2 - NO
40. POSITION CONTROL CERTIFICATION			41. D.P. APPROVAL		DATE APPROVED
29/18/63			<i>[Signature]</i>		17 Sep 63

SECRET
(When Filled In)

77A

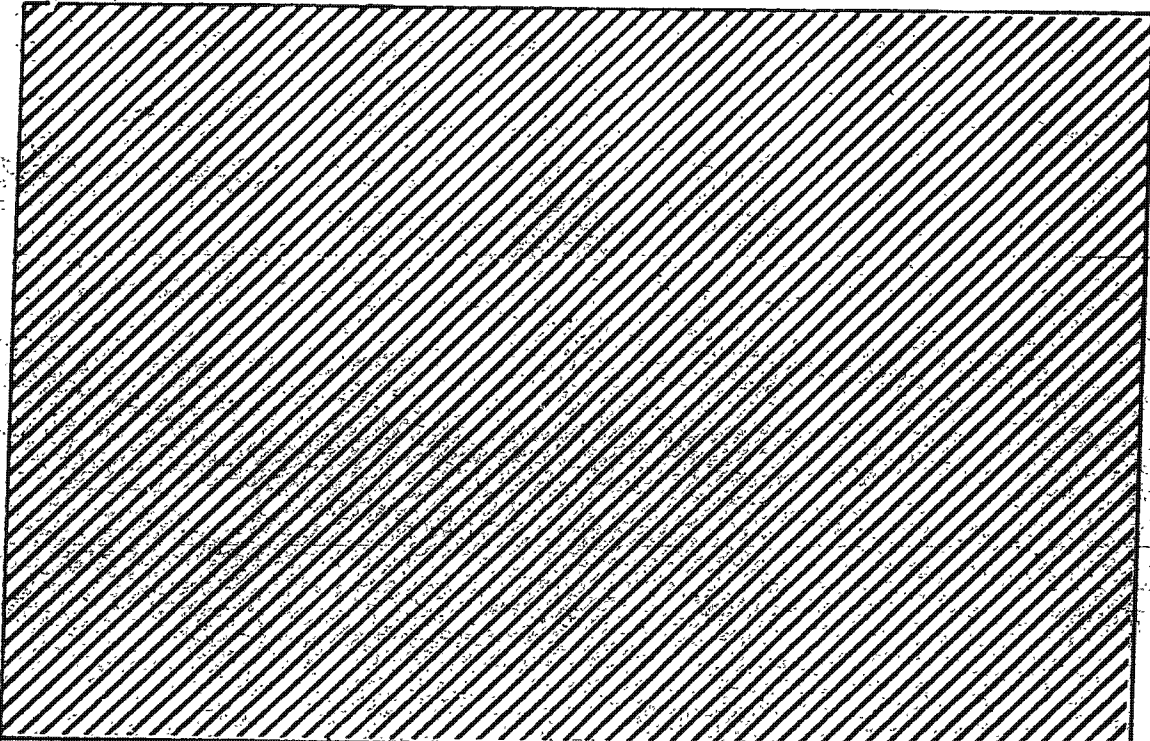
REQUEST FOR PERSONNEL ACTION					DATE PREPARED 17 JULY 1963				
1. SERIAL NUMBER XXB		2. NAME (Last-First-Middle)							
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 09 63		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 4135-5700-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
CF TO V		XX		CF TO CF					
9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3 MEXICO, MEXICO STATION City					10. LOCATION OF OFFICE STATION MEXICO, MEXICO City				
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 400		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 2		17. SALARY OR RATE \$ 9790			
18. REMARKS FROM: DDP/FE [redacted] Tray 27 1 COPY TO FINANCE DIVISION AND OFFICE OF SECURITY [redacted] Recorded by CSPD EJP									
[redacted]			DATE SIGNED 7/18/63		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [redacted]			DATE SIGNED 23 July 63	
C/WH/PERS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING SUPERVISOR 64700 WH		22. STATION CODE 45015	23. INT/OFF CODE	24. # OF POS CODE 3	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF DEPT MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. VTE EXPIRES MO. DA. YR.	29. SPEC. A. REFERENCE	30. REASSIGNMENT DATA 1 - CSC 2 - FICA 3 - NONE		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REG. NO.	34. SER	
35. VET. PREFERENCES CODE 0 - NONE 1 - 5 YR 2 - 10 YR		36. DEPT. COMP. DATE MO. DA. YR.	37. LONG. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CAREERS - CODE PROV/TEMP		39. REG. / HEALTH INSURANCE CODE 0 - WAIVER 1 - YES		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - 90 DAYS IN SERVICE 2 - MORE IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)			42. LEAVE CAT. CODE	43. FED. TAX DATA FORM PREVIOUS CODE 1 - YES 2 - NO		44. STATE TAX DATA FORM PREVIOUS CODE 1 - YES 2 - NO		45. STATE TAX DATA CODE NO. TAX STATE CODE	
46. POSITION CONTROL CERTIFICATION 07/25/63					47. O.P. APPROVAL			DATE APPROVED 23 July 63	

SECRET

30 cm

Jr

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(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
[Redacted]	<i>Wife - German</i>	<i>63-097</i>

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 *23 Nov 62*. *Ruptured muscles*

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 <i>3 MAY 1963</i>	SIGNATURE OF BSD REPRESENTATIVE <i>B. De Felice</i>
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NOTICE OF OFFICIAL DISABILITY CLAIM FILE

Personnel Actions
prior to Mexico City
Assignment

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REPRODUCTION MASTERS

BIOGRAPHIC PROFILE

SECRET

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

CONFIDENTIAL

(When Filled In)

NOTICE OF CREDITABLE SERVICE

[FOR LEAVE PURPOSES]

PREPARE IN ORIGINAL FROM STANDARD FORM NO. 144 AND FORWARD TO FINANCE OFFICE.

NAME (Last, First, Middle)

~~██████████~~ (P)

OFFICE (and Division)

File & mail
POSTAL
Or 4b

DDP/WH

SERVICE COMPUTATION DATE:

24 Dec 1948

2 March 1953

SIGNATURE DA

JOHN L. BISCHOPP, Chief/SCAFS

CHIEF, TRANSACTIONS AND RE. BRANCH

FORM NO. 37-157
1 MAR 54

CONFIDENTIAL

(4)

ORIGINAL BIOGRAPHIC PROFILE

(sanitized version in file)

Personnel Actions After
Mexico City Assignment

WH

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1956; SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
[REDACTED]	[REDACTED]	91	700 CF	GS 12 3	\$10,105	\$10,640

POSTED ON
01-40
8 JAN 1964

WH-2

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
[REDACTED]		[REDACTED]		64 700 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EH Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	2	\$ 9,790	11/29/62	GS 12	3	\$10,105	11/24/63			
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: <i>JWH</i>						DATE: 7 Oct 1963				
PAY CHANGE NOTIFICATION										

DLS: 13
KX SEPT 63

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(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
NCB															
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)													
		[REDACTED]													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT						09 15 63		REGULAR							
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
CP TO V		X		CP TO CP		4135 5700 1000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDP/WH BRANCH 3 MEXICO CITY, MEXICO STATION						MEXICO CITY, MEXICO									
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER						0418		D							
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE							
GS			0136.01			12 2		9790							
18. REMARKS															
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED BY 07-45 [Signature] </div>															
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. MONTHS Code	25. DATE OF BIRTH			26. DATE OF GRADE		27. DATE OF SER			
37	10	51400	WH	45075	3		MO	DA	YR	MO	DA	YR	MO	DA	YR
29. HIE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.		34. SEX					
NO DA YR			1 - CSC 2 - PICA 3 - NONE		CODE	TYPE MO DA YR		EQD DATA							
35. VEI 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		MO DA YR		MO DA YR		CAN PROG TEMP CODE CODE 0 - WAIVER 1 - YES		HEALTH INS CODE					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.		43. FEDERAL TAX DATA		44. STATE TAX DATA							
CODE				CODE		FORM EXECUTED CODE NO TAX EXEMPTIONS		FORM EXECUTED CODE NO TAX EXEMPTIONS							
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)						1 - YES 2 - NO		1 - YES 2 - NO							
SIGNATURE OR OTHER AUTHENTICATION															
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 09/24/63 WK [Signature] </div>															

MHC: 31 JULY 63

SECRET
(When Filled In)

OCB NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT				06 09 63		REGULAR			
6. FUNDS		7. V TO V		8. V TO CF		9. LOST CARRIER NO. CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY	
CF TO V		X		CF TO CF		4135 5700 1000		50 USC 403 J	
11. ORGANIZATIONAL DESIGNATIONS					12. LOCATION OF OFFICIAL STATION				
DDP WH BRANCH 3 MEXICO CITY, MEXICO STATION					MEXICO CITY, MEXICO				
13. POSITION TITLE					14. POSITION NUMBER		15. SERVICE DESIGNATION		
OPS OFFICER					0400		D		
16. CLASSIFICATION SCHEDULE (GS, LB, etc.)			17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OR RATE		
GS			0136.01		12 2		9790		
20. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 08/02/63 [Signature] </div>									
21. ACTION CODE									
22. EMPLOY CODE									
23. OFFICE CODING									
24. STATION CODE									
25. IN/EGREE CODE									
26. MGR/CLER CODE									
27. DATE OF BIRTH									
28. DATE OF GRADE									
29. DATE OF LEI									
30. NTE EXPIRES									
31. SPECIAL REFERENCE									
32. RETIREMENT DATA									
33. SEPARATION DATA CODE									
34. CORRECTION/CANCELLATION DATA									
35. SECURITY REQ NO.									
36. SEX									
37. VET. PREFERENCE									
38. SERV. COMP. DATE									
39. LONG COMP. DATE									
40. CAREER CATEGORY									
41. FEGLI / HEALTH INSURANCE									
42. SOCIAL SECURITY NO.									
43. PREVIOUS GOVERNMENT SERVICE DATA									
44. LEAVE CAT									
45. FEDERAL TAX DATA									
46. STATE TAX DATA									
47. SIGNATURE OF OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 08/02/63 [Signature] </div>									

317/543
[Signature]

A. Fitness Reports covering period after
Mexico City Assignment

B. Personnel Actions for period prior
to Mexico City Assignment

SECRET

(When Filled In)

FITNESS REPORT

EMPLOYEE SERIAL NUMBER

SECTION A

GENERAL

1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		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"/> 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)		
December 1964			1 Jan 1964 - 22 November 1964		

SECTION B

PERFORMANCE EVALUATION

- 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.
- A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.
- P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.
- 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
Case Officer for Soviet access agents.	P
SPECIFIC DUTY NO. 2	RATING LETTER
Analyst work, preparing Soviet personality reports. ✓	S
SPECIFIC DUTY NO. 3	RATING LETTER
Transcription into English of Russian technical product, and preparation of interpretative renditions of same when necessary.	O
SPECIFIC DUTY NO. 4	RATING LETTER
SPECIFIC DUTY NO. 5	RATING LETTER
SPECIFIC DUTY NO. 6	RATING LETTER

POSTED ON
7 JAN 1965

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.

7 JAN 1965

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. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u> As explained in the previous fitness report, Subject was assigned to the Station for the purpose of taking charge of the Station's joint telephone tap center, a position for which he was and is eminently qualified by reason of extensive experience and outstanding language qualifications. However, this position did not materialize because of circumstances beyond the control of Subject and the Station.</p> <p>It was therefore subsequently decided to train Subject locally, and have him gradually assume case officer and analyst responsibilities in certain simpler aspects of the Station's Soviet program.</p> <p>Given the circumstances that Subject had not had prior case officer or analytical experience (or even any substantial past exposure to operations to give him vicarious experience) he progressed more than adequately in absorbing the training offered, in assuming responsibility for two Soviet operations and in the preparation of analytical studies on the Soviet complement. Given the further circumstances that the Station did not have the time to train him more than superficially, and that the operations he handled were basically uncomplicated, it must be stated that Subject cannot now be considered to be a case officer.</p> <p>This conscientious and intelligent officer has high interest and enthusiasm for operations, but it is believed that his forte and future lies in the management of technical operations. This has been recognized also by Headquarters in the assignment presently planned for him.</p> <p>As a staff agent [redacted] he and his family adapted themselves remarkably well to the [redacted] situation and to all other environmental factors.</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		
23 November 1964	[redacted]		
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	
23 November 1964	Ops Officer	s/ Herbert Manell	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
23 November 1964	COS	s/ Winston K. Scott	

SECRET

SECRET
(When Filled In)

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FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
[REDACTED]			6 Jan 1912	M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Operations Officer			DDP WH []		Mexico City		
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 checked="" 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)			
28 February 1964				6 August 1963 - 31 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						RATING LETTER	
Translation of Russian and Spanish materials.						S	
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 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	
14 FEB 1964						S	

POSTED ON
17 Feb 64

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

OFFICE OF OPERATIONS

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.

Feb 13 1 26 PM '64

From the time of Subject's arrival in Mexico and through all December 1963, he was utilized principally in translation work and was held on tap for the position of heading up the Station's joint telephone tap center. Circumstances beyond the control of the Station and Subject are responsible for the fact that the incumbent in charge of the center will continue these duties and Subject will be given other responsibilities.

Primarily, Subject will be trained to handle analyst and case officer responsibilities in the Soviet field. The level and range of the responsibilities will depend on the progress Subject makes in handling these duties in a manner satisfactory to the Station.

Subject is most conscientious and effective in every assignment given him to date, and the Station is extremely pleased to have him available as an outside Station asset. He is enthusiastic about all his work, including certain part-time routine and arduous duties, and he looks forward with confidence to the prospect of becoming a case officer. Although it is premature to state positively that Subject will succeed as a case officer, the supervisor believes that Subject will undoubtedly progress adequately.

Subject and his family have acclimated themselves excellently to the [redacted] situation, faster than most of the Station's other staff agents, and certainly with fewer problems and requests for guidance from the Station's staff.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 29 January 1964	SIGNATURE OF EMPLOYEE [Redacted Signature]	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 29 January 1964	OFFICIAL TITLE OF SUPERVISOR Operations Officer	TYPED OR PRINTED NAME AND SIGNATURE /S/ Herbert Lanell
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE 29 January 1964	OFFICIAL TITLE OF REVIEWING OFFICIAL Chief of Station	TYPED OR PRINTED NAME AND SIGNATURE /S/ Winston M. Scott

SECRET

Pre 1961 Fitness Reports
and other personnel
documents