

STANDARD FORM 66
October 1966
FURNISHED BY U. S. CIVIL SERVICE COMMISSION
Federal Personnel Manual B-4
50-101

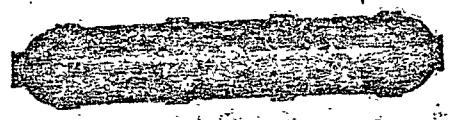
SECRET

Official Personnel Folder

SECRET, y

448919

RETURN TO: PERSONNEL & RECORDS CENTER
IMMEDIATELY AFTER USE
JOB 70-374 BOX 23



67 JUL 1966

NOEL, JAMES A.

QUALIFICATIONS

21 May

term
8-3-68
70-274
A-23

Mr. James A. Noel
2057 Flying Hills Lane
El Cajon, California 92020

Dear Mr. Noel:

I am very pleased to forward to you your Letter of Commendation from Mr. Helms and your Certificate of Retirement.

Your service medallion has been ordered and, of course, will be sent to you as soon as it is received from the engraver. You should have it in approximately ten weeks.

Sincerely,

F. W. M. Jannoy
Director of Personnel

- Enclosures
- Distribution:
- 0 - Addressee
- ✓ 1 - OPF
- 1 - D/Pers
- 1 - ROB Soft File
- 1 - ROB Reader

GIA Letterhead

OP/RAD/ROB/ [] gln 14 May 1975

5:206

Post Office Box 1925
Washington, D. C. 20013

21

Mr. James A. Neel
2057 Flying Hills Lane
El Cajon, California 92020

Dear Mr. Neel:

I am responding to your letter of 27 November addressed to
Mr. John F. Blake, former Director of Personnel.

Your request that your Certificate of Retirement and your
Letter of Commendation from the Director be released to you was
given very careful consideration. I am most sorry to advise that
circumstances still prevail which preclude their release.

Sincerely,

F. W. M. Janney
Director of Personnel

- Distribution:
- 0 - Addressee
 - 1 - D/Pers.
 - 1 - OPF
 - 1 - ROB Soft File
 - 1 - ROB Reader

OP/RAD/ROB/ [] ,18 December 1973)

SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM			
UNCLASSIFIED		CONFIDENTIAL	SECRET
OFFICIAL ROUTING SLIP			
TO	NAME AND ADDRESS	DATE	INITIALS
1	CCS/CSB Mr. Biladeau CH-44 Hqs	7 Dec	[Signature]
2			
3			
4	ROB/Elema		
5	205 Magazine		
6			
ACTION		DIRECT REPLY	PREPARE REPLY
APPROVAL		DISPATCH	RECOMMENDATION
COMMENT		FILE	RETURN
CONCURRENCE		INFORMATION	SIGNATURE
Remarks:			
<p>Dick:</p> <p>Would you please take another look at this one to see if we might now release letter and certificate.</p>			
[Redacted Signature]			
FOLD HERE TO RETURN TO SENDER			
FROM: NAME, ADDRESS AND PHONE NO.			DATE
ROB, 205 Magazine, x2847			12/5/73
UNCLASSIFIED		CONFIDENTIAL	SECRET

2057 Flying Hills Lane
El Cajon, Calif., 92020

November 27, 1973

Mr. John F. Blake
Director of Personnel
Central Intelligence Agency
Washington, D.C., 20505

Dear Mr. Blake:

I am writing to you personally and directly at the suggestion of my old friend and new neighbor, Don Marelius.

As the records will show I retired in the spring of 1971 after 40 years of Federal service 27 of which were with the Agency and predecessor organizations. At the time of my retirement a small ceremony was held, presided over by Mr. Tom K., and I was shown various items attesting to my length of service, dedication to duty, etc. However, I was not permitted to take these items with me due to certain considerations which I admit have never been quite clear to me. I was told informally in the division that perhaps after a year the items would be forwarded to me. It will soon be three years and I have not yet received them.

I am sure I don't need to tell you how much these items mean to me and what they will mean to my sons in later years. Therefore I would appreciate hearing from you as to the status of these items. I am sure there are many other fellows in the same boat.

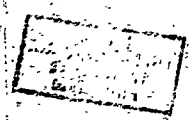
Anxiously awaiting your reply, I am

Sincerely,



James A. Noel

DISPATCH		CLASSIFICATION S E C R E T	PROCESSING ACTION
TO Chief, [redacted]			<input type="checkbox"/> MARKED FOR INDEXING
INFO			<input checked="" type="checkbox"/> NO INDEXING REQUIRED
FROM Chief of Base, Los Angeles			<input type="checkbox"/> ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT ISOLOG/ADMIN - Retirement Letter & Certificate - [redacted]			<input type="checkbox"/> MICROFILM
ACTION REQUIRED - REFERENCES			
<p>Action: For your retention Ref: USLS-416, dated 8 November 1971</p> <p>Forwarded under separate cover is the retirement letter and certificate of [redacted] as seen these documents and they are being returned per Reference instructions.</p> <p>[redacted]</p> <p>Attachment: Letter & Certificate u/s/c</p> <p>Distribution: 3-C, [redacted] w/att u/s/c</p>			
CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER USLT-431	DATE 21 March 1972	
	CLASSIFICATION S E C R E T	FILE NUMBER	



August 25, 1971

Dear Tom -

I am taking advantage of Gene's coming visit to Washington to send you this little note.

We will be moving to the San Diego area the end of this month and hoped to be settled into our new home there by the time mid-September rolls around.

Tom, you will recall that at the time of my retirement you presented me with a letter from Dick, a certificate of service, and (I understood) a silver medallion. All of these items were then returned to be safely stored away until some future date - not specified. I am sure you can appreciate that these items mean an awful lot to me - and eventually will mean a lot to my two sons. I realize and appreciate the need, [redacted] for discretion with respect to displaying these items to friends, etc. At the same time I realize that as the years pass the chances of these items getting "lost" or falling between the chairs back home is very good. I do not want to lose them and it goes without saying that I would honor any restrictions that might be imposed in the event they are sent to me. The outfit in past years has entrusted me with top secrets, with the management of unvouchered funds, with details of sensitive operations. Surely it can now trust me to use intelligent discretion in the safeguarding of these items I write about. I would appreciate it Tom if you would take this request into careful consideration.

When I saw you last in Washington you promised one day you would be making a trip out to San Diego. I am holding you to that and hope it will be soon.

Lillian joins me in sending you our warmest regards. Don't forget - wherever I am you and the outfit have a sincere friend who is prepared to help out to the best of his ability.

Sincerely,



James A. Noel

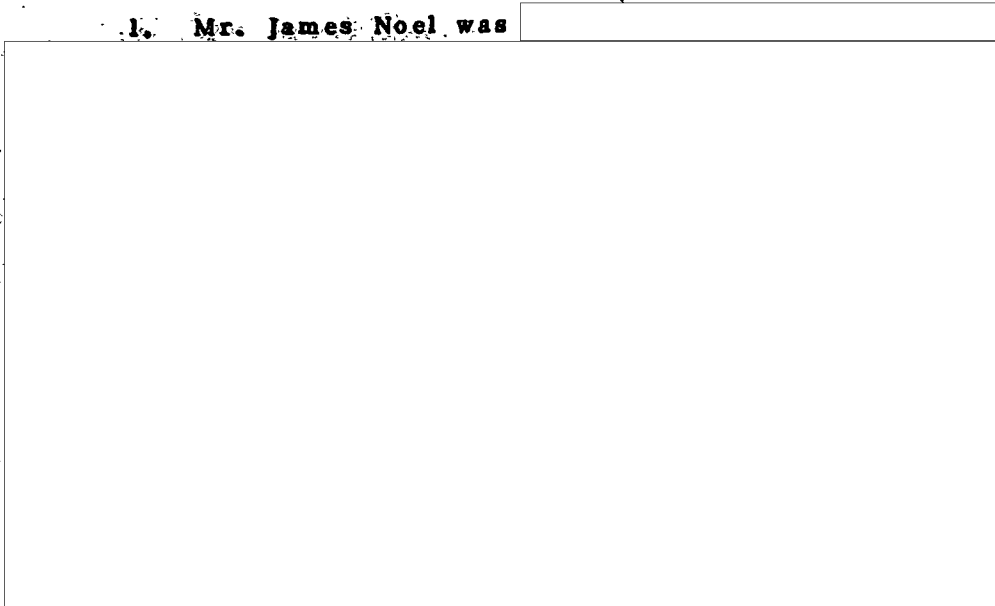
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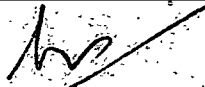
14 September 1971

MEMORANDUM FOR: SA/ADDP

SUBJECT: Mr. James A. Noel

1. Mr. James Noel was




ERICH W. ISENSTEAD
Chief, Central Cover Staff

SECRET

Mr. James A. Noel
1807 Sébastian Drive
Burlingame, California 94010

71-1477
20 MAR 1971

Dear Jim:

As you reach the end of your active career of Government service, I want to join your friends and colleagues in wishing you continued success and satisfaction in your retirement.

You have been privileged to face the challenge of important responsibilities during your more than forty years of service to your country. The success with which you have met this challenge should be a source of lasting pride and satisfaction to you.

May I extend to you, personally and officially, my sincere appreciation for the important work you have done and my warmest hopes that you will find full enjoyment in the years ahead.

Sincerely,

Richard Helma

Richard Helma
Director

Distribution:

0 - Addressee
1 - DDCI
1 - ER
1 - C/EAB/OS
1 - D/Pers
1 - OPF
1 - ROB
1 - ROB Reader

Originator:

1-2 MAR 1971
Harry B. Fisher
Director of Personnel

Telephone Concurrence

*Concur:

16 March 1971

C/EAB/OS

OP/RAD/ROE/ERanochak:sl (16 March 1971)

* May be shown to Subject but must be retained in Agency files.

UNITED STATES CIVIL SERVICE COMMISSION
WASHINGTON, D. C. 20415

FIR

REQUEST FOR OFFICIAL FILES

TO: National Personnel Records Center General Services Administration 111 Winnebago Street St. Louis, Missouri 63118	DATE 25 MAY 1970 6-5-70 INA: SNT
	FILE SSN: 083-36-2388 NAME N-400 NOEL, JAMES A.
	DATE OF BIRTH 19 MARCH 1911

Please furnish the following material, needed by the Commission for the purpose shown below. The bottom part of this form is for your use as a transmittal. This material will be returned to you as soon as it has served its purpose. Any material classified under E. O. 10501 should be safeguarded and transmitted in accordance with the requirements of that order.

MATERIAL REQUESTED:

- Official Personnel File
- Abstract of Federal Employment from Official Personnel File
- Copies of any interviews held
- Copies of interrogatories and replies
- All copies of FBI reports of investigation (if you no longer employ this person, these reports will not be returned - See EPM Chapter 736, Subchapter 5)

PURPOSE:

- Request for consideration under C.S. Regulation 731.401
- Request for consideration under C.S. Regulation 732.401
- To answer Congressional or other correspondence
- For use in considering pending application for examination
- Special Request
 Chief, Division of Adjudication and Appraisal

[Redacted Signature]

on, Director
 Personnel Investigations

TO: Division of Adjudication and Appraisal
 Bureau of Personnel Investigations
 U. S. Civil Service Commission
 Washington, D. C. 20415

The material indicated below is attached as requested.

- Official Personnel File
- Abstract of Federal Employment
- Copies of any interviews held
- Copies of interrogatories and replies
- All copies of FBI reports of investigation

REMARKS:

[Redacted Remarks]

6-18-70

DATE 25 MAY 1970	SIGNATURE	OFFICIAL TITLE PERSONNEL
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SECRET

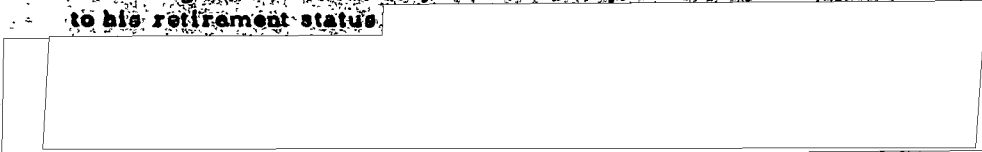
27 April 1970

MEMORANDUM FOR: Chief, Retirement Affairs Division

SUBJECT : Mr. James A. Noel

REFERENCE : Dispatch - USFT-1584, 19 March 1970

1. Attached is a copy of a dispatch from subject, now a career agent - in which he poses certain questions with respect to his retirement status.



2. Since subject's retirement plans are directly involved with the service claimed, it would be appreciated if his records could be checked. Perhaps the Records Center could be checked.

(signed) Virginia C. Lynch
Virginia C. Lynch
Chief, DO Personnel & Training

Attachment: As Stated

SECRET

DISPATCH

SECRET

Chief, [redacted]

Chief of Base, San Francisco

130000/10010

Retirement Plans - [redacted]

REF: US73-860, 26 February 1970

1. Reference has been seen and noted by [redacted] and Headquarters' offer to assist him in programming his retirement is greatly appreciated.

2. There is a matter in which Headquarters could be of assistance and which, conceivably, could influence a decision on the part of [redacted] to retire before he reaches his 60th birthday in March 1971. It is this: [redacted] resigned from [redacted] on 15 August 1954, to accept employment on 18 August 1954, with [redacted]. He had to his credit with [redacted] a considerable amount of annual and sick leave accrued over a period of about fourteen years. Due to regulations or practices in effect at that time he was not paid for his annual leave but was told that both the annual and sick leave balances would be held in escrow and if he returned to [redacted] employment in the future the credits would be reinstated. Years later [redacted] was being integrated into [redacted], he was told concerning the annual and sick leave credits and was assured by the [redacted] official handling the integration project that reinstatement of his leave could not be granted due to the fact that there had been a "break in the continuity of [redacted]'s government."

...Continued...

Distribution:

CROSS REFERENCE TO

DISPATCH SYMBOL AND NUMBER

DATE

USPT-1534

19 March 1970

CLASSIFICATION

FILE NUMBER

SECRET

CONTINUATION OF
DISPATCH

SECTION

service" as reflected by the papers submitted by Headquarters to LINGOLD in connection with the information process.

[redacted] has been in continual government service from 20 January 1901 to date without a single day's break in service, as his personnel record will disclose. He realizes, of course, that he has long lost his annual leave credit with LINGOLD and the lost annual leave is therefore not a matter of contention at this writing. However, he is most interested in now ascertaining whether the sick leave which he had to his credit when he resigned from LINGOLD in 1944 can be recovered and added to his sick leave balance now being held by WYCK. Since unused sick leave can now be used in computing longevity for retirement purposes, the recovery of this sick leave could play an important part in [redacted] retirement plans. Consequently, he would greatly appreciate it if the appropriate Headquarters officials would look into this matter at their earliest convenience.

3. [redacted] would also like to raise another matter relating to his service with LINGOLD. [redacted] served from October 1933 to July 1941 at Mazatlan, Mexico, which was then designated by the LINGOLD as an "unhealthy post" for retirement purposes. Each year of duty at an unhealthy post entitled the employee to one and one half years of credit for retirement purposes. [redacted] would appreciate learning whether his service at Mazatlan during the period mentioned would, under present rules, entitle him to extra retirement credit.

4. A ruling by Headquarters on the two points raised is respectfully requested.

William G. BOLAND
William G. BOLAND

Originated by [redacted]

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1 SERIAL NUMBER 055292		2 NAME (Last-First-Middle) NOEL JAMES A ✓			
3 NATURE OF PERSONNEL ACTION RESIGNATION			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 03 68		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CF TO V		V TO CF XX CF TO CF		7 FINANCIAL ANALYSIS NO CHARGEABLE 9129-0256	
9 ORGANIZATIONAL DESIGNATIONS DDP/DOD US FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE			10 LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIF.		
11 POSITION TITLE CHIEF OF BASE		12 POSITION NUMBER 0150	13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15 OCCUPATIONAL SERIES 0136.08	16 GRADE AND STEP 16 6		17 SALARY OR RATE \$ 26,640 ✓
18 REMARKS Subject is reemployable. 1815 H. ST. N.W. WASH., D.C.					
18A SIGNATURE OF REQUESTING OFFICER <i>Virginia C. Lynch</i> Virginia C. Lynch, C/DO Pers. & Training		DATE SIGNED	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>HB. Fisher</i>		DATE SIGNED 3 Aug 68
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE 45	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTELLIGENCE CODE
24 HQ/RTS CODE 2	25 DATE OF BIRTH MO. DA. YR. 03 19 11		26 DATE OF GRADE MO. DA. YR.		27 DATE OF LEI MO. DA. YR.
28 DATE EXPIRES MO. DA. YR.	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-CC 2-CPGN 3-FCR 4-NONE	31 SEPARATION DATA CODE 6L, 00, 7, 1	32 CORRECTION/CANCELLATION DATA EOD DATA →	
33 SECURITY REQ NO.	34 SEX	35 PFT PREFERENCE CODE 0-NONE 1-5 FT 2-16 FT	36 SERV COMP DATE MO. DA. YR.	37 LONG COMP DATE MO. DA. YR.	38 CAREER CATEGORY CODE 0-WAITER 1-YES
39 REG/HEALTH INSURANCE CODE 0-WAITER 1-YES	40 SOCIAL SECURITY NO.	41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE 2-SERIAL IN SERVICE (LESS THAN 3 YEARS) 3-SERIAL IN SERVICE (MORE THAN 3 YEARS)	42 LEAVE CAT. CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	
44 STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS	45 POSITION CONTROL CERTIFICATION	46 OP APPROVAL <i>HB. Fisher</i>	DATE APPROVED 6 AUG. 68		

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE 03 August (Date) FOR THE FOLLOWING REASON.

Justified

MY LAST WORKING DAY WILL BE--

DATE SIGNED

SIGNATURE OF EMPLOYEE

see attached

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

1815 H. St. NW
Washington DC

INSTRUCTIONS

Items 1 thru 7 and Items 9 thru 18a - The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains only to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

Regular
Part Time
Temporary
Temporary-Part Time

Summer
Detail Out
Detail In

WAE
Consultant
Military

PERSONAL AFFAIRS
BRANCH
OFFICE OF PERSONNEL
Aug 8 11 11 AM '68

Item 9 - "Organizational Designations" should show all levels of organization certifying the location of the position:

MAJOR COMPONENT (Director, Deputy Director, etc.)
Office, Major Staff, etc.
Foreign Field or U.S. Field (if pertinent)
Division or Staff (subordinate to first line)
Branch
Section
Unit

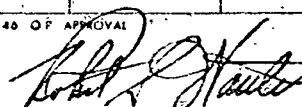
Items 11 and 15 - "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the gaining Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING- The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED					
						19 April 1968					
1 SERIAL NUMBER		2 NAME (Last-First-Initial)									
055292		NOEL, JAMES A. ✓									
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT					
REMOVAL FROM CIA RETIREMENT AND DISABILITY SYSTEM - VOLUNTARY				MONTH DAY YEAR 05 05 68		REGULAR					
6 FUNDS		7 FINANCIAL ANALYSIS NO CHARGEABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel)							
<input type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input checked="" type="checkbox"/> CF TO V <input checked="" type="checkbox"/> CF TO CF		8129-0256		PL 88-643 Sect. 203							
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION							
DDP/DOD				SAN FRANCISCO, CALIFORNIA							
11 POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION						
					D						
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE					
				16		5					
18 REMARKS											
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES		22 STATION CODE	23 INTEGRAL CODE	24 HOURS CODE	25 DATE OF BIRTH		26 DATE OF GRADE	27 DATE OF LEI	
		NUMERIC ALPHABETIC					MO. DA. YR.	MO. DA. YR.	MO. DA. YR.		
							05 05 68				
28 WTE EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA		33 SECURITY REG. NO.		34 SEX	
MO. DA. YR.			1-USE 2-USE 3-NONE			TYPE MO. DA. YR.		EOD DATA →			
			CODE								
			1								
35 VET. PREFERENCE		36 SERV. COMP. DATE		37 LONG COMP. DATE		38 CAREER CATEGORY		39 FEGLI HEALTH INSURANCE		40 SOCIAL SECURITY NO	
CODE		MO. DA. YR.		MO. DA. YR.		CODE		CODE			
0-NONE 1-5-PT 2-10-PT						CAR-RESV. PROV-TEMP		0-BAIRED 1-YES			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE CAT. CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA			
CODE				CODE		FORM EXECUTED CODE NO. TAX EXEMPTIONS		FORM EXECUTED CODE NO. TAX STATE CODE EXEMP.			
0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)						1-YES 2-NO		1-YES 2-NO			
45 POSITION CONTROL CERTIFICATION						46 O.P. APPROVAL		DATE APPROVED			
Ret						9-25-68		 23 APR 68			

FORM 1152 USE PREVIOUS EDITION.

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 12 OCTOBER 1967	
1 SERIAL NUMBER 055292		2 NAME (Last-First-Middle) NOEL JAMES A.				
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 10 08 67		5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS V TO V CF TO V		V TO CF CF TO CF		7 FINANCIAL ANALYSIS NO CHARGEABLE 8129-0256	8 LEGAL AUTHORITY (Completed by Office of Personnel)	
9 ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE				10 LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA		
11 POSITION TITLE CHIEF OF BASE (GS-00)			12 POSITION NUMBER 0150	13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0136.08	16 GRADE AND STEP 16 6	17 SALARY OR RATE \$ 23425		
18 REMARKS T/O Change. TRA						
18A SIGNATURE OF REQUESTING OFFICIAL <i>Virginia G. Lynch</i> Virginia G. Lynch, C/DO Pers. & Training			DATE SIGNED 12 OCT 67	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Paul M. [unclear]</i>		DATE SIGNED 16 OCT 67
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE 39	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC 43508 DOD		22 STATION CODE 75009	23 INTEGRAL CODE	24 MOOTHS CODE 2
25 DATE OF BIRTH MO DA YR 03 19 11		26 DATE OF GRADE MO DA YR		27 DATE OF LES MO DA YR		28 SEX
29 NTE EXPIRES MO DA YR	30 SPECIAL REFERENCE	31 RETIREMENT DATA 1-SS 2-FER 3-MORE	32 SEPARATION DATA CODE	33 CORRECTION/CANCELLATION DATA TYPE MO DA YR	34 SECURITY REG. NO.	35 EOD DATA
36 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	37 SERV. COMP. DATE MO DA YR		38 LOHS. COMP. DATE MO DA YR		39 CAREER CATEGORY CAR. SERV. PROV./TEMP CODE	40 FEGLI HEALTH INSURANCE CODE 0-WAITER 1-YES
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44 STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		45 SOCIAL SECURITY NO.
45 POSITION CONTROL CERTIFICATION <i>REL</i>				46 O P APPROVAL <i>Paul M. [unclear]</i>		DATE APPROVED 18 OCT 67

FORM 1152 USE PREVIOUS EDITION

SECRET
Poster

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

ADMINISTRATIVE
INTERNAL USE ONLY

27 APR 1967

MEMORANDUM FOR : James A. Noel

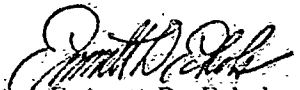
SUBJECT : Retirement Planning

1. As a participant in the CIA Retirement and Disability System, you will reach mandatory retirement at age 60. The prospect of retirement deserves serious thought and planning because of its impact on each of us and for this reason, we are taking this opportunity to provide you with this advance notice that according to our records you will be required to retire on March 1971.

2. Planning ahead can bring about, with each passing year, definite progress toward your retirement goals and the Agency is anxious to assist you in your retirement planning.

3. We would like to make available to you as much information as possible on the general subject of retirement, your annuity estimates, life and health insurance protection in retirement, opportunities for other employment, Social Security benefits, and other additional material which is available. The Agency feels that this type of information and advisory service should be made available and, hopefully, will be used by employees well in advance of the date of retirement.

4. Our Chief, Retirement Branch, on extension 3257, is available to discuss with you any aspect of your retirement planning and we encourage you to contact him.


Emmett D. Echols
Director of Personnel

ADMINISTRATIVE
INTERNAL USE ONLY

SECRET

DD FORM 138-2

DO 66-197

16 AUG 1966

MEMORANDUM FOR: Director of Central Intelligence

THROUGH : Deputy Director for Plans

SUBJECT : Appointment of Mr. James A. Noel as Chief of Base, San Francisco, California

1. The appointment of Mr. James A. Noel as Chief of Base, San Francisco, California effective 6 September 1966 is recommended. Mr. Noel will replace [redacted]

2. Mr. Noel has been an employee of the Agency since 18 September 1947, and was previously assigned as Chief of Station, Madrid, Spain. A biographic profile, including information regarding his Agency experience and training, is attached.

C. Tracy Barnes
 C. Tracy Barnes
 Chief, DO Division

1 Attachment
 Biographic Profile (Parts 1 & 2)

APPROVAL RECOMMENDED:

W. Karam
 Acting, Deputy Director for Plans

16 Aug. 66
 Date

The recommendation in paragraph 1 is APPROVED:

Richard Helms
 Director of Central Intelligence

17 Aug. 66
 Date

SECRET

GROUP 1
 Excluded from automatic
 downgrading and
 declassification

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 17 Nov. 1966	
1. SERIAL NUMBER 055272		2. NAME (Last-First-Middle) NOEL JAMES A			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT CORRECTION			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 14 66		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V		V TO CF XX CF TO CF		7. COST CENTER, NO. CHARGE, ABE 7129-0256	
9. ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD UNITED STATES STATION SAN FRANCISCO BASE OFFICE OF THE CHIEF			10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA		
11. POSITION TITLE CHIEF OF BASE		12. POSITION NUMBER 0150		13. CAREER/SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.08		16. GRADE AND STEP 16 5	
17. SALARY OR RATE \$ 22,755					
18. REMARKS Subject is being assigned to this position in accordance with HR 20-11-02 for a 1 year period. Corr. eff. date from: 08-10-66 to 08-14-66					
18A. SIGNATURE OF REQUESTING OFFICER <i>Virginia C. Lynch</i> Virginia C. Lynch, Of DO Pers. & Training		DATE SIGNED 17 Nov 66		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Bob Bond</i>	
DATE SIGNED 11/25/66					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTERIE CODE
24. HTE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-CSC 3-FCA 5-NONE		31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA
35. VET PREFERENCE CODE 0-NONE 1-5 PT. 2-10 PT.	36. SERV COMP. DATE MO. DA. YR.	37. LONG. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CODE CAREER/PROV/TEMP		39. FEGLI/HEALTH INSURANCE CODE 3-WAYER 1-YES
41. PREVIOUS GOVERNMENT SERVICE DATA CODE: 0-NONE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS
45. POSITION CONTROL CERTIFICATION WE- 11-20-66/15			46. GP APPROVAL Bob Bond		DATE APPROVED 29 Nov 66

FORM 1152 USE PREVIOUS EDITION
6-63

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

(4)

SECRET

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED			
1 SERIAL NUMBER		2 NAME (Last-First-Middle)				25 JULY 1966			
055292		NOEL, JAMES A.							
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT				
CONVERSION FROM <input type="checkbox"/> STATUS			MONTH DAY YEAR 08 13 66		REGULAR				
6 FUNDS			7 COST CENTER NO CHARGEABLE		8 LEGAL AUTHORITY (Complied by Office of Personnel)				
<input type="checkbox"/> V TO V <input type="checkbox"/> O TO V <input checked="" type="checkbox"/> XXXX O TO O			7136-1347						
9 ORGANIZATIONAL DESIGNATIONS			10 LOCATION OF OFFICIAL STATION						
DDP WE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF			MADRID, SPAIN						
11 POSITION TITLE			12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION				
CHIEF OF STATION			0399		D				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
GS		0136.05		16 5		22755 \$ 22,755			
18 REMARKS									
19A SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED	19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED			
RICHARD F. WESTERMAN			G/E/PERS	[Signature]		27/7/66			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATUS CODE	23 INTEGREE CODE	24 HOURS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
56	10	50660 WR		67033	3	03/19/11			
28 NET EXPITS		29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA		33 SECURITY REQ NO	34 SER
						EOD DATA			
35 VET PREFERENCE	36 SERV COMP DATE		37 LONG COMP DATE		38 CAREER CATEGORY	39 LEGS/HEALTH INSURANCE		40 SOCIAL SECURITY NO	
								3M	
41 PREVIOUS GOVERNMENT SERVICE DATA			42 LEAVE CAT. CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA			
0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				45 FORM EXECUTED		46 STATE TAX DATA			
				1-YES 2-NO		1-YES 2-NO			
45 POSITION CONTROL CERTIFICATION				46 O P APPROVAL		DATE APPROVED			
7-27-66 WR				7/1 Bond		27/7/66			

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
1 SERIAL NUMBER 055292		2 NAME (Last-First-Middle) NOEL JAMES A.		21 July 1966			
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 18-ASAP-66		5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS		7 COST CENTER NO. CHARGE 7129-0256		8 LEGAL AUTHORITY (Completed by Office of Personnel)			
9 ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD UNITED STATES STATION SAN FRANCISCO BASE <i>Office of the Chief</i>				10 LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIF.			
11 POSITION TITLE CHIEF OF BASE GS-00 (15)		12 POSITION NUMBER 0150		13 CAREER SERVICE DESIGNATION D			
14 CLASSIFICATION SCHEDULE (G.S. F.B. etc.) GS		15 OCCUPATIONAL SERIES 0136.08		16 GRADE AND STEP 16 5		17 SALARY OR RATE \$ 22,005 2 276.5	
18 REMARKS Replacement - to be reassigned. Subject is being assigned to this position in accordance with HR 20-21c (2) for two years. From: DDP/WE/Madrid Station/Position No. 0399 <i>Security Approval Granted by Pers. SD/OS 8/3/66 8/11/66</i>							
18A SIGNATURE OF REQUESTING OFFICIAL <i>Virginia C. Lynch</i> Virginia C. Lynch, C/DO Pers. & Training				DATE SIGNED 21 July 66		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>R. D. Bond</i>	
DATE SIGNED 8-8-64							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE 37		20 EMPLOY CODE 10		21 OFFICE CODING NUMERIC ALPHABETIC 43620 PGP		22 STATION CODE 75007	
23 INTERIE CODE		24 HOURS CODE		25 DATE OF BIRTH MO. DA. YR. 2 03 19 11		26 DATE OF GRADE MO. DA. YR.	
27 DATE OF HI		28 SECURITY PED NO.		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-USE 2-FEA 3-NONE	
31 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		32 SERV COMP. DATE MO. DA. YR.		33 LONG COMP. DATE MO. DA. YR.		34 CAREER CATEGORY CODE CAR/BSV PROV/TEMP	
35 FEGLI/HEALTH INSURANCE CODE 0-WAIVER 1-YES		36 SOCIAL SECURITY NO.		37 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		38 LEAVE CAT. CODE	
39 FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO		40 STATE TAX DATA STATE CODE		41 FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO		42 STATE TAX DATA STATE CODE	
43 POSITION CONTROL CERTIFICATION <i>From WE</i>				44 O.P. APPROVAL <i>8/1/66 R. D. Bond</i>		45 DATE APPROVED <i>8/27/66 G. J. G.</i>	

FORM 1152 USE PREVIOUS EDITION
0-63

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

23 March 1966

Koel, James Arthur
SS, 103-3-238

19 March 1911

U. S. State Dept.
Foreign Service
American Consulate
Guadaluajara, Mexico
26 Jan. 1933 To Aug. 1944

PERSONNEL

SECRET

29 MAR 1965

MEMORANDUM FOR: Director of Personnel
THRU : DDP/OP
SUBJECT : PCS Return Prior to Completion of Tour
of Duty - James A. Noel
REFERENCE : CSN-20-59, dated 17 November 1965

1. This memorandum contains in paragraph 2 a recommendation for the approval of the Director of Personnel.

2. Mr. Noel arrived in Madrid as the Chief of Station on 21 September 1961. After home leave, he returned to Madrid on 7 August 1964, for a second tour of duty which would normally be completed on 6 August 1966. We have been advised that upon completion of his current assignment, Mr. Noel will be assigned as Chief of the DODS field office in San Francisco, California. Since the officer now filling that position is required to leave in early September for another assignment, it is very desirable that Mr. Noel arrive in San Francisco about 6 September. Therefore, it is requested that Mr. Noel be permitted to leave Madrid on or about 1 July 1966. This will permit him to take some home leave and arrive at his new post in sufficient time to settle his family, which includes two school age children, and report for his projected assignment on schedule.

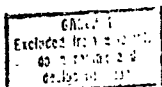
Edward Ryan

Edward Ryan
Acting Chief
Western Europe Division

Concur
James A. Miller
DDP/OP

Robert J. Hester
AID/PERS
(over)

SECRET



SECRET

2

SUBJECT: PCS Return Prior to Completion of Tour of Duty -
James A. Noel

CONCUR:


See Concurrence on Page 1

DDP/OP

22 April 1966

Date

The recommendation in paragraph 2 is APPROVED:


Director of Personnel

26 APR 66

Date

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
1 SERIAL NUMBER 055292				2 NAME (Last-First-Middle) NOEL, JAMES A.			
3 NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				4 EFFECTIVE DATE REQUESTED MO. DAY YEAR 02 16 66		5 CATEGORY OF EMPLOYMENT REGULAR	
6 RANGS		7 V TO V OF TO V		7 CODE CENTER NO. CHARGE ABLE 6135-1347		8 LEGAL ACTION (Completed by Office of Personnel) PL 88-543 Sect. 203	
9 ORGANIZATIONAL DESIGNATIONS DEP/WE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF				10 LOCATION OF OFFICIAL STATION MADRID, SPAIN			
11 POSITION TITLE CHIEF OF STATION				12 POSITION NUMBER 0399		13 CAREER SERVICE DESIGNATION 2	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) FSR GS		15 OCCUPATIONAL SERIES 0136.05		16 GRADE AND STEP 02 4 16 5		17 SALARY OR RATE 20,900 \$22,331	
18 REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.							
18A SIGNATURE OF REQUESTING OFFICIAL <i>Philip C. B...</i>				DATE SIGNED 5 JUN 1966		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
						DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE		20 EMPLOY CODE		21 OFFICE CODING NUMERIC ALPHABETIC 10 50000 WE 6703		22 STATION CODE 6703	
23 INTEGRATED CODE		24 MONTHS		25 DATE OF BIRTH MO. DA. YR. 03 19 11		26 DATE OF SERVICE MO. DA. YR. 03 20 62	
27 DATE OF LEI MO. DA. YR. 10 10 65		28 NTE EXPIRES MO. DA. YR.		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-COE 2-HEA 3-ROSE 2	
31 SEPARATION DATA CODE		32 CANCELLATION DATA TIME MO. DA. YR.		33 SECURITY REQ. NO.		34 SER.	
35 VET PREFERENCE		36 SERV. COMP. DATE MO. DA. YR.		37 LONG COMP. DATE MO. DA. YR.		38 CAREER CATEGORY CAP. RES. PROT. TEMP.	
39 FEDERAL HEALTH INSURANCE CODE CODE CODE 1-YES 2-NO		40 SOCIAL SECURITY NO.		41 PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT. CODE	
43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1-YES 2-NO		44 STATE TAX DATA FORM EXECUTED CODE NO TAX STATE COOP 1-YES 2-NO		45 POSITION CONTROL CERTIFICATION		46 CP APPROVAL	
DATE APPROVED				DATE APPROVED			
01-07706 N				Red Bond for D. New 5 Jan 66			

SECRET

Chief of Station, Madrid

1

Director of Personnel

James H. Noel

~~WELBOGAGE~~ Notification of Designation as a Participant
in the Organization Retirement and Disability System

Action: As indicated
REF: OSMS-2378

Reference dispatch informed you that the Director of Personnel has determined that you met the criteria specified in the applicable regulation for designation as a participant in the Organization Retirement and Disability System. On the basis of this determination and your recently executed election to reside in the System, your designation as a participant was made effective 16 January 1966.

/s/

[Redacted Signature]

21 JAN 1966

f

[Redacted Signature]

27 JAN 66

OSMS - 2643

21 Jan 66

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION		DATE PREPARED																			
1. SERIAL NUMBER 055292		2. NAME (Last-First-Middle) NOEL JAMES A.																			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 20 61																			
5. CATEGORY OF EMPLOYMENT REGULAR		6. LEGAL AUTHORITY (Completed by Office of Personnel)																			
7. FUNDS V TO V CF TO V X CF TO CF		7. COST CENTER NO. CHARGEABLE 2136-6400-1017																			
8. ORGANIZATIONAL DESIGNATIONS DDP WE MADRID STATION OFFICE OF THE CHIEF		10. LOCATION OF OFFICIAL STATION MADRID, SPAIN																			
11. POSITION TITLE CHIEF OF STATION		12. POSITION NUMBER 399																			
13. CAREER SERVICE DESIGNATION D		12. PCR CONTROL NO.																			
14. CLASSIFICATION SCHEME (OV, LD, etc.) FSR GS 00		15. OCCUPATIONAL SERIES 0136.01																			
16. GRADE AND STEP 03 16 01		17. SALARY OR RATE 13,600 15,255																			
18. REMARKS DDP/WH/Dov Comp/Havana Cuba COPY SENT TO SECURITY <i>Sawilly [unclear] P.O.S. 50/03 8/21/61 9/7/61 coordinated with Phil Boveal phone 1 8/21/61</i>		I certify funds available: GPO's Ref. No. MCR 2-007 Charge Acct. No. 236-6400-1017 Auth. Officer [Signature]																			
19. SIGNATURE OF OFFICER OFFICER [Signature]		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER																			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																					
<table border="1"> <tr> <td>21. ACTION CODE 37</td> <td>22. EMPLOYMENT CODE 10</td> <td>23. OFFICE SYMBOL 62660</td> <td>24. ALPHABETIC SYMBOL WE</td> <td>25. STATION CODE 67033</td> <td>26. POSITION CODE 3</td> <td>27. DATE OF ACTION 03/19/61</td> <td>28. DATE OF PAY MO. DA. YA.</td> <td>29. DATE OF LET MO. DA. YA.</td> </tr> <tr> <td>30. SECURITY RLS NO.</td> <td>31. SECURITY RLS NO.</td> <td>32. SOCIAL SECURITY NO.</td> <td>33. SOCIAL SECURITY NO.</td> <td>34. FEDERAL TAX DATA</td> <td>35. STATE TAX DATA</td> <td colspan="3">36. FEDERAL TAX DATA</td> </tr> </table>				21. ACTION CODE 37	22. EMPLOYMENT CODE 10	23. OFFICE SYMBOL 62660	24. ALPHABETIC SYMBOL WE	25. STATION CODE 67033	26. POSITION CODE 3	27. DATE OF ACTION 03/19/61	28. DATE OF PAY MO. DA. YA.	29. DATE OF LET MO. DA. YA.	30. SECURITY RLS NO.	31. SECURITY RLS NO.	32. SOCIAL SECURITY NO.	33. SOCIAL SECURITY NO.	34. FEDERAL TAX DATA	35. STATE TAX DATA	36. FEDERAL TAX DATA		
21. ACTION CODE 37	22. EMPLOYMENT CODE 10	23. OFFICE SYMBOL 62660	24. ALPHABETIC SYMBOL WE	25. STATION CODE 67033	26. POSITION CODE 3	27. DATE OF ACTION 03/19/61	28. DATE OF PAY MO. DA. YA.	29. DATE OF LET MO. DA. YA.													
30. SECURITY RLS NO.	31. SECURITY RLS NO.	32. SOCIAL SECURITY NO.	33. SOCIAL SECURITY NO.	34. FEDERAL TAX DATA	35. STATE TAX DATA	36. FEDERAL TAX DATA															
<table border="1"> <tr> <td>37. PREVIOUS EMPLOYMENT SERVICE DATA</td> <td>38. FEDERAL TAX DATA</td> <td>39. STATE TAX DATA</td> <td>40. FEDERAL TAX DATA</td> <td>41. STATE TAX DATA</td> </tr> </table>				37. PREVIOUS EMPLOYMENT SERVICE DATA	38. FEDERAL TAX DATA	39. STATE TAX DATA	40. FEDERAL TAX DATA	41. STATE TAX DATA													
37. PREVIOUS EMPLOYMENT SERVICE DATA	38. FEDERAL TAX DATA	39. STATE TAX DATA	40. FEDERAL TAX DATA	41. STATE TAX DATA																	
43. POSITION CONTROL CERTIFICATION W. Keeney 08/20/61		46. C.P. APPROVAL D.C. Keeney A. Keeney 5 Sep 61																			

14

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OSPD
y82

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER <i>255272</i>		2. NAME (Last-First-Middle) NOEL, JAMES A.			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 23 61		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE 2135-1990-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)
	CF TO V	X CF TO CF			
9. ORGANIZATIONAL DESIGNATIONS CS/CS DEVELOPMENT COMPLEMENT DDP/WH DIVISION			10. LOCATION OF OFFICIAL STATION * HAVANA, CUBA		
11. POSITION TITLE CHIEF OF STATION		12. POSITION NUMBER 9997		12A. PCR CONTROL NO.	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) FSR CS		15. OCCUPATIONAL SERIES 0136-01	16. GRADE AND STEP 3 16 1		17. SALARY OR RATE 13600 15255
18. REMARKS (FROM: DDP/WH/Branch 4/PAP-114/Havana, Cuba) <i>try 9</i> 1 copy to Security Office. *Returnee Casual - pending approval of his appointment as Chief of Station, Madrid. <i>SPD covering Viola 10/1/61 WK</i>					
18A. SIGNATURE OF REQUESTING OFFICIAL <i>P. C. Bowers</i> P. C. BOWERS WH/PERSONNEL OFFICER			18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>M. Lipp</i>		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 357		20. OFFICE LUDING 14977		21. DATE OF ACTION 07/23/61	
22. SPECIAL REFERENCE		23. SPECIAL REFERENCE		24. SECURITY REL. NO.	
25. VET. PREFERENCE		26. SEV. COMP. GRN		27. LEAV. COMP. DATE	
28. PREVIOUS EMPLOYMENT SERVICE DATA		29. FEDERAL TAX DATA		30. STATE TAX DATA	
31. POSITION CONTROL CERTIFICATION		32. O.P. APPROVAL <i>M. Lipp</i> 24 July 61			

SECRET

1-3683

16 June 1961

61-59241

MEMORANDUM FOR: Director of Central Intelligence
 VIA : Deputy Director (Plans)
 SUBJECT : Appointment of Mr. James A. Noel,
 Chief of Station, Madrid, Spain

1. The appointment of Mr. Noel as Chief of Station, Madrid, Spain, effective on or about 15 September 1961, is recommended. Mr. Noel would replace Mr. Archibald B. Roosevelt, Jr. who is

2. Mr. Noel has been an employee of the Agency since 18 September 1947, and is presently assigned to WH Division. A biographic data sheet, including information regarding his Agency experience and training, is attached.

3. In view of the fact that Mr. Noel is not available for interview because he is on home leave the usual interview endorsement is not made a part of this memorandum.

Eric W. Timm

ERIC W. TIMM
 Chief

Western Europe Division

1 Attachment
 Biographic Information

APPROVAL RECOMMENDED:

Richard W. Russell Jr. *Doc* *20 July 61* 8 JUL 1961
 Deputy Director (Plans) (Date)

The recommendation in paragraph 1 is approved:

Allen Dulles 11 AUG 1961
 Director of Central Intelligence (Date)

SECRET

SECRET

16 June 1961

Name: James A. Noel
Grade: GS-16
Service Designation: D

Date and Place of Birth: March 19, 1911
New York, New York

Marital Status: Married
Wife: Lillian B. Noel
Son:
Son:

Education and Career Outside the Agency:

1926 - 1929 San Diego Senior High School
1931 - 1944 Department of State
Ensenada, Mexico; Vice Consul
Mazatlan, Mexico; Vice Consul
Guadalajara, Mexico; Vice Consul
1944 - 1947 OSS/SSU/CIG
Spain and Guatemala; Chief of Station

Languages: Spanish; Good

Military Duty: None

CIA Experience:

Sep 1947 OSO/FBI/Guatemala; COS, GS-12
Mar 1949 Promoted to GS-13
Aug 1949 OSO/FBI/Buenos Aires; COS, GS-13
Aug 1951 Promoted to GS-14
Sep 1952 DDP/WH/Caracas; COS, GS-14
Aug 1954 Promoted to GS-15
Jan 1956 DDP/WH-1/Branch Chief, Headquarters
Jun - Jul 1956 TDY - South America
Jun 1957 DDP/WH-2/Branch Chief, Headquarters
Apr 1958 DDP/WH/Havana; COS, GS-15
Apr 1961 Promoted to GS-16

SECRET

SECRET

- 2 -

15 June 1961

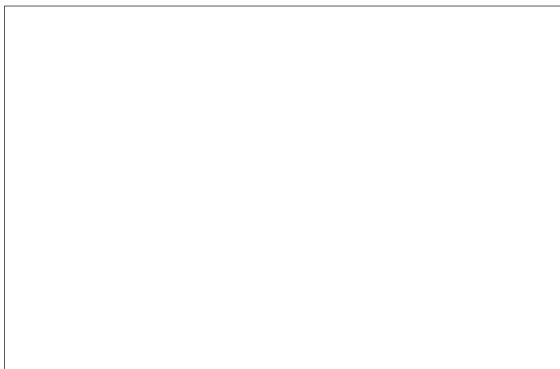
Name:

James A. Noel

CIA Training:

1947
1947
1947
1949

1949
1949
1949
1949
1949
1952
1958
1958



SECRET

SECRET
(When Filled In)

V to V		V to UV		REQUEST FOR PERSONNEL ACTION				DATE PREPARED						
UV to V		UV to UV						Mo	Da	Yr				
1. Serial No.		2. Name (Last-First-Middle)			3. Date Of Birth		4. Vac. Ref.		5. Sex		6. CS - EOD			
		NOEL, James A.			Mo	Da	Yr	None-0 5 Pt-1 10 Pt-2	Code		M	Mo	Da	Yr
7. SCD		8. CSC Rate		9. CSC Or Other Legal Authority		10. Acmt. Affidav.		11. FEGLI		12. LCD		13. Credit Lcd		
Mo	Da	Yr	Yes - 1 No - 2	Code		Mo	Da	Yr	Yes - 1 No - 2	Code	Mo	Da	Yr	Yes - 1 No - 2

CURRENT ASSIGNMENT

14. Organizational Designations				Code	15. Location Of Official Station				Station Code		
DDP/WH Branch III Havana, Cuba Station					Havana, Cuba						
16. Dept. Field		17. Position Title			18. Position No.		19. Serv.		20. Occup. Series		
Dept. Usfid. Fragn.	Code	CHIEF OF STATION			114		(FSS) US		0136-01		
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
Mo	Da	Yr	\$	DI	Mo	Da	Yr	Mo	Da	Yr	
15		4	13,670		08	01	58	07	24	66	

ACTION

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Date	
PROMOTION (TEMPORARY) *			Mo	Da	Yr	REGULAR			
			07	20	66				

PROPOSED ASSIGNMENT

31. Organizational Designations				Code	32. Location Of Official Station				Station Code		
33. Dept. Field		34. Position Title			35. Position No.		36. Serv.		37. Occup. Series		
Dept. Usfid. Fragn.	Code										
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
Mo	Da	Yr	\$	DI	Mo	Da	Yr	Mo	Da	Yr	
16		1	14,190		07	20	66	07	11	66	0155-5450-3000

SOURCE OF REQUEST

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)		Date Approved
		Richard Helms Chief of Operations, DD/P		
B. For Additional Information Call (Name & Telephone Ext.)				

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			D. Placement		
B. Pos. Control		8-10-66	E. Release		
C. Classification			F. Approved By		

Remarks
* Promotion to the grade indicated is temporary and for such duration as the Director will determine. Your permanent grade is the grade from which you are temporarily promoted.

Continued on reverse side

SECRET

Classify Acco. To Content

REQUEST FOR PERSONNEL ACTION															
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vac. Prof.		5. Sex	6. GS - EOD			
		NOEL, James A.				Mo	Da	Yr	None-0	Code		Mo	Da	Yr	
						5	10	11	5 Pt-1	0	M				
7. SCD		8. CSC Retmt		9. CSC Or Other Legal Authority		10. Appt. Affidav.			11. FEGLI		12. LCD		13. <small>with New Credit Lgo</small>		
Mo	Da	Yr	Yes - 1	Code		Mo	Da	Yr	Yes - 1	Code	Mo	Da	Yr	Yes - 1	Code
			No - 2	1					No - 2					No - 2	

2A

PREVIOUS ASSIGNMENT						UNVOUCHERED								
14. Organizational Designations						Code			15. Location Of Official Station			Station Code		
DDP/WH Branch II									Washington, D.C.					
16. Dept. - Field		17. Position Title				18. Position No.			19. Serial		20. Occup. Series			
Dept - X	Code	Area Ops Officer (Br-Ch)				SA-160			GS		0136.01			
Unfld.														
Fragn.														
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number				
GS-15-3		\$ 12, 150		DI						B-3500-10-200				

ACTION

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee			Code	30. Separation Date	
REASSIGNMENT		69	4/16/58		REGULAR			OM		

PRESENT ASSIGNMENT

UNVOUCHERED

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP/WH Branch III Havana, Cuba Station				2657		Havana, Cuba				17085	
33. Dept. - Field		34. Position Title				35. Position No.		36. Serv.	37. Occup. Series		
DDP/WH		AREA OPS OFFICER (OCS) CHIEF OF STATION				SA-114		D	65		
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
GS-15-3		\$ 12, 150		DI		08/10/54		01/25/59		E-3545-55-055	

SOURCE OF REQUEST

A. Requested By (Name And Title)				C. Request Approved By (Signature And Title)			
ROBERT S. WATLES C/WH/Support				[Signature] 27 Feb 1958			
B. For Additional Information Call (Name & Telephone Ext.)							
JOHN WASHENKO X 8242							

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			D. Placement	[Signature]	1 MAR
B. Pos. Control	[Signature]	3/18/58	E.		
C. Classification			F. Approved By	ROBERT W. SHAW	1 MAR

Remarks

2 copies to Security.

Sic Conc. by post 3/24 - 3/26

SECRET

SECRET

100-3-10574

10-1694/1

12 February 1958

MEMORANDUM FOR: Director of Central Intelligence

VIA: Deputy Director (Plans)

SUBJECT: Appointment of Mr. James A. NOEL, Chief of Station, Havana, Cuba

1. The appointment of Mr. Noel as Chief of Station, Havana, Cuba, effective on or about 7 September 1958, is recommended. Mr. Noel would replace Mr. William B. Caldwell whose reassignment to another field station is under active consideration.

2. Mr. Noel has been an employee of the Agency since 15 August 1944, and is presently assigned as Chief of Branch II, WH Division, Headquarters, GS-15. A biographic data sheet, including information regarding his Agency experience and training, is attached.

J. C. King
J. C. KING
Chief

Western Hemisphere Division

1 Attachment
Biographic information

APPROVAL RECOMMENDED:

Mr. Noel has been interviewed by the Chief of Operations, and by myself, and we are satisfied that he is qualified for this assignment.

WPC
DDCI 10 MAR 1958

Frank S. Lewis
Deputy Director (Plans) *W* 5 March 1958
(Date)

The recommendation in paragraph 1 is APPROVED:

Allen Dulles
Director of Central Intelligence 10 MAR 1958
(Date)

SECRET

SECRET

NOEL

James

A.

12 November 57

Branch Chief

DDP/NA/II

GS-15

OOO

OOO

TDY Stand-by Status

Subject is qualified for one (3 weeks) TDY. (11/25/57)
Must be evaluated for each TDY.

NOEL NOEL

NOV 15 5 00 PM '57

DEPT OF DEFENSE

SECRET

S-E-C-R-E-T

This Notice Expires 1 July 1958

N 20-190-139

NOTICE
NO. 20-190-139

PERSONNEL
2 July 1957

ANNOUNCEMENT OF ASSIGNMENTS TO KEY POSITIONS

PANEL OF EXAMINERS OF THE CIA SELECTION BOARD

In accordance with paragraph 5b of Regulation No. 20-105, The Career Staff of the Central Intelligence Agency, the following persons are appointed, effective 1 July 1957, to serve as members of the Panel of Examiners for the period ending 30 June 1958:

<u>Name</u>	<u>Service Designation</u>	<u>Organizational Component</u>
	DP	
	IS	
	DI	
	DT	
	OD	DD
	SP	
	DT	
	IB	
	C	
	OC	
	DM	
	DI	
	SC	
	SL	
	DI	
	SF	
	SL	
	SM	
	DP	
	IB	
	C	
	SS	
	DI	
	IN	
	SS	
	D	

S-E-C-R-E-T

N 20-190-139

NOTICE
NO. 20-190-139

PERSONNEL
2 July 1957

<u>Name</u>	<u>Service Designation</u>	<u>Organizational Component</u>
[Redacted]	DP	[Redacted]
[Redacted]	IC	
[Redacted]	DI	
[Redacted]	DI	
[Redacted]	D	
[Redacted]	IR	
[Redacted]	SF	
[Redacted]	SL	
[Redacted]	DI	
[Redacted]	SS	
[Redacted]	SC	
[Redacted]	IS	
[Redacted]	OB	
[Redacted]	DI	
Noel, James A.	DI	
[Redacted]	SL	
[Redacted]	SC	
[Redacted]	DI	
[Redacted]	DM	
[Redacted]	SP	
[Redacted]	SC	
[Redacted]	IR	
[Redacted]	ST	
[Redacted]	ST	
[Redacted]	SA	
[Redacted]	DI	
[Redacted]	SC	
[Redacted]	DI	
[Redacted]	IC	
[Redacted]	SP	
Wattles, Robert S.	SA	

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE:

H. GATES LLOYD
Acting Deputy Director
(Support)

DISTRIBUTION: A, plus each member
of the Panel of Examiners

S-E-C-R-E-T

SECRET

STANDARD FORM 52
FORMS ISSUED BY THE
D & C, SERVICE COMMISSION
ARMY AIR FORCE FEDERAL PROPERTY
ADMINISTRATION

UNVOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initials, and surname) **Mr. James A. KOEL**
2. DATE OF BIRTH **19 Mar 1911**
3. REQUEST NO.
4. DATE OF REQUEST **17 May 57**

5. NATURE OF ACTION REQUESTED:
A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)
Reassignment
6. EFFECTIVE DATE
A. PROPOSED:
7. C.S. OR OTHER
LEGAL AUTHORITY

8. POSITION (Specify whether establish, change grade or title, etc.)
B. APPROVED:

FROM: **(DC CH)**
Area Ops Officer (DC) EA-10
GS-0136.01-15 \$11,800.00 p.a.
(FSS-3 \$9635.00 p.a.)
DDP/WH
Branch I
Washington, D. C.
9. POSITION TITLE AND NUMBER:
10. SERVICE GRADE AND SALARY:
11. ORGANIZATIONAL DESIGNATIONS:
12. FIELD OR DEPARTMENTAL
TO: **(DC CH)** **160**
Area Ops Officer (DC) EA-10
GS-0136.01-15 \$11,800.00 p.a.
(FSS-3 \$9635.00 p.a.)
DDP/WH
Branch II
Washington, D. C.
13. FIELD DEPARTMENTAL (D)

A. REMARKS (Use reverse if necessary)
Memorandum forwarded to Management on 23 May 1957 requesting that position BA-51 be converted from Headquarters Vouchered to Headquarters Unvouchered.

B. REQUESTED BY **ROBERT S. [Signature]**
C. **[Signature]** (phonetic extension)
D. REQUEST APPROVED BY
Signature: **[Signature]**
Title: **10 JUNE 57**

13. VETERAN PREFERENCE
NONE WHEN OTHER'S P.T. 15. POINT
DISAB. OTHER
14. POSITION CLASSIFICATION ACTION
NEW VICE I. A. SEAL
SO-DI

16. APPROPRIATION
FROM: **7-3500-10-200**
TO: **Same**
17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) **Yes**
18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
19. LEGAL RESIDENCE STATE
 CLAIMED PROVED STATE

20. STANDARD FORM 50 REMARKS

21. CLEARANCES
A. INITIAL OR SIGNATURE DATE REMARKS
B. CEIL. OR POS. CONTROL **RW 12 JUN 1957**
C. CLASSIFICATION: **14 June**
D. PLACEMENT OR EMP'L **10 JUNE 57**
E. **approved by [Signature] on 11 June 1957**

F. APPROVED BY **[Signature]**
per [Signature] 11 June 1957

SECRET

STANDARD FORM 52 REQUEST FOR PERSONNEL ACTION		UNVOUCHERED	
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr - Miss - Mrs. - One given name, initial(s), and surname)		3. DATE OF BIRTH	4. DATE OF REQUEST
Mr. James A. NOEL		19 March 1911	14 Dec 55
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE & PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
Reassignment		B. APPROVED: 29 Jan 1956	
8. POSITION (Specify whether establish, change grade or title, etc.)			
FROM--	A. POSITION TITLE AND NUMBER	TO--	
Area Ops Officer (S.C.) BAF-93		Area Ops Officer (B. C.) BA-40	
GS-0136.01-15 \$11610.00 p.a. (FSS-3 \$8481.00 p.a.) DDP/WH	B. SERVICE, GRADE, AND SALARY	GS-0136.01-15 \$11610.00 p.a. (FSS-3 \$8481.00 p.a.) DDP/WH	
Caracas, Venezuela	C. ORGANIZATIONAL DESIGNATIONS	Branch I - NWC	
FIELD	11. HEADQUARTERS	Washington, D. C.	15 (FP)
DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	FIELD	DEPARTMENTAL
A. REMARKS (Use reverse if necessary)			
A memorandum has been forwarded to the Management Staff requesting that this position be converted from vouchered to unvouchered.			
B. REQUESTED BY (Name and title)		D. REQUEST APPROVED BY	
James P. Bowers C/WH		Approved by GS Career	
E. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Signature: [Signature]	
P. C. BOWERS: X 4457		Title: [Signature]	
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NONE / WW / OTHER / 5 PT / 10 POINT / DISAB. / OTHER		NEW / VICE / I. A. / RECAL	
X		SD-DI	
15. SEX	16. RACE	17. APPOINTMENT FROM:	18. SUBJECT TO C. S. AFFILIATION ACT (YES-NO)
M	W	6-3588-55-066 TO: 6-3588-20 6-3588-10-200	Yes
			19. DATE OF APPOINTMENT AFFILIATION (ACCESSIONS ONLY)
			20. LEGAL RESIDENCE STATE: CLAIMED / PROVED
21. STANDARD FORM 10 REMARKS			
Case by Elise 20 Dec 55 JR 1/24/56			
22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS CONTROL		23 JAN 1956	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL	1-9-56	M/J/A	
E.			
F. APPROVED BY: [Signature] Case by Jol. J. Caldwell 19 Jan 1956			

SECRET

26 May 1954

MEMORANDUM FOR: PERSONNEL OFFICER, FI

SUBJECT: NOEL, James A. -
Recommendation for Promotion

1. Mr. James A. Noel was born 19 March 1911, in New York City, is married and has two children. He graduated from San Diego Senior High School and entered the United States Foreign Service, where he served as consular officer in Mexico and Spain, from 1931 to 1944. He entered on duty with CIA, at CAF-11, on 15 August 1944. He served in Madrid and Barcelona and was promoted to CAF-12 in 1946. He subsequently served at Guatemala City as Chief of Station, and in March 1947, was promoted to GS-13. He was assigned to Buenos Aires as Chief of Station, and in August of 1951 was promoted to GS-14. Subject is presently Chief of Station at Caracas, Venezuela.

2. Mr. Noel has been rated Excellent to Outstanding as Chief of Station. His last efficiency report in June 1953 reflected a lower rating due to a difficult personnel situation and hospitalization. However, this situation has been resolved, and it is felt that Mr. Noel has earned his promotion to GS-15.

3. Your approval is requested.

J. Caldwell King
J. Caldwell King
Chief, WH

SECRET

SECRET

21 January 1954

MEMORANDUM FOR: CWH

SUBJECT : Reference to James A. Noel by William I. Clark,
Assistant Director U.S.I.A. for Latin America.

During the briefing of CIA personnel conducted by William I. Clark, Assistant Director of U.S.I.A. for Latin America, on 14 January 1954, he was referred to the excellent cooperation between our Chief of Mission at Caracas, James A. Noel and the P.A.O., which he characterized as exemplary and a model for all other stations.

CWP/WH

Distribution:

Original and 1: Addressee

BRANCH
FEB 1 3 21 PM '54
PERSONNEL

SECRET

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

12951

NAME ROE, James A.		DATE 12 March 1952
NATURE OF ACTION Reassignment		EFFECTIVE DATE 27 April 1952
TITLE	FROM Intell Off Chief of Station, GS-14	Intell Off Chief of Station, GS-14
GRADE AND SALARY	GS-14, \$9600.00 per annum	GS-14, \$9600.00 per annum
OFFICE	OSO	
DIVISION	SUP	INT
BRANCH	PC	Branch I
OFFICIAL STATION	Buenos Aires, Argentina (73510)	Caracas, Venezuela (73529)
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
Bill Huggs 4-24-52 CLASSIFICATION	<i>[Signature]</i> PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS: Pl.		
12 March 1952		

DATE **MAR 20 1952**

CORRECT FOR THE CHIEF OF INSPECTION AND
CHIEF, PERSONNEL SECURITY BRANCH

SECRET

MR+CED

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME BOFF, James A.		DATE 16 July 51
NATURE OF ACTION Promotion		16 July 1951
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM	
	Chief of Station, CS-33	Chief of Station, CS-31 <i>(Intelligence Officer)</i>
	GS-33, \$12,000 PER ANNUM	GS-31, \$8,900.77 PER ANNUM
	OSO	OSO
	EC	EC
	EC	EC
	District Army, Air Station	District Army, Air Station
QUALIFICATIONS	FOR ASSISTANT DIRECTOR APPROVAL	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS: Slot # 07.		
<div style="text-align: center;"> <p>POSTED</p> <p><i>17 Aug 51</i></p> <p><i>WMA</i></p> </div>		

SECRET

FROM: BUENOS AIRES ROUTINE
TO: SPECIAL OPERATIONS 22 DEC 49
ACTION: FDT (1-2) IN 12169
INFORMATION: ADSO (3-4), SED (5), CFD (6), COMMO (7-8), IID (9)

BUEN 818

TO: WASHF CITE: BUEN

RE: WASH 4980 (OUT 95043)

DEPARTED FOR URUGUAY 22 DECEMBER. IN CHARGE.


James Noel

SECRET

TOR: 1922Z 22 DEC 49

Copy No. 5

- C. To be able to plan my travel and leave, it is important that I know the approximate duration of TDY.
- D. Would it be possible to postpone the date of my arrival at my new post until 15 June? This would be a great convenience to me, and I would appreciate any consideration which Headquarters may be able to give to this request.



Chief of Station

Mr. Robert Cunningham.

-3-

16 February 1948.

close relation to the job he is doing. Since this job is directly concerned with national security and the national interest, and has been consistently well done, I believe that Mr. Neal can be said with sincerity to be an employee of unquestionable loyalty and integrity.

5. The same beliefs of the writer pertain to Mr. Neal's wife, whom I have met on many occasions and found to share his attitudes and feelings completely. She, too, is strongly interested in the work Mr. Neal is engaged in and has few, if any, outside interests. Their home life is happy and wholesome and their social activities appear strictly restricted to the business of the day.
6. In this respect, I believe that both Mr. Neal and his wife are, by training and personality, security-conscious people who are quite happy to devote themselves to the success of the career in intelligence which Mr. Neal has selected.

RECISTRY

REC'D FEB 15 1948

RECEIVED

Office Memorandum • UNITED STATES GOVERNMENT ①

TO : Miss K. Haller, X-2
FROM : OSS Draft Deferment Committee
SUBJECT:

DATE: 21 August 1945

The local Board has notified us as follows:

James Arthur Noel Class 2-A Eff. Aug. 1, 1945 until indefinitely

*File**Office Memorandum* • UNITED STATES GOVERNMENT

TO : Mr. William Sherwood
FROM : M. L. Brockdorff
SUBJECT: Mr. James Arthur Noel

DATE: 17 October 1944

(1)

This office is in receipt of advice from Mr. Noel's Local Board, dated 12 October 1944, that he has been classified II-A until 9 April 1945. The Local Board also stated that their records show that the registrant was never ordered for a pre-induction physical examination by that Board.

M. L. B.

M. L. Brockdorff
Administrative Assistant

SECRET

REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

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



CHIEF OF MISSION'S EVALUATION OF PERFORMANCE

(Mission submits original and one copy directly to appropriate agency; retains one copy.)

OFFICER BEING RATED Chief, CAS <i>No. 1, Tarn. A</i>		POST Madrid, Spain	
POSITION Chief, Liaison Section		GRADE FSR-2	AGENCY CAS
RATING PERIOD 9/4/64 to 10/31/65		DATE OF REPORT December 15, 1965	
SIGNATURE OF REPORTING OFFICER <i>Angier Biddle Duke</i> Angier Biddle Duke		TITLE Ambassador	
SIGNATURE OF REVIEWING OFFICER		TITLE	

EVALUATION OF PERFORMANCE

Outstanding Satisfactory Unsatisfactory

- II. Does this officer properly understand and perform his role and his functions as a member of your staff under existing Presidential directives? Yes No (If no, explain in detail below.)
- Has he seen this report? Yes No

NARRATIVE COMMENTS

(Attach additional sheets, if necessary for this section or for reviewing officer's comments.)

Chief, CAS is one of the ablest members of my Country Team. He has a profound knowledge and understanding of the complex Spanish political scene, and scores of valuable contacts. I have a healthy respect for his judgment, and frequently seek his advice and counsel.

He manages his staff effectively and enjoys their respect and confidence. Popular and well liked by his colleagues in the Embassy and the Spanish Government, Chief, CAS is an excellent representative of our Government.

Chief, CAS is prudent and discreet, and I have complete confidence in him. He is a man of few words but when he expresses himself, he does so in a meaningful way.

III. A gifted analyst with an incredibly deep grasp of the complicated Spanish mentality, Chief, CAS' assessment and opinions are highly valued by me and the members of my Country Team.

Chief, CAS and his associates have been most cooperative at all times, and have provided me with excellent support. I regard their operation superior in every respect which is a compliment to Chief, CAS' skillful leadership and direction.

Chief, CAS' wife is an attractive American lady who is an asset to her husband. She takes an active part in community affairs.

THIS DOCUMENT CONSISTS OF ONE PAGE. COPY NUMBER 1 OF TWO COPIES, SERIES A.

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	059292	43	500	CF GS 16 6	\$24,477	\$26,640

SECRET

NOTIFICATION OF ESTABLISHMENT OF OFFICIAL COVER BACKSTOP		DATE 22 July 1966
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	ESTABLISHED FOR NOEL, James A.
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) DOD	
ATTN: Personnel	FILE NO. 233	
REF: Verbal Request	ID CARD NO.	
OFFICIAL COVER BACKSTOP ESTABLISHED POs, Evaluation Office (SAN FRANCISCO, CALIF)	EMPLOYEE NO.	

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

Block Records:
(OPMRS 20-800-11)

- a. Temporarily for _____ days, effective _____
- b. Continuing, effective _____ EOD _____

Submit Form 642 to change limitation category:
(RHB 20-7)

Ascertain that Army W-2 being issued.
(HB 20-282-1)

Submit Form 1322 (R 240-250) to change effecting this cover.

Submit Form 1323 (R 240-250) to transfer cover responsibility.

Remarks:

Cover History

1944-1947	OSS/CIG	
1947-1949		/Guatemala
1949-1951		/Argentina
1951-1955		/Venezuela
1956-1958		/Hdqs
1959-1961		/Cuba
1961-1961		/Hdqs
1961-1966		/Madrid Spain

CD/nz

CHIEF, OFFICIAL COVER CCS

DISTRIBUTION: Copy 1-POD, Copy 2-Operating Component, Copy 3-OS D'OS, Copy 4-OL/TELSVC, Copy 5-PSD/OS, Copy 6-OCS/OPS, Copy 7-File

FORM 1551 USE PREVIOUS EDITIONS

SECRET

(13-20-43)

THIS MEMO MUST REMAIN ON TOP OF FILE

PLW: 15 AUG 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DEFI

1. SERIAL NUMBER 055232		2. NAME (LAST FIRST MIDDLE) NOEL JAMES A	
3. NATURE OF PERSONNEL ACTION RESIGNATION		4. EFFECTIVE DATE 08 03 68	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V	V TO CF	7. Financial Analysts Reg. Chargeable
	CF TO V	CF TO CF	
9. ORGANIZATIONAL DESIGNATIONS DDP/ODD US FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE		10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION

14. LAST NAME Noel	15. FIRST NAME James	INITIALS A.	16. APPOINTMENT DATA Entered on duty P/Y P/Y Subject to Sec. 203(d), 1951 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/> Ceased to be subject to Sec. 203(d) on _____ Annual Leave Bal _____	17. TOTAL SERVICE FOR LEAVE (as of date of separation) Years Months Days
4. DATE AND NATURE OF SEPARATION Retirement: 3/31/71 8-3-68			<input type="checkbox"/> More than 15 years 18. SUMMARY OF ANNUAL AND SICK LEAVE (HOURS) 19. SUMMARY OF HOME LEAVE (DAYS) 20. REMARKS SCD: 1/26/31 5 Unused Sick Leave 5 USC Ch. 63	

5. Advance from prior leave year ended 1/9 1971 6. Current leave year accrual through 3/20 1971 Total 7. Deduction in credits, if any, (current year) 8. Total leave taken 9. Balance		ANNUAL 480 40 520 0 40 480	SICK 1901 20 1921 0 0 1921	14. Date arrival abroad for HQ purposes _____ 15. Current balance as of _____ 19 None 16. 12-month accrual rate _____ 17. Dates leave used, prior 24 months _____ 18. Monthly accrual date _____ 19. Calendar days credit for next accrual date _____ 20. Date basic service period completed _____ MILITARY LEAVE 21. Dates during current calendar yr _____ to _____ 22. Dates during preceding calendar yr _____ to _____ ABSENCE WITHOUT PAY A WOP or AWOP or Full-length Suspension (Hours) 23. During leave year in which separated 0 0 24. During leave year in which separated pending which began on 10/5/69 0 0 25. During 18-month HQ accrual period (dates) _____	11. Total hours paid in lump sum 480 hrs. + 1 Holiday 12. Salary rate: \$33,757.00 13. Lump-sum leave dates From 6/1/71 to 6/24/71 (Hours)
26. <i>[Signature]</i> (Signature) Asst. Cert. Officer (Title)		(Date) (Telephone)		U.S. CIVIL SERVICE COMMISSION FPM SUPPLEMENTS 290-31 AND 900-2	

RECORD OF LEAVE DATA TRANSFERRED

[Handwritten Signature]

7-15

115C
Rev. 8-67

Use Previous Edition

SECRET

FVD

Includes Form 5000-2
 (When Filled In)

SECRET
(When Filled In)

JLB: 14 MAY 68

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 055292		2. NAME (LAST FIRST MIDDLE) NOEL JAMES A	
3. NATURE OF PERSONNEL ACTION REMOVAL FROM CIA RETIREMENT AND DISABILITY SYSTEM-VOLUNTARY			4. EFFECTIVE DATE MO DA YR 05 05 68
5. CATEGORY OF EMPLOYMENT REGULAR			6. FUNDS V TO V CF TO V X V TO CF CF TO CF
7. Financial Analysis No. Chargeable 8129 0256 0000		8. CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203	
9. ORGANIZATIONAL DESIGNATIONS DDP/DOD		10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (SEE LR #1)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP 16
17. SALARY OR RATE			
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGRITY CODE	24. MILITARY CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. NIE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CODE 2. CLS 3. YRS 4. MONTHS	31. SEPARATION DATA CODE	32. Correction/Conciliation Data MO DA YR	EOD DATA		33. SECURITY REG. NO.	34. SEX
35. VET. PREFERENCE CODE 0 NONE 1 5 YRS 2 10 YRS	36. SERV. COMP. DATE MO DA YR	37. LONG. COMP. DATE MO DA YR	38. CAREER CATEGORY LAB. SERV. CODE PROV. TEACH.	39. REGU. HEALTH INSURANCE CODE CODE 0 WAIVER 1 YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO PREVIOUS SERVICE 2 SERVED IN SERVICE (LESS THAN 3 YRS) 3 SERVED IN SERVICE (MORE THAN 3 YRS)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1 YES 2 NO		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1 YES 2 NO				STATE CODE

SIGNATURE OR OTHER AUTHENTICATION

POSTED
R.S.
5-14-68

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	055292	43	500	CF GS 16 5	\$22,755	\$23,778

MAH: 25 OCT 67

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 055292	2. NAME (LAST-FIRST-MIDDLE) NOEL JAMES A
----------------------------	---

3. NATURE OF PERSONNEL ACTION REASSIGNMENT	4. EFFECTIVE DATE 10 108 67	5. CATEGORY OF EMPLOYMENT REGULAR
---	--------------------------------	--------------------------------------

6. FUNDS CF TO V	7. Financial Analysis No. Chargeable 8129 0256 0000	8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
---------------------	--	---

9. ORGANIZATIONAL DESIGNATIONS DDP/DOD U.S. FIELD INTELLIGENCE OPERATIONS GROUP SAN FRANCISCO BASE	10. LOCATION OF OFFICIAL STATION SAN FRANCISCO, CALIFORNIA
--	---

11. POSITION TITLES CHIEF OF BASE	12. POSITION NUMBER 0150	13. SERVICE DESIGNATION D
--------------------------------------	-----------------------------	------------------------------

14. CLASSIFICATION SCHEDULE (GS, GS, etc.) GS	15. OCCUPATIONAL SERIES 0136.08	16. GRADE AND STEP 16 6	17. SALARY OR RATE 28425
--	------------------------------------	----------------------------	-----------------------------

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 43500 ALPHABETIC: DOD	22. STATION CODE 75007	23. INTEGREE CODE	24. HQ/IN CODE 2	25. DATE OF BIRTH 03 19 11	26. DATE OF GRADE	27. DATE OF LEI
28. NTE EMPHASES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REQ. NO.	34. SEA	EOD DATA	
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA					

SIGNATURE OR OTHER AUTHENTICATION

POSTED
R.S.
10-25-67

FORM 5-66 1150

Use Previous Edition

SECRET

FVD

GROUP 1
Excluded from automatic
downgrading and
declassification

(4-0)

(When Filled In)

33165

D-25

1. SERIAL NO.		2. NAME		3. ORGANIZATION	4. FUNDS	5. LWOP HOURS			
055292		NOEL JAMES A		43 620	CF				
6. OLD SALARY RATE				7. NEW SALARY RATE			8. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
PS 10	9	\$22,755	10/10/65	PS 10	6	\$25,425	10/08/67		
5. CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>Stanlyff P. Davis</i>						<i>11 Aug 67</i>			
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS						OFFICER BY			
<i>[Handwritten initials]</i>						<i>[Handwritten initials]</i>			
FORM 7-66 560 E		Use previous editions		PAY CHANGE NOTIFICATION				(4-51)	

MAIL ROOM

RS

SECRET
(When Filled In)

3132

PLT: 20 107 66

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST MIDDLE)
055292 NOEL JAMES A

3. NATURE OF PERSONNEL ACTION 4. EFFECTIVE DATE 5. CATEGORY OF EMPLOYMENT
REASSIGNMENT - CORRECTION 08 14 66 REGULAR

6. FUNDS 7. Financial Analysis No. Chargeable 8. CSC OR OTHER LEGAL AUTHORITY
V TO V V TO CF 7129 0256 0000

9. ORGANIZATIONAL DESIGNATIONS 10. LOCATION OF OFFICIAL STATION
DDP/DOO US FIELD UNITED STATES STATION SAN FRANCISCO BASE OFFICE OF THE CHIEF SAN FRANCISCO, CALIFORNIA

11. POSITION TITLE 12. POSITION NUMBER 13. SERVICE DESIGNATION
CHIEF OF BASE 0150 D

14. CLASSIFICATION SCHEDULE (GS, LO, etc.) 15. OCCUPATIONAL SERIES 16. GRADE AND STEP 17. SALARY OR RATE
GS 0135.02 16 5 22755

18. REMARKS
THIS ACTION CORRECTS FORM 1150 TO CHANGE EFFECTIVE DATE WHICH READ 08/10/55 TO READ 08/14/66.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRAL CODE		24. HOURS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
				NUMERIC ALPHABETIC								MO DA YR		MO DA YR		MO DA YR	
												03 19 11					
28. NIE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO.		34. SEX					
NO. DA YR				1. CSC 2. CIA 3. FICA 4. NONE				TYPE NO DA YR		EOD DATA							
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FECL/ HEALTH INSURANCE		40. SOCIAL SECURITY NO.							
CODE		MO DA YR		MO DA YR		CODE		CODE NO. WAIVER HEALTH INS CODE									
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA											
CODE		CODE		FORM EXECUTED CODE NO. TAX EXEMPTIONS		FORM EXECUTED CODE NO. TAX EXEMPTIONS											
1. NO. FEDERAL SERVICE 2. NO. STATE SERVICE 3. FEDERAL SERVICE (LESS THAN 3 YRS) 4. STATE SERVICE (MORE THAN 1 YRS)				1. YES 2. NO		1. YES 2. NO											

SIGNATURE OR OTHER AUTHENTICATION

POSTED
11-30-66 AS

FORM 1150 5 66

Use Previous Edition

SECRET

GROUP 1 Excluded from automatic downgrading and declassification

(When Filled In)

RZF 2 AUG 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 055292	2. NAME (LAST-FIRST-MIDDLE) NOEL JAMES A
-----------------------------------	--

3. NATURE OF PERSONNEL ACTION CONVERSION FROM STATUS	4. EFFECTIVE DATE MO 08 YR 66	5. CATEGORY OF EMPLOYMENT REGULAR
--	--	---

6. FUNDS V TO V CF TO V <input checked="" type="checkbox"/> V TO CF CF TO CF	7. COST CENTER NO. CHARGEABLE 7136 1347 0000	8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
--	--	--

9. ORGANIZATIONAL DESIGNATIONS DOP/VE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF	10. LOCATION OF OFFICIAL STATION MADRID, SPAIN
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11. POSITION TITLE CHIEF OF STATION	12. POSITION NUMBER 0399	13. SERVICE DESIGNATION D
---	------------------------------------	-------------------------------------

14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15. OCCUPATIONAL SERIES 0136.05	16. GRADE AND STEP 16 5	17. SALARY OR RATE 22755
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18. REMARKS
MADRID, SPAIN

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 56	20. EMPLOY. CODE 10	21. OFFICE CODING NUMERIC 50660 ALPHABETIC WE	22. STATION CODE 67033	23. INTEGREE CODE	24. HAZTEL CODE 3	25. DATE OF BIRTH MO 03 DA 19 YR 11	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CSC 2. FICA 3. NONE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA		33. SECURITY REQ. NO.	34. SER
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 PT. 2 - 10 PT.	36. SERV. COMP. DATE MO DA YR	37. LONG. COMP. DATE MO DA YR	38. CAREER CATEGORY CAR RESV PROV TEMP	39. FEGLI / HEALTH INSURANCE CODE CODE 0 - WAIVER 1 - YES	HEALTH INS. CODE		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 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)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPT STATE CODE			

SIGNATURE OR OTHER AUTHENTICATION

0803 607

PJH: 10 AUG 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
OCF											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
055292		NOEL JAMES A									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				08 10 66		REGULAR					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		X		CF TO CF		7129 0256 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP/DOD U.S. FIELD UNITED STATES STATION SAN FRANCISCO BASE OFFICE OF THE CHIEF				SAN FRANCISCO, CALIFORNIA							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION					
CHIEF OF BASE				0150		D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY GRADE				
GS			0136.08		16 5		22755				
10. REMARKS:											
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. MONTH CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI	
37	10	43620 DOD		75007		2	03 19 11				
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.	34. SEX
								EOD DATA			
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CARRIER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.		43. FEDERAL TAX DATA			44. STATE TAX DATA		
SIGNATURE OR OTHER AUTHENTICATION											
FROM: WE											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <i>del 8.11.66</i> </div>											

FORM 11-62 1150

Use Previous Edition

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(4-5)

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504,
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	035292	50	660	CF GS 16 5	\$22,331	\$22,755

E.L.O.

PJH: 17 JAN 66

SECRET
(When Filled In)

ODF NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER: 055292
2. NAME (LAST-FIRST-MIDDLE): NOEL JAMES A

3. NATURE OF PERSONNEL ACTION: DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM
4. EFFECTIVE DATE: 01 16 66
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: [] V TO V [] V TO G [] G TO V [X] G TO G
7. COST CENTER NO. CHARGEABLE: 6136 1347 0000
8. CSC OR OTHER LEGAL AUTHORITY: SECTION 203 P.L.88-643

9. ORGANIZATIONAL DESIGNATIONS: DDP/WE FOREIGN FIELD MADRID STATION OFFICE OF THE CHIEF
10. LOCATION OF OFFICIAL STATION: MADRID, SPAIN

11. POSITION TITLE: CHIEF OF STATION
12. POSITION NUMBER: 0399
13. SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (GS, etc.): GS
15. OCCUPATIONAL SERIES: 0136.05
16. GRADE AND STEP: 02 4 16 5
17. SALARY OR RATE: 20928 22331

18. REMARKS: EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.
MADRID, SPAIN

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. HOURS CODE	25. DATE OF BIRTH			26. DATE OF GRADE			27. DATE OF LEI		
28	10	NUMERIC: 50660	ALPHABETIC: WE	67033	F	3	MO: 03	DA: 19	YR: 11	MO: 03	DA: 20	YR: 60	MO: 10	DA: 10	YR: 65
28. WTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA			33. SECURITY REG. NO.			34. SEX			
			1 - CSC 2 - FICA 3 - NONE		CODE: 2	EOD DATA									
35. (VE) 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.		NO. DA. YR.		NO. DA. YR.		CAP. SERV. PRIOR / TEMP.		CODE CODE 0 - WAIVER 1 - YES			HEALTH INS. CODE				
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA						
CODE: 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)						FORM EXECUTED CODE NO TAX EXEMPTIONS			FORM EXECUTED CODE NO TAX EXEMPT. STATE CODE						

SIGNATURE OF OTHER AUTHENTICATION

POSTED
[Signature]

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
 PURSUANT TO AUTHORITY OF PCT AS PROVIDED IN THE CIA ACT OF 1949,
 AS AMENDED, AND ADPCI POLICY DIRECTIVE DATED 1 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	055292	50	660	CF GS 16 5	\$21,555	\$22,331

F57

1. Serial No.		2. Name			3. Cost Center Number		4. LWOP Hours			
055292		NOEL JAMES A			50 660 CF					
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 16	4	\$20,900	10/13/63	GS 16	5	\$21,555	10/10/65			
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>67</i>										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>W. J. [Signature]</i> DRSE 20 Aug 1965										
PAY CHANGE NOTIFICATION										

SECRET
(When Filled In)

57
NCS 06/16/69

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 055292		2. NAME (LAST-FIRST MIDDLE) NOEL JAMES A	
3. NATURE OF PERSONNEL ACTION SERIES CODE ADJUSTMENT			4. EFFECTIVE DATE MO DA YR 06 07 69
5. CATEGORY OF EMPLOYMENT		6. COST CENTER NO. - CHARGABLE 9136 1347 0000	
7. FUNDS	V TO V CF TO V	V TO CF X CF TO CF	8. CSC OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DDP/7HE DIVISION		10. LOCATION OF OFFICIAL STATION MADRID, SPAIN	
11. POSITION TITLE CHIEF OF STATION		12. POSITION NUMBER 0399	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS-18, etc.) GS	15. OCCUPATIONAL SERIES 0136.05	16. GRADE AND STEP 16	17. SALARY OR RATE
18. REMARKS			
<div data-bbox="819 1234 1134 1436" data-label="Text"> <p>POSTED Jun 6. 21. 69</p> </div>			
SIGNATURE OR OTHER AUTHENTICATION			

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-795 AND
CCI MEMORANDUM DATED 1 AUGUST 1986, SALARY IS ADJUSTED AS FOLLOWS:
EFFECTIVE 14 OCTOBER 1982

NAME	SERIAL	ORGN	FUNDS	OLD		NEW	
				GR	SALARY	GR	SALARY
NOEL JAMES A	055292	62460	CF 16 2	\$15515	16 2	\$16500	

SECRET
(When Filled In)

1. Serial No.		2. Name			3. Cost Center Number			4. LWOP Hours		
055292		NOEL JAMES A			62 660 CF					
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PBI	LRI	ADI
GS-16	2	\$16,500	09/17/81	S-16	3	\$17,000	10/14/82			
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>[Signature]</i>						DATE: 24 Oct 1982				
PAY CHANGE NOTIFICATION										

AES: 26 JULY 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
OD:															
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)													
055292		NOEL JAMES A													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT						
REASSIGNMENT						07 23 61			REGULAR						
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE			8. CSC OR OTHER LEGAL AUTHORITY						
CF TO V		X		CF TO CF		2135 1990 1000			50 USC 403 d						
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
CS/CS DEV COMP DDP WH DIVISION						HAVANA, CUBA									
11. POSITION TITLE						12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION						
CHIEF OF STATION						9997			D						
14. CLASSIFICATION SCHEDULE (GS, WD, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE							
GS				0136.01		03 0 16 1		13600 15255							
18. REMARKS															
RETRUNEE CASUAL															
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. HOURS CODE	25. DATE OF BIRTH			26. DATE OF GRADE		27. DATE OF LEI			
37	14	NUMERIC	ALPHABETIC	17085	1	3	MO.	DA.	YR.	MO.	DA.	YR.	MO.	DA.	YR.
		64997	WH				03	19	11						
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REG NO		34. SEX		
MO. DA. YR.				1. CSC 2. WCA 3. WCA				TYPE MO. DA. YR.			EOD DATA				
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. MIL. SERV. CREDIT/LED		39. FEGLI / HEALTH INSURANCE			40. SOCIAL SECURITY NO.				
CODE		MO. DA. YR.		MO. DA. YR.		1. YES 2. NO		CODE CODE 0 WAIVER 1. YES			HEALTH INS. CODE				
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA					
CODE				CODE		FORM EXECUTED; CODE NO. TAX EXEMPTIONS				FORM EXECUTED; CODE NO. TAX EXEMP. STATE CODE					
0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE (LESS THAN 42 MOS) 3. BREAK IN SERVICE (MORE THAN 42 MOS)						1. YES 2. NO				1. YES 2. NO					
SIGNATURE OR OTHER AUTHENTICATION															
FOUR D															
2/28/61: RST															

Form 6-60 1150

Obsolete Previous Editions

SECRET

(4-51)

055292/27/61

PSC: 7 SEPT 1961

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
ODF												
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)										
055292		NOEL JAMES A										
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT					08 20 61		REGULAR					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. USE OR OTHER LEGAL AUTHORITY				
CF TO V		X		CF TO CF		2136 6400 1017		50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION							
DOP WE MADRID STATION OFFICE OF THE CHIEF					MADRID, SPAIN							
11. POSITION TITLE					12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
CHIEF OF STATION					0399		D					
14. CLASSIFICATION SCHEDULE (GS, NW, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
FSR GS			0136.01		03 0 16 1		13600 15255					
18. REMARKS												
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. MONTH	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI		
37	10	NUMERIC	ALPHABETIC	62660 WE	67033 1	3	MO	DA	YR	MO	DA	YR
28. NIE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.	34. SEX	
MO DA YR		1 - CSC 2 - PICA 3 - NONE		CODE		TYPE MO DA YR		EOD DATA		MO DA YR		
35. VET. PREFERENCE		36. SERV. COMP DATE		37. LONG. COMP. DATE		38. MIL. SERV. CREDIT/LCO		39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO.		
CODE		MO DA YR		MO DA YR		1 - YES 2 - NO		CODE CODE 0 - WAIVED 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 STATE CODE EXEMP			
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)				1 - YES 2 - NO		1 - YES 2 - NO			1 - YES 2 - NO			
SIGNATURE OR OTHER AUTHENTICATION												
9-11-61 [Signature]												

Form 6-60 1150

Obsolete Previous Editions

SECRET

(4.9)

Jan 9-7-61

AES: 6 APRIL 61

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)								
055292		NOEL JAMES A								
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
CONVERSION TO PERMANENT SUPERGRADE RANK*				04 06 61		REGULAR				
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY		
CF TO V		X		CF TO CF				50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION					
DDP WH BRANCH 4 HAVANA CUBA STATION					HAVANA CUBA					
11. POSITION/TITLE			12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
CHIEF OF STATION			0114		0					
14. CLASSIFICATION (SCHEDULE ACS, WB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY RATE			
GS			0136.01		02 0 16 1		11740 15255			
18. REMARKS										
*THE DIRECTOR OF CENTRAL INTELLIGENCE ON 6 APRIL 1961 APPROVED YOUR PERMANENT GRADE AS GS 16.										
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. MONTH CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LES
		NUMERIC ALPHABETIC					MO DA YR		MO DA YR	MO DA YR
28. NTR EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA			33. SECURITY REG. NO.	
MO DA YR			1 - CSC 2 - FICA 3 - NONE			TYPE MO DA YR			EOD DATA	
34. VSP PREFERENCE	35. SERV. COMP. DATE		36. LONG COMP. DATE		37. MIL. SERV. CREDIT/CD	38. FEGLI / HEALTH INSURANCE		39. SOCIAL SECURITY NO.		
CODE	0 - NONE 1 - 5 YR 2 - 10 YR		MO DA YR		1 - YES 2 - NO	CODE CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE		
40. PREVIOUS GOVERNMENT SERVICE DATA			41. LEAVE CAT CODE	42. FEDERAL TAX DATA			43. STATE TAX DATA			
CODE				FORM EXECUTED CODE NO. TAX EXEMPTIONS			FORM EXECUTED CODE NO. STATE CODE			
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 12 MOS) 3 - BREAK IN SERVICE (MORE THAN 12 MOS)				1 - YES 2 - NO			1 - YES 2 - NO			
SIGNATURE OR OTHER AUTHENTICATION										
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> TO 42761 WH </div>										

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	NOEL JAMES A	555292	46 52	GS-16 1	\$14,190	\$15,255

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

PAS: 11 MARCH 1960

1. Serial No. 555292		2. Name (Last-First-Middle) NOEL JAMES A			3. Date Of Birth Mo. Da. Yr. 03 19 11			4. Vet. Pref. None-0 5 Pt-1 10 Pt-2 0		5. Sex M 1		6. CS-ECB Mo. Da. Yr. 09 18 47		
7. SCD Mo. Da. Yr. 01 26 31		8. CSC Reim. Yes-1 No-2 1		9. CSC Or Other Legal Authority 50 USCA 403 J		10. Apmt Affidav. Mo. Da. Yr.			11. FEGLI Yes-1 No-2		12. LCD Mo. Da. Yr. 09 18 47		13. ¹⁰ ¹¹ ¹² ¹³ ¹⁴ ¹⁵ ¹⁶ ¹⁷ ¹⁸ ¹⁹ ²⁰ ²¹ ²² ²³ ²⁴ ²⁵ ²⁶ ²⁷ ²⁸ ²⁹ ³⁰ ³¹ ³² ³³ ³⁴ ³⁵ ³⁶ ³⁷ ³⁸ ³⁹ ⁴⁰ ⁴¹ ⁴² ⁴³ ⁴⁴ ⁴⁵ ⁴⁶ ⁴⁷ ⁴⁸ ⁴⁹ ⁵⁰ ⁵¹ ⁵² ⁵³ ⁵⁴ ⁵⁵ ⁵⁶ ⁵⁷ ⁵⁸ ⁵⁹ ⁶⁰ ⁶¹ ⁶² ⁶³ ⁶⁴ ⁶⁵ ⁶⁶ ⁶⁷ ⁶⁸ ⁶⁹ ⁷⁰ ⁷¹ ⁷² ⁷³ ⁷⁴ ⁷⁵ ⁷⁶ ⁷⁷ ⁷⁸ ⁷⁹ ⁸⁰ ⁸¹ ⁸² ⁸³ ⁸⁴ ⁸⁵ ⁸⁶ ⁸⁷ ⁸⁸ ⁸⁹ ⁹⁰ ⁹¹ ⁹² ⁹³ ⁹⁴ ⁹⁵ ⁹⁶ ⁹⁷ ⁹⁸ ⁹⁹ ¹⁰⁰ ¹⁰¹ ¹⁰² ¹⁰³ ¹⁰⁴ ¹⁰⁵ ¹⁰⁶ ¹⁰⁷ ¹⁰⁸ ¹⁰⁹ ¹¹⁰ ¹¹¹ ¹¹² ¹¹³ ¹¹⁴ ¹¹⁵ ¹¹⁶ ¹¹⁷ ¹¹⁸ ¹¹⁹ ¹²⁰ ¹²¹ ¹²² ¹²³ ¹²⁴ ¹²⁵ ¹²⁶ ¹²⁷ ¹²⁸ ¹²⁹ ¹³⁰ ¹³¹ ¹³² ¹³³ ¹³⁴ ¹³⁵ ¹³⁶ ¹³⁷ ¹³⁸ ¹³⁹ ¹⁴⁰ ¹⁴¹ ¹⁴² ¹⁴³ ¹⁴⁴ ¹⁴⁵ ¹⁴⁶ ¹⁴⁷ ¹⁴⁸ ¹⁴⁹ ¹⁵⁰ ¹⁵¹ ¹⁵² ¹⁵³ ¹⁵⁴ ¹⁵⁵ ¹⁵⁶ ¹⁵⁷ ¹⁵⁸ ¹⁵⁹ ¹⁶⁰ ¹⁶¹ ¹⁶² ¹⁶³ ¹⁶⁴ ¹⁶⁵ ¹⁶⁶ ¹⁶⁷ ¹⁶⁸ ¹⁶⁹ ¹⁷⁰ ¹⁷¹ ¹⁷² ¹⁷³ ¹⁷⁴ ¹⁷⁵ ¹⁷⁶ ¹⁷⁷ ¹⁷⁸ ¹⁷⁹ ¹⁸⁰ ¹⁸¹ ¹⁸² ¹⁸³ ¹⁸⁴ ¹⁸⁵ ¹⁸⁶ ¹⁸⁷ ¹⁸⁸ ¹⁸⁹ ¹⁹⁰ ¹⁹¹ ¹⁹² ¹⁹³ ¹⁹⁴ ¹⁹⁵ ¹⁹⁶ ¹⁹⁷ ¹⁹⁸ ¹⁹⁹ ²⁰⁰ ²⁰¹ ²⁰² ²⁰³ ²⁰⁴ ²⁰⁵ ²⁰⁶ ²⁰⁷ ²⁰⁸ ²⁰⁹ ²¹⁰ ²¹¹ ²¹² ²¹³ ²¹⁴ ²¹⁵ ²¹⁶ ²¹⁷ ²¹⁸ ²¹⁹ ²²⁰ ²²¹ ²²² ²²³ ²²⁴ ²²⁵ ²²⁶ ²²⁷ ²²⁸ ²²⁹ ²³⁰ ²³¹ ²³² ²³³ ²³⁴ ²³⁵ ²³⁶ ²³⁷ ²³⁸ ²³⁹ ²⁴⁰ ²⁴¹ ²⁴² ²⁴³ ²⁴⁴ ²⁴⁵ ²⁴⁶ ²⁴⁷ ²⁴⁸ ²⁴⁹ ²⁵⁰ ²⁵¹ ²⁵² ²⁵³ ²⁵⁴ ²⁵⁵ ²⁵⁶ ²⁵⁷ ²⁵⁸ ²⁵⁹ ²⁶⁰ ²⁶¹ ²⁶² ²⁶³ ²⁶⁴ ²⁶⁵ ²⁶⁶ ²⁶⁷ ²⁶⁸ ²⁶⁹ ²⁷⁰ ²⁷¹ ²⁷² ²⁷³ ²⁷⁴ ²⁷⁵ ²⁷⁶ ²⁷⁷ 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GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
GS 15	3	\$13,370	07	28	57	GS 15	4	\$13,670	01	25	59
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED, OR PRINTED, NAME OF SUPERVISOR			DATE			SIGNATURE OF SUPERVISOR					
ROBERT N. DAHLGREN			11 Dec. 1958			<i>Robert N. Dahlgren</i>					
PERIODIC STEP INCREASE - CERTIFICATION											

FORM NO. 560
MAR. 56

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME				3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT	
555292		NOEL JAMES A				DDP/WH		UV			
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
GS 15	3	\$13,370	07	28	57	GS 15	4	\$13,670	01	25	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE: <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO.	DA.	YR.	544 7/10 1711 C.F.E.					
14. AUTHENTICATION											

FORM 560

SECRET

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
NOEL JAMES A	555292	GS-15-3	\$12,150	\$13,370

GORDON M. STEWART
757 DIRECTOR OF PERSONNEL

SECRET

SECRET
(When Filled In)

DMG 4 APR 58												NOTIFICATION OF PERSONNEL ACTION					
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vac. Pref.		5. Sex		6. CS - LOD				
555292		NOEL JAMES A				Mo.	Da.	Yr.	None-0	Code	M	1	Mo.	Da.	Yr.		
03		19		11	5 Pt-1		10 Pt-2	0				09	18	47			
7. SCD		8. CSC Rmt.		9. CSC Or Other Legal Authority		10. Appt. Affidav.			11. FEGLI		12. LCD		13. Mil. Serv. Lea.				
Mo.	Da.	Yr.	Yes-1	Code	50 USCA 403		Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.			
01	26	31	No-2	1						No-2		09	18	47			

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code	15. Location Of Official Station				Station Code	
DDP WH BRANCH 11 ARGENTINA SECTION					WASH. D.C.					
16. Dept. - Field		17. Position Title			18. Position No.		19. Serv.	20. Occup. Series		
Dept. - 1	Code	AREA OPS OFF BR CH			0460		GS	0136.01		
USStd. - 3										
Fig. - 5										
21. Grade & Step		22. Salary Or Rate		23. SD	24. Date Of Grade		25. Pst. Due		26. Appropriation Number	
02		\$925		DI	Mo. Da. Yr.		Mo. Da. Yr.		8 3500 10 200	
15 3		\$12150								

ACTION

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Data
REASSIGNMENT		67	04 06 58		REGULAR		OM	

PRESENT ASSIGNMENT

31. Organizational Designations				Code	32. Location Of Official Station				Station Code	
DDP WH BRANCH 111 HAVANA CUBA STATION				4652	HAVANA CUBA				17025	
33. Dept. - Field		34. Position Title			35. Position No.		36. Serv.	37. Occup. Series		
Dept. - 1	Code	CHIEF OF STATION			0114		GS	0136.01		
USStd. - 3										
Fig. - 5										
38. Grade & Step		39. Salary Or Rate		40. SD	41. Date Of Grade		42. Pst. Due		43. Appropriation Number	
02		\$925		DI	Mo. Da. Yr.		Mo. Da. Yr.		8 3545 55 055	
15 3		\$12150			03 01 54		01 25 59			

44. Remarks

POSTED
9 MAY 1958

DC 411/58

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 555292		2. NAME NOEL JAMES A			3. ASSIGNED ORGAN. DDP/WH - 3		4. FUNDS UV		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
15	2	\$11,880	01	29	56	15	3	\$12,150	07	28	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED OR PRINTED NAME OF SUPERVISOR J. C. KING				DATE 16 July 57		SIGNATURE OF SUPERVISOR <i>J. C. King</i>					
PERIODIC STEP INCREASE CERTIFICATION											

FORM NO. 560
1 MAR. 56

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 555292		2. NAME NOEL JAMES A			3. ASSIGNED ORGAN. DDP/WH		4. FUNDS UV		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO.	DA.	YR.				MO.	DA.	YR.
15	2	\$11,880	01	29	56	15	3	\$12,150	07	28	57
8. CHECK ONE: <input type="checkbox"/> NO EXCESS LWOP IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
9. TO BE COMPLETED BY THE OFFICE OF COMPTROLLER						9. NUMBER OF HOURS LWOP					
10. INITIALS OF CLERK:						11. AUDITED BY					
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE					13. REMARKS						
GRADE	STEP	SALARY	MO.	DA.	YR.	<i>W. King</i> <i>07/28/57</i> <i>12/25/57</i> <i>12/25/57</i>					
14. AUTHENTICATION											
PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO. 560a
1 MAR. 56

SECRET

PERSONNEL FOLDER (4)

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIALS) AND SURNAME: MR. JAMES A. NOEL		2. DATE OF BIRTH 19 Mar 1911	3. JOURNAL OR ACTION NO.	4. DATE 28 Jun 1957
555292				
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) REASSIGNMENT		6. EFFECTIVE DATE 10 Jun 1957	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403 j	
FROM BA-40		TO		
Branch I		8. POSITION TITLE Area Ops Officer (Br Ch) BA-460 (Attache)	9. SERVICE SERIES, GRADE, SALARY GS-0136, 01-15 \$11,880.00 per annum (PSS-3 \$9635.00 per annum)	
		10. ORGANIZATIONAL DESIGNATION 467552	DDP/WH Branch II Argentina Section	
		11. HEADQUARTERS 1	Washington, D. C.	
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONL	WWII	OTHER	5-PT.	10-POINT
<input checked="" type="checkbox"/>				
15. SEX M		16. APPROPRIATION FROM 7-3500-10-200 TO: 6819	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
		750-13		19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
20. REMARKS: 3 EOD 09/18/47				
ENTRANCE PERFORMANCE RATING: Director of Personnel		21. SIGNATURE OR OTHER AUTHENTICATION POSTED 5 JUL 1957 <i>Rw</i>		

SECRET

1-EMPLOYEE COPY

27 7/1/57

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL
(When Filled In)

U. S. GOVERNMENT PRINTING OFFICE: 1954-270090

1. Agency and organization: <i>Department of Justice</i>		2. Payroll period	3. Book No.	4. Slip No.										
5. Employee's name (and social security account number when appropriate) <i>MOORE, JAMES A. JR.</i>		6. Grade and salary <i>GS-15 \$11,510</i>												
PAYROLL CHANGE DATA														
	BASE PAY	OVERTIME	GROSS PAY	RET.	FEDERAL TAX	BOND	F. L. C. A.	STATE TAX	GROUP LIFE INS.	NET PAY				
7. Previous normal														
8. New normal														
9. Pay this period														
10. Remarks: <i>ON LEAVE</i>		11. Appropriation(s) <i>WT-5</i>		12. Prepared by <i>Tab 10 Nov 55</i>		13. Audited by								
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase														
14. Effective date <i>29 Jan 56</i>	15. Date last step-increase <i>Jan 55</i>	16. Old salary rate <i>\$11,510</i>	17. New salary rate <i>\$11,870</i>	18. Performance rating & satisfaction of superior <i>SERVICE AND CONDUCT ARE SATISFACTORY</i>										
19. LWOP data (fill in appropriate spaces covering LWOP during following period(s))		(Signature or other authentication) _____ (Check applicable box in case of excess LWOP) <input type="checkbox"/> in pay status at end of waiting period. <input type="checkbox"/> in LWOP status at end of waiting period.												
<input type="checkbox"/> No excess LWOP. Total excess LWOP _____		Initials of Clerk _____												
STANDARD FORM NO. 1126A—Revised					CONFIDENTIAL					PAYROLL CHANGE SLIP — PERSONNEL COPY				
Forms prescribed by Comp. Gen. U. S. October 26, 1954, General Regulations No. 102														

NOTIFICATION OF PERSONNEL ACTION

rvs

1. NAME (MR., MISS, MRS., ONE GIVEN NAME, INITIAL(S), AND SURNAME) MR. JAMES A. HOEL		2. DATE OF EXTS 19 Mar 1911	3. JOURNAL OR ACTION NO.	4. DATE 25 Jan 1956
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) REASSIGNMENT		6. EFFECTIVE DATE 29 Jan 1956	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 UBCA 403 J	
FROM Area Ops Off (Sta Ch) BAF-93		TO Area Ops Officer (B. C.) BA-40		
8. SERVICE, SERIES, GRADE, SALARY GS-0136.01-15 \$11,610.00 per annum (FSS-3 \$9180.00 per annum)		9. POSITION TITLE Area Ops Officer (B. C.) BA-40		
10. ORGANIZATIONAL DESIGNATIONS IDP/WE		10. ORGANIZATIONAL DESIGNATIONS IDP/WE		
11. HEADQUARTERS Caracas, Venezuela		11. HEADQUARTERS Washington, D. C.		
12. FIELD OR DEPTL <input checked="" type="checkbox"/> FIELD		12. FIELD OR DEPTL <input type="checkbox"/> FIELD		<input checked="" type="checkbox"/> DEPARTMENTAL
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> <input checked="" type="checkbox"/> OTHER		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> SD-DI		
15. SEX M	16. RACE W	17. APPROPRIATION FROM: 6-3588-55-066 TO: 6-3580-10-800		18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes
		19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: Calif.	
21. REMARKS: <div style="text-align: right; border: 1px solid black; padding: 5px; display: inline-block;">POSTED 26 JAN 1956</div>				
ENTRANCE PERFORMANCE RATING: Director of Personnel				
22. SIGNATURE OR OTHER AUTHENTICATION				

SECRET

1. EMPLOYEE COPY

Handwritten signature/initials

STANDARD FORM 52
PROPERTY OF THE
U. S. GOVERNMENT
GSA GEN. REG. NO. 27
MAY 1962 EDITION
GSA GEN. REG. NO. 27
MAY 1962 EDITION

SECRET

7/23/54
9/23/54
S

REQUEST FOR PERSONNEL ACTION

CONFIDENTIAL FUNDS

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) MR. JAMES A. NOEL	2. DATE OF BIRTH 19 Mar. 1911	3. REQUEST NO. -	4. DATE OF REQUEST 26 May 54
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) PROMOTION		6. EFFECTIVE DATE A. PROPOSED: ASAP	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: AUG 1 1954	

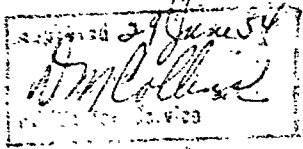
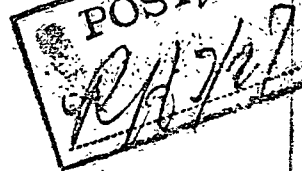
FROM AREA OPS OF (STA CH), BAF-93-14	9. POSITION TITLE AND NUMBER	TO AREA OPS OF (STA CH), BAF-93
GS-0136-01-14, \$9800.00 p.a. \$1929.00 p.a.)	10. SERVICE GRADE AND SALARY	GS-0136-01-15, \$10,800.00 p.a. \$1929.00 p.a.)
DDP/WH	11. ORGANIZATIONAL DESIGNATIONS	DDP/WH
CARACAS, VENEZUELA	12. HEADQUARTERS	CARACAS, VENEZUELA
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	13. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)
**BAF-93 PERIODIC STEP INCREASE DUE Step 1
TO SALARY \$ 10,000.00**

B. REQUESTED BY (Name and title) J King	D. REQUEST APPROVED BY J Keith Reid Signature: J Keith Reid Title: DDP Admin
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) V. C. LYNCH, x-4457	

13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5% <input type="checkbox"/> 10% <input type="checkbox"/> 15% <input type="checkbox"/> 20% <input type="checkbox"/> UNEMP. OTHER	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> GD: FI
---	--

15. SEX M	16. RACE W	17. APPROPRIATION FROM: 4-3503-55-066 TO: 8800	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF APPOINTMENT AFFILIATION (ACCESSION ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> APPROVED STATE: PA
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21. STANDARD FORM 29 REMARKS



22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			APPROVED BY FI CAREER SERVICE BOARD DATE: JUN 23 1954
B. CEIL. OR POS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL			
E.			
F. APPROVED BY Joseph B. Regan July 23, 1954. For Robert H. Regan			

SECRET

UNVOICED

2/23/54
1/8

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname) **Mr. James A. NOEL**
 2. DATE OF BIRTH **19 Mar. 1911**
 3. REQUEST NO. **-**
 4. DATE OF REQUEST **16 Feb. 54**

5. NATURE OF ACTION REQUESTED:
 A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)
Reassignment
 6. EFFECTIVE DATE A. PROPOSED: **28 Feb. 54**
 7. C. S. OR OTHER LEGAL AUTHORITY
 B. APPROVED: **FEB 28 1954**

8. POSITION (Specify whether establish, change grade or title, etc.)
 FROM: **OPS OF - CHIEF, BA-121-14**
GS-132-14, \$9800.00 p.a.
\$7929.00 p.a.)
DDP/WH
CARACAS, VENEZUELA
 FIELD DEPARTMENTAL
 TO: **AREA OPS OF - STA CH, BAF-93-14**
GS-0136.01-14, \$9800.00 p.a.
\$7929.00 p.a.)
DDP/WH
CARACAS, VENEZUELA
 FIELD DEPARTMENTAL

A. REMARKS (Use reverse if necessary)
BAF-93

B. REQUESTED BY (Name and title)
V. C. Lynch **C/WH**
 C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)
V. C. LYNCH, x-1457
 D. REQUEST APPROVED BY
 Signature: _____
 Title: _____

13. VETERAN PREFERENCE

NONE	WAR	OTHER	3-PT.	10 POINT
				DISAB OTHER

 14. POSITION CLASSIFICATION ACTION

NEW	VICE	F. A.	REAL
-----	------	-------	------

CD: FI

15. SEX **M** 16. RACE **W** 17. APPROPRIATION
 FROM: **4-3588-55-066**
 TO: **same**
 18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)
 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSORS ONLY)
 20. LEGAL RESIDENCE
 CLAIMED PROVED
 STATE: _____

21. STANDARD FORM 50 REMARKS
9/16 26hr

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A			
B. CEIL. OR TOS CONTROL	<i>ICW</i>	<i>2/19</i>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL	<i>P. Taylor</i>	<i>1/15/54</i>	
E.			

F. APPROVED BY
P. Taylor 19 Feb 54

1. Agency and organizational designation		2. Pay roll	3. Stock No.	4. Slip No.	
SOIL, James A.			UV		
5. Employee's name (and social security account number when appropriate)		6. Grade and salary			
SOIL, James A.		GS - 14 38 \$9600			
PAY ROLL CHANGE DATA					
	BASE PAY	OVERTIME	GROSS PAY	RET. TAX BOND F.I.C.A.	NET PAY
7. Previous period					
8. New period					
9. Pay this period					
10. Remarks		11. Appropriation(s)		12. Prepared by	
<i>[Handwritten signature]</i>		VA		Jan 2/17/53	
13. Audited by					
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase					
14. Effective date	15. Does last equivalent increase	16. Old salary rate	17. New salary rate	18. Performance rating is satisfactory or better.	
15 Feb 53	19 Aug 52	\$7600	\$9800	(Signature or other authentication)	
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods): Period(s) <input type="checkbox"/> No excess LWOP <input type="checkbox"/> Total excess LWOP					
(Check applicable box in case of excess LWOP) <input type="checkbox"/> LWOP status and appropriate period(s)					
STANDARD FORM NO. 1126—Revised Form prescribed by Comp. Gen., U. S. Nov. 8, 1952, General Regulations No. 102					

PAY ROLL CHANGE SLIP—PERSONNEL COPY

[Handwritten initials]

STANDARD FORM 52
 PREVIOUS EDITIONS ARE OBSOLETE
 U. S. GPO: 1950 O-700-000
 GSA GEN. REG. NO. 27
 5010-108-01

SECRET
 SECURITY INFORMATION UNFOUNDED

REQUEST FOR PERSONNEL ACTION

FR. MAR 23 1953

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
 If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, initial(s), and surname) Mr. James A. NOEL	2. DATE OF BIRTH 19 Mar. 1911	3. REQUEST NO. -	4. DATE OF REQUEST 7 Mar. 53
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY:
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED: 29 MAR 53	

FROM: INTELL. OFF (Chief of Station, 03-14)	9. POSITION TITLE AND NUMBER OPS OF (CHIEF), BA-121-14
TO: 03-14, \$7689.0 p.a. \$7600 DDI \$7689	10. SERVICE, GRADE, AND SALARY DJP WH I Caracas, Venezuela
11. ORGANIZATIONAL DESIGNATIONS: I Caracas, Venezuela	12. HEADQUARTERS Caracas, Venezuela
13. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/>	14. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/>

A. REMARKS (Use reverse if necessary):
BA-121

APPROVED BY:
FI CAREER SERVICE BOARD

B. REQUESTED BY: *[Signature]* C/WH

D. REQUEST APPROVED BY: *[Signature]* DATE: **11 March 53**
Signature: **Edward C. McHawera**

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)
V. C. LYBET, X-157

Title: **Asst. FI PD**

13. VETERAN PRECEDENCE		14. POSITION CLASSIFICATION ACTION	
NONE	WWI OTHER OPS	NEW	VICE
15. SEX	16. RACE	17. APPROPRIATION	18. SUBJECT TO C. S. ENLISTMENT ACT (YES-NO)
		FORM: 3529	
		TS: 3529	
19. DATE OF APPOINTMENT: MEMORANDUMS (ACCESSIONS ONLY)		20. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED	

21. STANDARD FORM 50 REMARKS

POSTED

[Signature]

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS:
A.			
B. CEIL OR PCS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMP.			
E.			

F. APPROVED BY:
Mr. L. Shobe 3/23/53

STANDARD FORM 52
 REQUEST FOR PERSONNEL ACTION

UNVOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Mrs - Mss - One given name, initials, and surname) Mr. James A. NOEL	2. DATE OF BIRTH 19 Mar 1911	3. REQUEST NO.	4. DATE OF REQUEST 7 May 56
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Reassignment		6. EFFECTIVE DATE & PROPOSED: MAY 20 1956	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: MAY 20 1956	

FROM— Area Ops Officer (Br Ch) BA-40	9. POSITION TITLE AND NUMBER BA-40	TO— Area Ops Officer (Br Ch) BA-40
10. SERVICE GRADE AND SALARY GS-0136.01-15 \$11880.00 p.a. \$9380.00 p.a.		
11. ORGANIZATIONAL DESIGNATIONS DDP/WH Branch I		
12. HEADQUARTERS Washington, D. C.		
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)
New T/O

USED IN LIEU OF SF50
NOTIFICATION OF PERSONNEL ACTION

B. REQUESTED BY (Name and title) <i>Philip C. Brown</i> for C/WH	D. REQUEST APPROVED BY Signature: _____ Title: _____
--	--

13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> P.A. <input type="checkbox"/> RAIL <input type="checkbox"/>
--	--

15. SEX M	16. APPROPRIATION FROM: 6-3500-10-200 TO: Same	17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSORS ONLY)	19. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
---------------------	--	---	--	--

20. STANDARD FORM 50 REMARKS:

APPROVED BY
FI CAREER SERVICE BOARD
DATE: **14 May 56**

POSTED

BD 5-21-56

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS CONTROL	<i>APC/18</i>		
C. CLASSIFICATION			
D. PLACEMENT OR ENPL.	<i>16 May 56</i>		
E.			

F. APPROVED BY
Robert L. ... per *John J. Caldwell* **16 May 56**

16-72209-4

SECRET

MD + MR
21 Aug 52

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOEL, James A.		DATE 14 August 1952
NATURE		EFFECTIVE DATE 15 August 1952
	FROM	TO
TITLE	Intell. Off. (Chief)	
GRADE AND SALARY	GS-14, \$2900	\$7889.
OFFICE		
DIVISION	WH	WH
BRANCH	1	1
OFFICIAL STATION	Caracas, Venezuela	Caracas, Venezuela
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
	<i>H. C. [Signature]</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO-STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS:		

SECRET
29 August 52 HP

SECRET

FDY MR
30 APR 52 T.H.

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOLL, James A.	DATE 12 March 1952
NATURE OF ACTION Reassignment Reassignment	EFFECTIVE DATE 27 April 1952

TITLE	<i>Intell Off</i> Chief of Station, GS-11	<i>Intell Off</i> Chief of Station, GS-11
GRADE AND SALARY	GS-11, \$9600.00 per annum	GS-11, \$9600.00 per annum
OFFICE	OSO	
DIVISION	FDT	WII
BRANCH	EC	Branch I
OFFICIAL STATION	Buenos Aires, Argentina (#3510)	Caracas, Venezuela (#3529)

QUALIFICATIONS	APPROVAL FOR ASSISTANT DIRECTOR	EXECUTIVE
<i>C. M. Burgess - 4-24-52</i>	<i>Leo D. [Signature]</i>	
CLASSIFICATION <i>1-801</i>	PERSONNEL OFFICER <i>D. C. [Signature]</i>	

POST DIFFERENTIALLY AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS YES NO

DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____

SECURITY CLEARED ON _____

OVERSEAS AGREEMENT SIGNED _____

ENTERED ON DUTY _____

SIGNATURE OF AUTHENTICATING OFFICER

REMARKS:
S-#1.

POSTED
[Signature]

W. B. [Signature] 12 March 1952
ACWH

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOEL, James A.		DATE 16 July 1951
NATURE OF ACTION Promotion		EFFECTIVE DATE 19 August 1951
TITLE GRADE AND SALARY OFFICE DIVISION BRANCH OFFICIAL STATION	FROM	TO
	Chief of Station, GS-13	<i>(Intelligence Officer)</i> Chief of Station, GS-11
	GS-13, \$7800.00 per annum	GS-11, \$6800.00 per annum
	OSO	OSO
	FDT	FDT
ED	EC	
Buenos Aires, Argentina	Buenos Aires, Argentina	
QUALIFICATIONS	APPROVAL	
<i>R. J. Goodland</i>	FOR ASSISTANT DIRECTOR	EXECUTIVE
<i>Harold L. ...</i>		
CLASSIFICATION F-648	PERSONNEL OFFICER	
<i>John G. ...</i>	<i>A. C. ...</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS	YES <input type="checkbox"/>	NO <input type="checkbox"/> 5:130
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____	PURSUANT TO DCI DIRECTIVE 15 OCT 1951 SALARY ADJUSTED TO \$ <u>9600</u>	
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS: Slot # 87.		
<i>W. M. ...</i> Chief, FDT		
COPY IS PAYROLL FILES CONFIDENTIAL FILES BRANCH		
<i>J C</i>		

SECRET

Seymour

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOLL, James A.		DATE 19 September 1950
NATURE OF ACTION Periodic Pay Increase		EFFECTIVE DATE 17 September 1950
	FROM	TO
TITLE	Intelligence Officer (Staff)	Intelligence Officer (Staff)
GRADE AND SALARY	GS-13 \$7600.00	GS-13 \$7800.00
OFFICE	OSO	OSO
DIVISION	FDT	FDT
BRANCH		
OFFICIAL STATION	Buenos Aires	Buenos Aires
QUALIFICATIONS	APPROVAL	
	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
SIGNATURE OF AUTHENTICATING OFFICER _____		
REMARKS: L.S.I. 7 March 1949. This is to certify that the conduct and services of the employee during this period were satisfactory in all respects.		

Wm G. Thayer
Robert S. Watts

W. G. Thayer
 DEPARTMENT CHIEF

BKD
JL

POSTED
JA 25 Sept

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION		
NAME NOEL, James A.		DATE 10 November 1949
NATURE OF ACTION Conversion - Classification Act of 1949*		EFFECTIVE DATE 30 October 1949
	FROM	TO
TITLE	Intelligence Officer (Staff)	Intelligence Officer (Staff)
GRADE AND SALARY	CAF-16 \$7432.20	GS-13 \$7600.00 /
OFFICE	OSO	OSO
BRANCH	FBI	FBI
DIVISION		
OFFICIAL STATION	Buenos Aires	Buenos Aires
QUALIFICATIONS	APPROVAL	
	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION		
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/> NO <input type="checkbox"/>
DATE OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
		_____ SIGNATURE OF AUTHENTICATING OFFICER
REMARKS: * Per authority contained in ltr DCI - 28 October 1949		

FORM NO. 37-1 PREVIOUS EDITIONS ARE NOT TO BE USED. AUG 1949

SECRET

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

[Handwritten signature]

NAME James A. Noel		DATE 28 June 1949	
RESIDENCE AT TIME OF EMPLOYMENT			
LOCAL ADDRESS			
CITIZENSHIP U.S.	SEX Male	DATE OF BIRTH 19 March 1911	MARITAL STATUS Married
NATURE OF ACTION Transfer and Reassignment		EFFECTIVE DATE 24 July 1949	
	FROM		
TITLE	Chief	Intelligence Officer (Staff)	
GRADE AND SALARY	CAF-13, \$7432.20	CAF-13, \$7432.20	
OFFICE	OSO	OSO	
BRANCH	FBI	FBI	
DIVISION			
OFFICIAL STATION	Guatemala City	Buenos Aires	
APPROVAL			
FIELD		HEADQUARTERS	
CHIEF OF STATION		FOR THE ASSISTANT DIRECTOR	
<p><i>Copy in PAFS - 1949</i></p> <p><i>CONFIDENTIAL FILES - 1949</i></p> <p><i>Chas</i></p>		<p><i>Wm G. Sharp</i></p>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO			
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____			
SECURITY CLEARED ON _____			
OVERSEAS AGREEMENT SIGNED _____ <i>12/10/49</i>			
ENTERED ON DUTY _____			
AUTHENTICATED BY _____			
REMARKS S-2 Subject is replacement for Vernet L. Gresham who is leaving that slot.			

FORM NO. 57-1 - PREVIOUS EDITIONS ARE NOT TO BE USED. FEB 1949

SECRET

SECRET

JB.

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME NOEL, James Arthur		DATE 25 February 1949	
RESIDENCE AT TIME OF EMPLOYMENT			
LOCAL ADDRESS			
CITIZENSHIP USA	SEX M	DATE OF BIRTH 19 March 1911	MARITAL STATUS Married
NO. OF DEPENDENTS		DATE OF APPOINTMENT	
NATURE OF ACTION Promotion		EFFECTIVE DATE 7 March 1949	
	FROM		TO
TITLE	Chief of Station		Chief of Station
GRADE AND SALARY	CAF-12 8674.00		CAF-13 87432.20
OFFICE	OSO - FBI		OSO - FBI
BRANCH			
DIVISION			
OFFICIAL STATION	Guatemala City		Guatemala City
APPROVAL			
FIELD		HEADQUARTERS	
CHIEF OF STATION		FOR THE ASSISTANT DIRECTOR	
		PERSONNEL OFFICER <i>George E. Miller</i> 2-28-49	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____			
SECURITY: CLEARED ON _____			
OVERSEAS AGREEMENT SIGNED _____			
ENTERED ON DUTY _____			
AUTHENTICATED BY			
REMARKS Subject has been in grade since 20 October 1946.			

FILED IN HANDBOOK FILES
 CONFIDENTIAL FUNDS BRANCH
[Signature]
 INITIALS

CE 3/31/49
[Signature]

SECRET

SECRET

PERSONNEL ACTION REQUEST
SPECIAL FUNDS

10

NOTE: See instructions on reverse side.

NAME	James Arthur FOEL	DATE	12 October 1948
LEGAL ADDRESS	California	MARITAL STATUS	Married
LOCAL ADDRESS		NUMBER OF DEPENDENTS	
TELEPHONE		CITIZENSHIP	USA
		SEX	M
		AGE	37
NATURE OF ACTION	Periodic Pay Increase	EFFEKTIVE DATE	17 October 1948

	FROM	TO
Title	Chief of Station	Chief of Station
Grade and Salary	CAP-12 \$6474.60	CAP-12 \$6714.00
Office - Branch	OSO - FBT	C20 - FBT
Division		
Section		
Official Station	Guatemala City	Guatemala City
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)

Subject has received no increase in salary since 6 April 1947.
I certify that the services and conduct of the employee during the period were satisfactory in all respects.

POSTED

DOY 03 11-11
CSEOP 07-10-47
LSD 07-13-47

[Signature]
Branch Chief

FIELD		APPROVAL	
		HEADQUARTERS, U. S.	
CHIEF OF STATION	DATE	<i>[Signature]</i>	130/48
SPECIAL FUNDS OFFICER	DATE	<i>[Signature]</i>	11/10/48
	DATE	FOR THE ASSISTANT DIRECTOR	DATE
	DATE	<i>[Signature]</i>	DATE
	DATE	CHAIRMAN, PERSONNEL ACTION COMMITTEE	DATE
	DATE	<i>[Signature]</i>	10/21/48
	DATE	SPECIAL FUNDS OFFICER	DATE

SECRET

PERSONNEL ACTION REPORT

HB 2

This form is to be initiated in the appropriate branch or Office Chief for personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>NOEL, JAMES A.</u>		DATE <u>19 March 1947</u>
NATURE OF ACTION <u>Periodic Increase</u>		NUMBER OF DEPENDENTS <u>One</u>
EFFECTIVE DATE <u>6 April 1947</u>		LOCATION OF DEPENDENTS _____
MARITAL STATUS <u>Married</u>		CITIZENSHIP <u>U.S.</u> SEX <u>M</u> AGE <u>35</u>
FROM		TO
POSITION <u>Chief of Station</u>		POSITION <u>Chief of Station</u>
CONTROL NO. _____		CONTROL NO. _____
CLASSIFICATION <u>CAF-12</u>		CLASSIFICATION <u>CAF-12</u>
ANNUAL GROSS SALARY <u>\$5905.20</u>		ANNUAL GROSS SALARY <u>\$6144.60</u>
OFFICIAL STATION <u>Guatemala City, Guatemala</u>		OFFICIAL STATION <u>Guatemala City, Guatemala</u>
ALLOWANCES:		ALLOWANCES:
QUARTERS _____		QUARTERS _____
COST OF LIVING _____		COST OF LIVING _____
SPECIAL FOREIGN LIVING _____		SPECIAL FOREIGN LIVING _____
TOTAL _____		TOTAL _____
OFFICE:		OFFICE:
BRANCH <u>OSO-FBT</u>		BRANCH <u>OSO-FBT</u>
DIVISION _____		DIVISION _____

TO BE PAID BY _____ OFFICE	\$ _____
(Field)	
TAX WITHHELD IN UNITED STATES _____	
INSURANCE TO BE WITHHELD IN UNITED STATES _____	
(Amount subject to change if premium is increased or decreased)	
SAVINGS BONDS _____	12.50
RETIREMENT WITHHELD IN UNITED STATES _____	37.50
OTHER (Specify in detail) _____	
ALLOTMENTS _____	172.60
(Name of Allottee)	
Address _____	
TOTAL GROSS SALARY PER PAY PERIOD _____	172.60

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

(Signature of Employee)

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

Periodic Pay Increase - Last Salary Increase - 1 Sep 1946

APPROVED _____ OFFICE _____ (Field) _____	APPROVED _____ OFFICE _____ _____
_____ Date _____ (Chief of Mission)	_____ Date _____ (Administrative Officer)
_____ Date _____ (Security Officer)	_____ Date <u>20/3/47</u> (Branch Chief)
_____ Date _____ (Special Funds Officer)	_____ Date _____ (Chairman, Pers. Review Com.)
	_____ Date <u>29/1/47</u> (Special Funds Officer)

PERSONNEL ACTION REQUEST

SECRET

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME NOEL, JAMES A. DATE 8 March 1947
 NATURE OF ACTION Transfer NUMBER OF DEPENDENTS one
 EFFECTIVE DATE 10 March 1947 LOCATION OF DEPENDENTS _____
 MARITAL STATUS married CITIZENSHIP American SEX male AGE 35

FROM	TO
POSITION <u>Chief of Station</u>	POSITION <u>Chief of Station</u>
CONTROL NO. _____	CONTROL NO. _____
CLASSIFICATION <u>CAF-12</u>	CLASSIFICATION <u>CAF-12</u>
ANNUAL GROSS SALARY <u>\$5908.20</u>	ANNUAL GROSS SALARY <u>\$5908.20</u>
OFFICIAL STATION <u>Barcelona, Spain</u>	OFFICIAL STATION <u>Guatemala City, Guatemala</u>
ALLOWANCES: QUARTERS _____ COST OF LIVING _____ SPECIAL FOREIGN LIVING _____ TOTAL _____	ALLOWANCES: QUARTERS _____ COST OF LIVING _____ SPECIAL FOREIGN LIVING _____ TOTAL _____
OFFICE: BRANCH <u>OSO - FBK</u> DIVISION _____	OFFICE: BRANCH <u>OSO - FBK</u> DIVISION _____

TO BE PAID BY _____ OFFICE _____ \$ _____
 (Field)
 TAX WITHHELD IN UNITED STATES _____
 INSURANCE TO BE WITHHELD IN UNITED STATES _____
 (Amount subject to change if premium is increased or decreased)
 SAVINGS BONDS _____
 RETIREMENT WITHHELD IN UNITED STATES _____
 OTHER (Specify in detail) _____
 ALLOTMENTS _____
 (Name of allottee)
 Address _____
 TOTAL GROSS SALARY PER PAY PERIOD \$ _____

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

SECRET

 (Signature of Employee)

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

APPROVED _____ OFFICE
(Field)

(Chief of Mission) Date _____

(Security Officer) Date _____

(Special Funds Officer) Date _____

Walter P. Pruden 14 March 47

APPROVED - U.S. OFFICE

W. Wiggan Date _____
(Administrative Officer)

Ramond G. Kelly Date 4/3/47
(Branch Chief)

Stephen Edwards Date 14 May 47
(Chairman, Ethics Review Com.)

E. Nichols Date 18 March 47
(Special Funds Officer)

PERSONNEL ACTION REQUEST

SECRET

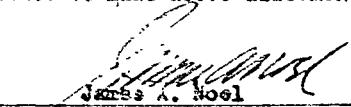
This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>NOEL, JAMES A.</u>		DATE <u>OCT 20 1946</u>
NATURE OF ACTION <u>New Appointment</u>	NUMBER OF DEPENDENTS <u>one</u>	
EFFECTIVE DATE <u>OCT 20 1946</u>	LOCATION OF DEPENDENTS <u>Barcelona, Spain</u>	
MARITAL STATUS <u>married</u>	CITIZENSHIP <u>American</u> SEX <u>male</u> AGE <u>35</u>	
FROM	TO	
POSITION _____	POSITION <u>Chief of Station, Barcelona</u>	
CONTROL NO. _____	CONTROL NO. _____	
CLASSIFICATION _____	CLASSIFICATION <u>CAF-12</u>	
ANNUAL GROSS SALARY _____	ANNUAL GROSS SALARY <u>\$5905.20</u>	
OFFICIAL STATION _____	OFFICIAL STATION <u>Barcelona, Spain</u>	
ALLOWANCES:	ALLOWANCES:	
QUARTERS _____	QUARTERS <u>\$ 900.00</u>	
COST OF LIVING _____	COST OF LIVING <u>840.00</u>	
SPECIAL FOREIGN LIVING _____	SPECIAL FOREIGN LIVING _____	
TOTAL _____	TOTAL <u>\$ 1,740.00</u>	
OFFICE:	OFFICE:	
BRANCH _____	BRANCH <u>FSR O</u>	
DIVISION _____	DIVISION _____	

TO BE PAID BY <u>Madrid</u> OFFICE	\$ <u>121.53</u>
(Field)	
TAX WITHHELD IN UNITED STATES	_____
INSURANCE TO BE WITHHELD IN UNITED STATES (Amount subject to change if premium is increased or decreased)	<u>12.50</u>
SAVINGS BONDS	<u>37.50</u>
RETIREMENT WITHHELD IN UNITED STATES	_____
OTHER (Specify in detail)	_____
<u>Acct. of J. A. & Lillian B. Noel</u>	_____
ALLOTMENTS <u>First National Bank of San Diego</u>	<u>282.71</u>
(Name of Allottee)	
Address <u>5th & Broadway, San Diego, California</u>	
TOTAL GROSS SALARY PER PAY PERIOD	\$ <u>4542.24</u>

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

Form No. 37-1
Sep 1946


James A. Noel
 (Signature of Employee)

JOB DESCRIPTION:

Chief of Station at Barcelona. Administration of office. Preparation of all administrative and intelligence reports emanating from Barcelona office. Direction of Barcelona chains. Direction of [] chains with contact maintained by occasional visit to that area. Processing of [] material. Preparation on behalf of the Consulate General, Barcelona, of political reports; of reports on military activity on behalf of the Military Attache, Madrid, and of weekly report on movement of naval vessels on behalf of the Naval Attache, Madrid (through the Consulate General). Cooperation with the Joint [] Trusteeship [], on "safe haven" cases. Liaison with []

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

APPROVED Madrid OFFICE
(Field)
[] Date 20.10.46
(Chief of Mission)
Date _____
(Security Officer)
Date _____
(Special Funds Officer)

Wm G. Thayer

APPROVED U.S. OFFICE
M. Thompson Date 13 Nov
(Administrative Officer)
C.W. Tenney Date 14 Nov
(Branch Chief)
Date _____
(Chairman, Pers. Review Com.)
Samuel M. [] Date 20 Nov
(Special Funds Officer)

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					055292	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle) Noel, James A.			2. DATE OF BIRTH 3-19-11	3. SEX M	4. GRADE GS-16	5. SD D
6. OFFICIAL POSITION TITLE Chief of Base			7. OFF/DIV/BR OF ASSIGNMENT DDP/DOD		8. CURRENT STATION San Francisco	
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	
	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) 1 April 67 - 31 March 1968			
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 resignation 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 Chief of Base supervising six professional and three clerical subordinates.					RATING LETTER S	
SPECIFIC DUTY NO. 2 Establishment and maintenance of operational support mechanisms.					RATING LETTER S	
SPECIFIC DUTY NO. 3 Operational reporting.					RATING LETTER S	
SPECIFIC DUTY NO. 4 Liaison with FBI and DCS, et al.					RATING LETTER S	
SPECIFIC DUTY NO. 5 Direction of recruitment and handling of support assets.					RATING LETTER S	
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 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.					RATING LETTER S	

28 JUL 1968

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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 relevant information 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 and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

JUL 19 11 08 AM '68

Mr. Noel is much too experienced and practiced a hand for his performance to vary very much from year to year. He has continued to turn in the highly creditable performance in San Francisco that has been standard for him for many years. He has managed his subordinates well and has exercised uniformly good judgment in directing their operational efforts. Of particular value has been his steadiness in the face of administrative adversity disrupting the organization of his Base. Mr. Noel insured that the work of the Base continued uninterrupted and demonstrated his capacity to keep on top of all details and report them to Headquarters as appropriate. It is a credit to Mr. Noel that in the post-Ramparts exposure period there was not a single instance of an academic asset withdrawing from a relationship with the Base.

The performance of his officers attests the careful guidance and wise leadership which has enabled them to operate securely and well in sensitive areas. His relations with the FBI and DCS are excellent. He is appropriately economy minded. In short, he is a decidedly strong supervisor.

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	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
18 months	Mr. Noel is in the Field and will be shown a copy of this Fitness Report on his next TDY trip to Headquarters.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
15 July 1968	C/DO/I	Stanley H. Gaines
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Concur in rating officer's judgment.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
17 July 1968	Chief, DO Division	Gordon E. Sorenson

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYER SERIAL NUMBER			
				055292			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO	
Noel, James A.			3/19/11	M	16	D	
6. OFFICIAL POSITION TITLE			7. OFF/BIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Chief of Base			DDP/DOD		San Francisco		
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"/>	CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify):			<input type="checkbox"/>	SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 October 1966 - 31 March 1967			
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	
Chief of Base supervising six professional and three clerical subordinates.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Establishment and maintenance of operational support mechanisms.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Operational reporting.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Liaison with the FBI and DCS, et al.						S	
SPECIFIC DUTY NO. 5						RATING LETTER	
Direction of recruitment and handling operations.						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
31 AUG 1967 <i>ms</i>							
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.							RATING LETTER
							S

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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.

Mr. Noel is an old hand at running Bases or Stations abroad and his performance as Chief of Base, San Francisco, amply attests that. It goes without saying that he understands all aspects of the business, knows how to delegate, organize, direct and report. He has continued to do all these things well. His seniority, experience and maturity served the Agency in particularly good stead during this period when the location of his Base was compromised in the public press, through no fault of Mr. Noel. His subsequent and consequent actions were all taken with sound judgment and appropriate calm and circumspection. He was also most receptive to, and cooperative in, Headquarters suggestions in this matter. He is, of course, cost conscious and an excellent supervisor. His overall performance is that of a high order of senior Agency officers.

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

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

6 months

Subject is in the field; a copy of this report is being retained to show him on his next TDY to Hqs.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

21 August

C/DO/I

(signed in draft)
Stanley H. Gaines

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur fully in overall rating of "Strong".

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

28 August 1967

Chief, DO Division

Gordon A. Jorgensen

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						055292	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) NOEL, James A.			2. DATE OF BIRTH 19 March 1911	3. SEX M	4. GRADE GS-16	5. SD D	
6. OFFICIAL POSITION TITLE Chief of Station				7. OFF/DIV/BR OF ASSIGNMENT UDP/WE/Iberia		8. CURRENT STATION Madrid	
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 checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input type="checkbox"/> ANNUAL		<input 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) 1 April 1965 - 27 September 1965			
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	
My rating of the performance of this officer remains the same as the description of his performance which is contained in his fitness report for the period ending 31 March 1965.							
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 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.						RATING LETTER	
23 OCT 1965						S	

20

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in mind the employee's respective 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.

MAIL ROOM

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
------	-----------------------

2. BY SUPERVISOR

MONTHS EMPLOYER HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Mr. Noel is currently at his overseas post.

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
27 September 65	Chief, WE Division	William D. O'Ryan

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
19 OCT 1965	ADDP	Thomas H. Karamessines

SECRET

SECRET

12 May 1965

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: James A. Noel, Employee Serial No. 055292
Fitness Report for the Period 1 April 1964
to 31 March 1965

WF
D
Hdqrs. 3

1. Subject, who was born 19 March 1911, is a GS-15 and has been assigned to Madrid as Chief of Station since October 1961.

2. As Chief of Station, he is charged with the organization and management of the station and is responsible for the planning, direction, and supervision of all its activities. He also exercises general supervision of the Barcelona base. Assisting him and under his general supervision are [redacted] contract employees.

3. Subject serves as the Ambassador's principal intelligence officer, as chairman of the Embassy Defector Committee, as the Agency representative on the Embassy Country Team, and as the coordinator of U.S. clandestine intelligence operations in Spain. Accredited as the Agency's representative to [redacted]

4. Subject is an experienced and mature officer, possessing an excellent command of Spanish. Highly motivated, conscientious, and industrious, he readily accepts responsibility and is both thorough and reliable in the execution of his duties. Even tempered and affable, he holds the confidence and friendship of those whom he directs and those to whom he is responsible, and the morale of his station is noticeably high. He is alert to the operational possibilities

MAY 1965

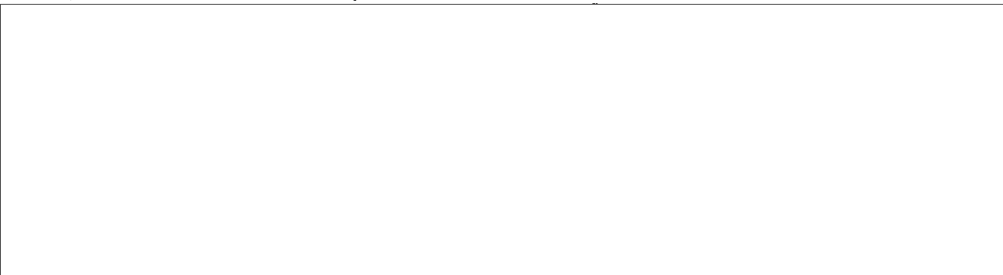
12 JUN 1965

SECRET

TC

of any given situation, evidences sound and objective judgment, and works well under pressure. He writes lucidly, speaks articulately, and exhibits a high degree of cost consciousness in the use of government funds and property. His delegation of responsibility to others is meaningful and well delineated.

5. Subject's performance has been strong throughout the rating period. He has given the station purposeful direction and competent management and as an effective supervisor who commands the loyalty and respect of those whom he supervises, he has succeeded in obtaining a maximum effort from the station personnel. He enjoys the confidence of the Ambassador and other principal officers of the Embassy, several of whom have expressed their appreciation of subject's work and commented on the value of the station's contribution to the functioning of the Embassy. The fact that the Ambassador arrived in Madrid with definite prejudices regarding the Agency but was of quite another mind upon his departure is testimony to subject's skill and tact.



7. In addition to his considerable executive and liaison duties, subject has carried out the previously cited operational assignments with marked ability. He is a convincing and persuasive agent handler, and his operational reporting is prompt and thorough.

8. The only criticism I would make of subject is that I believe the station should be making a greater effort



Edward Ryan

EDWARD RYAN
Deputy Chief
Western Europe Division

OVERALL PERFORMANCE IN CURRENT POSITION: "S"

COMMENTS OF REVIEWING OFFICIAL:

CONCUR

W.D. Ryan
Williez D. O'Ryan, C/WE

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER		
					055292		
SECTION A				GENERAL			
1. NAME (Last) NOEL, James (First) A (Middle)			2. DATE OF BIRTH 1911	3. SEX M	4. GRADE 16	5. SD D	
6. OFFICIAL POSITION TITLE Chief of Station, Madrid				7. OFF/DIV/BR OF ASSIGNMENT DDP/WE/Iberia		8. CURRENT STATION Madrid	
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"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
11. DATE REPORT DUE IN O.R.				12. REPORTING PERIOD (From - to) 1 April 1963 - 31 March 1964			
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	
As Chief of Station, Madrid, plans and directs all FI and CA operations within Spain						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Supervises Madrid Station and Barcelona Base personnel						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Maintains contact with senior officials <input type="text"/>						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Represents the Director of CIA with the Ambassador to Spain and other U.S. officials in Spain						O	
SPECIFIC DUTY NO. 5						RATING LETTER	
Personally handles several sensitive operations. <input type="text"/>						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
Supervises <input type="text"/>						O	
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.						RATING LETTER	
12 MAY 1964						S	

RJR

SECRET

(When Filled In)

OFFICE OF PERSONNEL

SECTION C

NARRATIVE COMMENTS

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 professional duties, as described, if applicable.

Subject is one of the Agency's truly mature, experienced operations officers. He has had unusual operational experience in Central and South America, both in the field and in Headquarters. His activities have spanned both the FI and the CA spectrum. He has and does deal easily and graciously with high ranking officials, both American and foreign. His good sense, poise and dignity never fail to impress. He is a person of principal and high morals. He does not hesitate to express his conviction even though he may have reason to believe such convictions are not popular. He is a strong supervisor who enjoys his subordinate's respect. He is economy minded and made diligent efforts to comply with requests to economize. Mr. Noel has succeeded in creating a cohesive station in Madrid.

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

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Subject is with the field. This report will be shown to him upon his return.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

20 April 1964

Chief, WE/5

Fred E. Hubbard

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

5 May 1964

C/W/E

W. D. Lyne

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 055292	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) NOEL, James A.			2. DATE OF BIRTH 1911	3. SEX M	4. GRADE GS 16	5. SD D	
6. OFFICIAL POSITION TITLE Chief of Station			7. OFF/DIV/BR OF ASSIGNMENT DDP/WE/Iberian Br.		8. CURRENT STATION Madrid		
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"/>	CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/>	ANNUAL		<input type="checkbox"/>	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify):		<input type="checkbox"/>	SPECIAL (Specify):		<input type="checkbox"/>	REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P. 22 April 1963			12. REPORTING PERIOD (From - to) 1 April 1962-31 March 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 Direction of all FI and CA operations.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Administration of Station and supervision of personnel.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Direct supervision of senior ops officer 						RATING LETTER S	
SPECIFIC DUTY NO. 4 Personally handles a sensitive operation of interest to another CS component.						RATING LETTER S	
SPECIFIC DUTY NO. 5 Maintains contact with senior personnel.						RATING LETTER S	
SPECIFIC DUTY NO. 6 Maintains a working relationship with the Ambassador and other U. S. officials.						RATING LETTER S	
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.						RATING LETTER S	

30 APR 1963

DHP

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in mind prospective 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.

APR 29 9 51 AM '63

Mr. Noel has ably administered a large Station and has demonstrated maturity, good judgment and tact in the day-to-day management and direction of Station activities and personnel. This has been achieved despite the physical location of Station staff personnel [redacted]

Under the direction of Mr. Noel a far reaching and fruitful major operational program against the high priority [redacted] has been undertaken and Madrid Station today is making a substantial contribution in good operations and good intelligence information to the over-all Agency effort. Another notable accomplishment directly attributable to Mr. Noel, and in part a reflection of his long years of service in Latin America, has been his professional handling personally of the Station operation involving [redacted]. Interested CS components have stated categorically that Madrid Station coverage of [redacted] and his activities is essential in satisfying existing intelligence requirements on [redacted].

Despite the Station's heavy diversion into [redacted] Latin American activities and [redacted] activities, Mr. Noel has encouraged the development of a long-range program involving activities against the [redacted] Communist Party and clandestine contact with the [redacted] political opposition.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 4 Feb 1964	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 19	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION Subject employee is in the field. Report will be shown to him upon his return to Headquarters.	
DATE April 25, 1963	OFFICIAL TITLE OF SUPERVISOR DC/WE	TYPED OR PRINTED NAME AND SIGNATURE
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL <i>I concur in the above assessment.</i>		
DATE 25 April 1963	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WE	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> William B. O'Ryan

SECRET

RYBAT
SECRET

RECORDED BY
CSFD

17 April 1962

MEMORANDUM FOR: Acting Chief, WE

SUBJECT : Mr. James A. Noel
Fitness Report Covering the Period 14 August 1961 to
31 March 1962

1. Mr. Noel assumed his duties as Chief of Station, Madrid on 23 September 1961. The Station, as constituted when Mr. Noel arrived, included some [redacted] plus numerous contract personnel, as well as a [redacted]. The Madrid Station proper not only includes the Embassy installation but an outside operations section as well. Since Mr. Noel arrived the Station has been launched into a [redacted] operations program of considerable scale and on a crash basis. In addition, in this period, [redacted] and the experienced Chief of [redacted] had to be brought home due to a family emergency.

2. To date Mr. Noel has given every evidence of a particular ability to cope with the crash program and the acute shortage of personnel with judiciousness and maturity. While it is too early, yet, to pass judgement, there are indications that Mr. Noel has been preoccupied [redacted]

[redacted]

3. As indicated above, Mr. Noel has not been in place as Chief of Station long enough to justify firm reservations concerning his management, nor to permit meaningful criticism. Also, as indicated above, his outstanding noticeable strength to date has been his ability to cope with a heavy operational program, a shortage of personnel, and a sometimes difficult operational climate, with judgement, calmness and patience.

Thomas F. Thiele
THOMAS F. THIELE
Chief, WE/5

CONCUR:

William DeLoach WE

496 64
[redacted]

[Signature]
[redacted]

RYBAT

CONFIDENTIAL

MEMORANDUM FOR: Director of Personnel
SUBJECT: State Department Promotion of
NOEL, James A.

1. The Department has informed this office that effective April 1, 1962 subject employee was promoted from FSR-3, \$13,600 to FSR-2, \$14,900

2. Request this notice be placed in the official folder of the employee concerned.



cc: Finance Division
Area Division

CONFIDENTIAL

70-204 B of 23

STANDARD FORM 80 JANUARY 1970 U.S. CIVIL SERVICE COMMISSION FPM SUPPLEMENT 870-1 SF-109		AGENCY CERTIFICATION OF INSURANCE STATUS Federal Employees Group Life Insurance Program		
1. NAME (Last) (First) (Middle)		2(a). DATE OF BIRTH (Month, Day, Year)	2(b). SOCIAL SECURITY ACCOUNT NUMBER	
NOEL, Janias A.		19 March 1911	083 36 2388	
3. CHECK THE REASON FOR TERMINATING INSURANCE				
(a) <input type="checkbox"/> Separated (includes resignations) (b) <input checked="" type="checkbox"/> Retired (c) <input type="checkbox"/> Died as an employee (d) <input type="checkbox"/> Died as a reemployed annuitant (e) <input type="checkbox"/> End of 12 months non-pay status (f) <input type="checkbox"/> Other (specify)		NOTE: If the reason checked is "b, Retired" your group life insurance (but not accidental death and dismemberment benefits) will continue during retirement if you meet the conditions described in "Notice to Retiring Employee" below.		
4. CHECK APPROPRIATE BOX CONCERNING SF 54, DESIGNATION OF BENEFICIARY				
(a) <input type="checkbox"/> CURRENT SF 54 ATTACHED		(b) <input checked="" type="checkbox"/> A CURRENT SF 54 IS NOT ON FILE WITH THIS AGENCY	(c) <input type="checkbox"/> A CURRENT SF 54 IS ON FILE IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER (OR EQUIVALENT)	
NOTE: IF EMPLOYEE (A) DIED OR (B) IS RETIRING OR RECEIVING FEDERAL EMPLOYEES' COMPENSATION UNDER CONDITIONS ENTITLING HIM TO RETAIN HIS LIFE INSURANCE, ATTACH CURRENT SF 54, IF ANY, TO ORIGINAL SF 56 AND CHECK BOX 4 (a) ON ORIGINAL AND ALL COPIES OF SF 56. IF NO CURRENT SF 54 IS ON FILE, CHECK BOX 4 (b). IN ALL OTHER CASES, SHOW WHETHER OR NOT CURRENT SF 54 IS ON FILE BY CHECKING BOX 4 (b), OR (c). A CURRENT SF 54 IS ONE THAT HAS NOT BEEN CANCELED BY EMPLOYEE OR AUTOMATICALLY BY TRANSFER OR PRIOR TERMINATION OF INSURANCE.				
5. DATE OF EVENT CHECKED IN ITEM 3 (MONTH, DAY, YEAR)	6. ANNUAL BASIC PAY RATE (NOT AMOUNT OF INSURANCE) OR DATE IN ITEM 3. CONVERT DAILY, HOURLY, PIECEWORK, ETC. RATE TO ANNUAL RATE.	7. DID EMPLOYEE HAVE OPTIONAL INSURANCE ON DATE IN ITEM 5? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> IF YES, GIVE RECEIPT DATE OF ELECTION OF OPTIONAL INSURANCE (SF 176 or 176-1).	8. DATE OF NOTICE OF COMPLETION PRIVILEGE (SF 35) TO EMPLOYEE (MONTH, DAY, YEAR)	
31 March 1971	\$ 33,757 PER ANNUM			
9. I CERTIFY THAT THE ABOVE INFORMATION HAS BEEN OBTAINED FROM, AND CORRECTLY REFLECTS, OFFICIAL RECORDS AND THAT THE EMPLOYEE NAMED WAS COVERED BY FEDERAL EMPLOYEES GROUP LIFE INSURANCE ON THE DATE SHOWN IN ITEM 5.				
Personal signature of authorized agency official		Name and address of agency, including zip code		
<i>Francis G. Monan</i>		Central Intelligence Agency Washington, D. C. 20505		
Typed name of authorized agency official		Title	Phone number, including area code	Date
Francis G. Monan		Insurance Officer, Alternate		6 FPM 10.1

DISBURSE TO EMPLOYEE

SEE OTHER SIDE
FOR
INSTRUCTIONS TO EMPLOYING AGENCY

SECRET

ELECTION, DECLINATION, OR WAIVER OF LIFE INSURANCE COVERAGE - FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM	IMPORTANT AGENCY INSTRUCTIONS ON BACK OF ORIGINAL
--	--

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last) NOEL (first) JAMES (middle) ARTHUR	DATE OF BIRTH (month, day, year) March 19, 1911	SOCIAL SECURITY NUMBER 083 36 2388
EMPLOYING DEPARTMENT OR AGENCY	LOCATION (City, State, ZIP Code)	

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here if you **WANT BOTH** optional and regular insurance

(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here if you **DO NOT WANT** OPTIONAL but do want regular insurance

(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

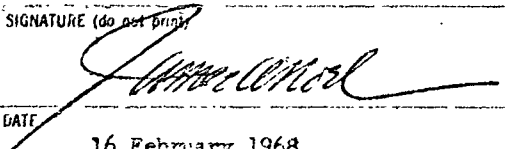
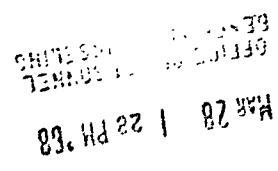
I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here if you **WANT NEITHER** regular nor optional insurance

(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

<p>4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C", COMPLETE THE "STATISTICAL STUB." THEN RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.</p> <p>SIGNATURE (do not print) </p> <p>DATE 16 February 1968</p>	<p style="text-align: center;">FOR EMPLOYING OFFICE USE ONLY</p> <p style="text-align: center;">(official receiving date stamp)</p> <div style="text-align: center;">  </div> <p style="text-align: center; font-size: small;">See Table of Effective Dates on back of Original</p>
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ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-1
 JANUARY 1962
 (for use only until April 14, 1968)
 175-101

SECRET

26 October 1960

MEMORANDUM FOR: Director of Personnel

SUBJECT: James A. Noel -
Memorandum in Lieu of Fitness Report

Mr. James A. Noel arrived in Havana in September of 1958, a trifle more than three months before Fidel Castro assumed power on 1 January 1959. With the advent of that new government Cuba became, so far as U.S. economic and political interests are concerned, one of the most important spots in the world, as well as increasingly more difficult to conduct CIA business. As a result, with the constant worsening of Cuban-U.S. relationship, it is doubtful that there is at the present time a more difficult assignment than Havana in this Division. Nevertheless, with an extremely limited staff, Noel has been able to continue, and even extend, his operations to the point where almost every [redacted] When the increase of anti-U.S. feeling is considered, to say nothing of the increase of effectiveness [redacted] from its direction [redacted] it is amazing that Noel has been able to produce the great volume of important reports which he has sent. He has conducted some extremely delicate operations in the face of almost certainty of discovery. In all this, however, he has offered leadership of a high quality to his staff and has been a fine example of good morale, which is reflected in the attitude of every member of his staff, all of whom respond readily and without complaint to the demands made of them by their surrounding circumstances. Mr. Noel deserves to be warmly commended for a job well done.

J. C. King
J. C. KING
Chief

Western Hemisphere Division

REVIEWED BY:

W. Lloyd George for

Chief of Operations, DD/P

SECRET

DE

SECRET
(When Filled In)

25 *[Handwritten initials]* *[Handwritten initials]*

FITNESS REPORT	EMPLOYEE SERIAL NUMBER
-----------------------	------------------------

SECTION A GENERAL			
1. NAME (Last) NOEL	(First) James	(Middle) A.	2. DATE OF BIRTH 19 March 1911
3. SERVICE DESIGNATION DI		4. OFFICIAL POSITION TITLE Chief of Station	5. SEX Male
6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/III/Havana, Cuba		7. GRADE OS-15	
8. CAREER STAFF STATUS		9. TYPE OF REPORT	
<input type="checkbox"/> NOT ELIGIBLE	<input checked="" type="checkbox"/> MEMBER	<input type="checkbox"/> DEFERRED	<input type="checkbox"/> INITIAL
<input type="checkbox"/> PENDING	<input type="checkbox"/> DECLINED	<input type="checkbox"/> DENIED	<input checked="" type="checkbox"/> ANNUAL
10. DATE REPORT DUE IN O.P. 30 April 1959		11. REPORTING PERIOD From 20 Oct 57 To 31 Mar 59	

SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES			
List up to six of the most important specific duties performed during the rating period. Insert rating number 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).			
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent
5 - Excellent	6 - Superior	7 - Outstanding	
SPECIFIC DUTY NO. 1 Direction of FI operations	RATING NO. 6	SPECIFIC DUTY NO. 4 Intelligence evaluation and reporting	RATING NO. 6
SPECIFIC DUTY NO. 2 Direction of PP operations	RATING NO. 5	SPECIFIC DUTY NO. 5 Development of working relationship with indigenous leaders and local Americans	RATING NO. 6
SPECIFIC DUTY NO. 3 Administration of Station and supervisor of personnel	RATING NO. 6	SPECIFIC DUTY NO. 6 Development of working relationship with Ambassador and other US officials	RATING NO. 5

SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION			
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties; productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.			
<ul style="list-style-type: none"> 1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding. 	<table border="1" style="width:50px; height:50px; margin: auto;"> <tr><td align="center">RATING NO.</td></tr> <tr><td align="center">5</td></tr> </table>	RATING NO.	5
RATING NO.			
5			

SECTION D DESCRIPTION OF THE EMPLOYEE						
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.						
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree		
CHARACTERISTICS			NOT APPLICABLE	NOT OBSERVED	RATING	
					1	2
GETS THINGS DONE						
RESOURCEFUL						
ACCEPTS RESPONSIBILITIES						
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES						
DOES HIS JOB WITHOUT STRONG SUPPORT						
FACILITATES SMOOTH OPERATION OF HIS OFFICE						
WRITES EFFECTIVELY						
SECURITY CONSCIOUS						
THINKS CLEARLY						
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS						
OTHER (Specify):						
SEE SECTION "E" ON REVERSE SIDE						

SECRET

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. Noel was assigned to his post at a time when the country was undergoing a revolution which later was successful. He has done an outstanding job in adapting and redirecting the Station's operational program. He has shown initiative, imagination and resourcefulness in developing new operations, both in the FI and PP fields.

SECTION F

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Employee is in the field	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON:		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
	OTHER (Specify):	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
29 May 1959	DC/WH	R. E. GOMEZ <i>R. E. Gomez</i>
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
<input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
<input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
I concur that Mr. Noel's operational performance under difficult conditions has been outstanding. It should also be noted that he has been highly successful at his present post in getting the best out of his staff.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 May 1959	C/WH	J. C. KING <i>J. C. King</i>

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section A below.

SECTION A. GENERAL			
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
NOEL, James A.	19 March 1911	M	(DI)
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
DDP/WH/II/DC		Area Ops Officer - Branch Chief	
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)	
GS-15	9 November 1957	21 Oct 57 - 20 Oct 57	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specialty)
<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION B. CERTIFICATION

1. FOR THE RATER: THIS REPORT HAS HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENT:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "C" OR "D", A WARNING LETTER MUST BE SENT TO HIM AND A COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify)
<input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE: 14 Oct 57

C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR: Donald C. Marcus

D. SUPERVISOR'S OFFICIAL TITLE: ADC/WH

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

Period Pos. Cont'd: *RN*

Reviewed by: *[Signature]* DATE: 25 Oct 1957

CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE: 15 Oct 57	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL: J. C. King	C. OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief, WH
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SECTION C. JOB PERFORMANCE EVALUATION

7. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D:

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- 2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
- 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
- 5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES						
<p>DIRECTIONS:</p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during the PERIOD. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty ONLY as supervisors (those who supervise a secretary only).</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing similar duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 33%; border: none;"> <ul style="list-style-type: none"> ORAL BRIEFING GIVING LECTURES CONDUCTING SEMINARS WRITING TECHNICAL REPORTS CONDUCTING EXTERNAL LIAISON TYPIING TAKING DICTATION SUPERVISING </td> <td style="width: 33%; border: none;"> <ul style="list-style-type: none"> HAS AND USES AREA KNOWLEDGE DEVELOPS NEW PROGRAMS ANALYZES INDUSTRIAL REPORTS MANAGES FILES OPERATES RADIO COORDINATES WITH OTHER OFFICES WRITES REGULATIONS PREPARES CORRESPONDENCE </td> <td style="width: 33%; border: none;"> <ul style="list-style-type: none"> CONDUCTS INTERROGATIONS PREPARES SUMMARIES TRANSLATES GERMAN DEBRIEFING SOURCES KEEPS BOOKS DRIVES TRUCK MAINTAINS AIR CONDITIONING EVALUATES SIGNIFICANCE OF DATA </td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				<ul style="list-style-type: none"> ORAL BRIEFING GIVING LECTURES CONDUCTING SEMINARS WRITING TECHNICAL REPORTS CONDUCTING EXTERNAL LIAISON TYPIING TAKING DICTATION SUPERVISING 	<ul style="list-style-type: none"> HAS AND USES AREA KNOWLEDGE DEVELOPS NEW PROGRAMS ANALYZES INDUSTRIAL REPORTS MANAGES FILES OPERATES RADIO COORDINATES WITH OTHER OFFICES WRITES REGULATIONS PREPARES CORRESPONDENCE 	<ul style="list-style-type: none"> CONDUCTS INTERROGATIONS PREPARES SUMMARIES TRANSLATES GERMAN DEBRIEFING SOURCES KEEPS BOOKS DRIVES TRUCK MAINTAINS AIR CONDITIONING EVALUATES SIGNIFICANCE OF DATA
<ul style="list-style-type: none"> ORAL BRIEFING GIVING LECTURES CONDUCTING SEMINARS WRITING TECHNICAL REPORTS CONDUCTING EXTERNAL LIAISON TYPIING TAKING DICTATION SUPERVISING 	<ul style="list-style-type: none"> HAS AND USES AREA KNOWLEDGE DEVELOPS NEW PROGRAMS ANALYZES INDUSTRIAL REPORTS MANAGES FILES OPERATES RADIO COORDINATES WITH OTHER OFFICES WRITES REGULATIONS PREPARES CORRESPONDENCE 	<ul style="list-style-type: none"> CONDUCTS INTERROGATIONS PREPARES SUMMARIES TRANSLATES GERMAN DEBRIEFING SOURCES KEEPS BOOKS DRIVES TRUCK MAINTAINS AIR CONDITIONING EVALUATES SIGNIFICANCE OF DATA 				
<p align="right" style="font-size: small;">OFFICE OF PERSONNEL Oct 24 2 11 PM '57 MAIL ROOM</p>						
<p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p> <p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>						
<p style="font-size: x-small;">SPECIFIC DUTY NO. 1</p> <p>Direction of Branch</p>	<p style="font-size: x-small;">RATING NUMBER</p> <p align="center">5</p>	<p style="font-size: x-small;">SPECIFIC DUTY NO. 4</p> <p>Spotting of operational possibilities</p>	<p style="font-size: x-small;">RATING NUMBER</p> <p align="center">6</p>			
<p style="font-size: x-small;">SPECIFIC DUTY NO. 2</p> <p>Supervision of FI Ops</p>	<p style="font-size: x-small;">RATING NUMBER</p> <p align="center">6</p>	<p style="font-size: x-small;">SPECIFIC DUTY NO. 5</p> <p>Use of area knowledge</p>	<p style="font-size: x-small;">RATING NUMBER</p> <p align="center">5</p>			
<p style="font-size: x-small;">SPECIFIC DUTY NO. 3</p> <p>Supervision of PP Ops</p>	<p style="font-size: x-small;">RATING NUMBER</p> <p align="center">5</p>	<p style="font-size: x-small;">SPECIFIC DUTY NO. 6</p> <p>Working relationship with other U. S. officials</p>	<p style="font-size: x-small;">RATING NUMBER</p> <p align="center">5</p>			
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE						
<p>DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>This officer has performed in a superior manner during the past year as branch chief of the West and North Coast of South America branch, subsequently of the East Coast branch. His long experience in the field coupled with a flair for intelligence, sound judgement and an ability to organize and efficiently administer his branch make him a valuable asset to the organization. He has markedly improved in his ability to express himself and in his conduct of PP operations.</p>						
SECTION B. SUITABILITY FOR CURRENT JOB IN ORGANIZATION						
<p>DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</p>						
<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p>						
<p>5/6</p> <p style="font-size: x-small;">RATING NUMBER</p>						

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any notation. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OMA no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle) NOEL, James A.	2. DATE OF BIRTH 19 March 1913 //	3. SEX M	4. SERVICE DESIGNATION (DI)
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/WH/II/DC	6. OFFICIAL POSITION/TITLE Area Ops Ofcr - Branch Chief		
7. GRADE GS-15	8. DATE REPORT DUE IN OF 9 Nov 1957	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 21 Oct 56 - 20 Oct 57	
10. TYPE OF REPORT (Check one)	INITIAL <input checked="" type="checkbox"/>	REASSIGNMENT - SUPERVISOR <input type="checkbox"/>	SPECIAL (Specify)
	REASSIGNMENT - EMPLOYEE <input type="checkbox"/>		

SECTION F.

CERTIFICATION

FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED.

A. THIS DATE 14 Oct 57	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR Donald J. MacGee	C. SUPERVISOR'S OFFICIAL TITLE ADC/WH
FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.		
D. THIS DATE 15 Oct 57	E. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL J. C. King	F. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, WH

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

RATING NUMBER 5	1. ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
	2. HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
	3. MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
	4. READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
	5. WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
	6. ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL.
	7. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
	1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
	2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
	3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION
ACTUAL	POTENTIAL
3	
3	
	2
	3
3	
3	
	OTHER (Specify)

SECRET

(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER SUPERVISION

4. COMMENTS CONCERNING POTENTIAL

He will be an excellent Station Chief where there are
and PP responsibilities.

OCT 24 2 38 PM '57

MAIL ROOM

SECTION M. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Senior staffs

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

none

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE-AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	3	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITIES	5	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
3	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	5	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGEMENT
5	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	5	17. COMES UP WITH SOLUTIONS TO PROBLEMS	3	27. IS FERTILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
4	10. CAN COPE WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET

SECRET

(When Filled In)

FITNESS REPORT (Part I) PERFORMANCE

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.
FOR THE SUPERVISOR This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials.

SECTION A. GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX 4. SERVICE DESIGNATION
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
7. GRADE 8. DATE REPORT DUE IN OF 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
10. TYPE OF REPORT (Check one)

SECTION B. CERTIFICATION

1. FOR THE RATER: THIS REPORT WAS NOT SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY.
2. CHECK (X) APPROPRIATE STATEMENTS:
3. THIS DATE 4. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR 5. SUPERVISOR'S OFFICIAL TITLE

BY DATE
Reviewed by [Signature] 2-A-57

1. I certify that any substantial difference of opinion with the supervisor is reflected in the above section.
2. THIS DATE 3. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL 4. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES
5
2. DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period.
3. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
4. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.

COMMENTS:

[Handwritten signature]

SECRET

(When Filled In)

OFFICE OF PERSONNEL
FEB 5 2 37 PM '57
MAIL ROOM

7. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- State in the spaces below up to six of the most important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- Note performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	MAX AND USES AREA KNOWLEDGE	CONDUCTS INVESTIGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEFERPIING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA

E. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

<p>DESCRIPTIVE RATING NUMBER</p> <p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p>	<p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p>
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SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER
General Management of Branch	5	Spotting operational possibilities	5
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER
Supervision FI Ops	6	Use of area knowledge	5
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER
Supervision FP Ops	4	Coordination other Branches	5

8. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

Under his supervision the Branch will do a reliable job without higher echelon direction. His administration is efficient. His inability to express himself in clear, and forceful language is a handicap, particularly in connection with briefings.

In addition to his proven competence as an FI officer he is applying with steadily increasing effectiveness his growing knowledge of the conduct of FP operations.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

<div style="border: 1px solid black; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;">5</div>	<ol style="list-style-type: none"> 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED 2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW 3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION
---	--

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? YES NO. IF YES, EXPLAIN FULLY: He has at the same time excellent judgment and displays sound thinking at all times; these characteristics, along with his administrative ability, are his distinguishing qualities.

SECRET

SECRET

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any questions. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL RATING on the employee, however, it MUST be completed and forwarded to the OC no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E. GENERAL					
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION		
NOEL James A.	19 March 1911	M	III		
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT			6. OFFICIAL POSITION TITLE		
DDP/WB/Branch I			Area Ops Officer (Branch Chief)		
7. GRADE	8. DATE REPORT DUE IN OP	9. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
GS-15	4 November 1956	11 October 1955 - 20 October 1956			
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SECTION F. CERTIFICATION					
1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED					
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR	C. SUPERVISOR'S OFFICIAL TITLE			
7 DEC 1956	Franklin J. Adams	Deputy Chief/WED			
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.					
A. THIS DATE	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL	C. OFFICIAL TITLE OF REVIEWING OFFICIAL			
4 Feb '57	J. C. King	Chief WED			
SECTION G. ESTIMATE OF POTENTIAL					
1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES					
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels on his kind of work.					
RATING NUMBER	1	ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED			
	2	HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED			
	3	MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES			
	4	READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES			
	5	WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING			
	6	ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL			
	7	AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES			
2. SUPERVISORY POTENTIAL					
DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.					
DESCRIPTIVE RATING NUMBER	0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION 1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION 2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION 3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION				
ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION			
3		A GROUP DOING THE BASIC JOB (truck drivers, stenographers, technicians or professional specialists of various kinds) whose contact with immediate subordinates is frequent (First line supervisor)			
3		A GROUP OF SUPERVISORS WHO DIRECT THE BASIC JOB (Second line supervisors)			
	1	A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)			
	2	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT			
3		WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION			
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPOSITE SEX			
		OTHER (Specify)			

SECRET

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION
30 months

4. COMMENTS CONCERNING POTENTIAL **He will be an above-average station chief, particularly in the area of** basically FI missions; he is, as a result of his current Hqs. assignment, showing an increasing comprehension of PP matters, and may in the near future have **the** opportunity to assume strong PP field responsibilities.

OFFICE OF PERSONNEL
FBI
207TH ST
MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
FI Staff; however, not in the near future because of the key position he occupies now in this Division.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS
None of importance.

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

CATEGORY NUMBER
 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
4	1. ABLE TO SEE ANOTHER'S POINT OF VIEW	4	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	3	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	3	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
3	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES	4	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	4	24. WORKS WELL UNDER PRESSURE
3	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT SEEKING SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	3	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
4	9. GETS THINGS DONE	5	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
4	10. CAN COPE WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOCABLE TIME LIMITS	5	30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION

SECRET
(When Filled In)

FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It seeks to provide:
 1. The agency selection board with information of value when considering the application of an individual for membership in the career service; and
 2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current administrative instructions regarding the initiation and transmittal of this report.

TO THE SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is essential that you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows that you are

Reviewed by PUD *[Signature]*

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I (To be filled in by Administrative Officer)

1. NAME (Last)	(First)	(Middle)	2. DATE OF BIRTH	3. SEX	4. CAREER DESIGNATION
BOZL	James A.		19 March 1911	M	SP-01
5. DATE OF ENTRANCE ON DUTY	6. OFFICE ASSIGNED TO		7. DIVISION	8. BRANCH	
15 August 1944	DDP		WH	I	
9. NATURE OF ASSIGNMENT			10. IF FIELD, SPECIFY STATION:		11. GRADE
<input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/> FIELD			Caracas, Venezuela		GS-0136.01-15
12. DATE THAT THIS REPORT IS DUE		13. PERIOD COVERED BY THIS REPORT (Inclusive dates)			
10 October 1955		16 July 1954 - 10 October 1955			

SECTION II (To be filled in by Supervisor)

1. CURRENT POSITION	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
Branch Chief	20 January 1956
3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS: (List in order of frequency):	
<p>Branch Chief: Under Division Chief, plans and supervises performance of all covert espionage and CE ops, covert political, economic and psychological warfare activities in area of responsibility and the collection of foreign clandestine intelligence in the area. Reviews all projected and current FI and PP operations with desk officers; provides guidance to desk officers on FI and PP ops matters; supervises processing and dissemination of foreign clandestine intelligence information collected in area; makes recommendations to Div. Chief of any change in projects, organization or procedures in order to achieve maximum effectiveness; responsible for general administration and supervision of Branch personnel at Hqs.</p> <p>This officer was Chief of a major station for part of the period under review.</p>	

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report has has not been shown to the individual rated.

THIS DATE: *March 20 '56* NAME AND SIGNATURE OF RATER (Employee's immediate supervisor): *F. P. [Signature]*

I HAVE REVIEWED THIS REPORT (Comments, if any, are reflected by attached memorandum) THIS DATE: *March 20, 1956* NAME AND SIGNATURE OF REVIEWING OFFICIAL (Official next higher in line of authority): *[Signature]*

SECRET
(When Filled In)

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in ^{most} ~~most~~ degree to most people. On the right hand side of the page are four major categories of descriptions. The scale within ^{each} ~~each~~ category is divided into three small blocks; this is to allow you to ^{make finer distinctions if you so desire.} ~~make finer distinctions if you so desire.~~ The statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have ^{no} ~~no~~ definite opinion as to whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you ^{think} ~~think~~ the description is not at all suited to the individual.

STATEMENTS	CATEGORIES	CATEGORIES					
		NOT OBSERVED	DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN ABOVE AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.	SAMPLES			X			
B. PRACTICAL.						X	
1. A GOOD REPORTER OF EVENTS.							X
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.							X
3. CAUTIOUS IN ACTION.						X	
4. HAS INITIATIVE.						X	
5. UNEMOTIONAL.						X	
6. ANALYTIC IN HIS THINKING.						X	
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.						X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.							X
9. HAS SENSE OF HUMOR.						X	
10. KNOWS WHEN TO SEEK ASSISTANCE.						X	
11. CALM.						X	
12. CAN GET ALONG WITH PEOPLE.						X	
13. MEMORY FOR FACTS.						X	
14. GETS THINGS DONE.							X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.							X
16. CAN COPE WITH EMERGENCIES.							X
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.							X
18. HAS STAMINA CAN KEEP GOING A LONG TIME.				X			
19. HAS WIDE RANGE OF INFORMATION.						X	
20. SHOWS ORIGINALITY.						X	
21. ACCEPTS RESPONSIBILITIES.							X
22. ADMITS HIS ERRORS.						X	
23. RESPONDS WELL TO SUPERVISION.						X	
24. EVEN DISPOSITION.					X		
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.					X		

SECRET
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS:
Strength: General reliability.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? NO YES. IF YES, WHY?

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?
Advance PP.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):
His attention to duty has been manifested in steady improvement in regard to major objectives and in a commendable increase of station assets.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A-D, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- 1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- 2. BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- 5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? NO YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the agency.

- 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY. WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.
- 2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY... IRRITATED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- 4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY... THINKS IN TERMS OF A CAREER IN THE AGENCY.
- 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE AGENCY.
- 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

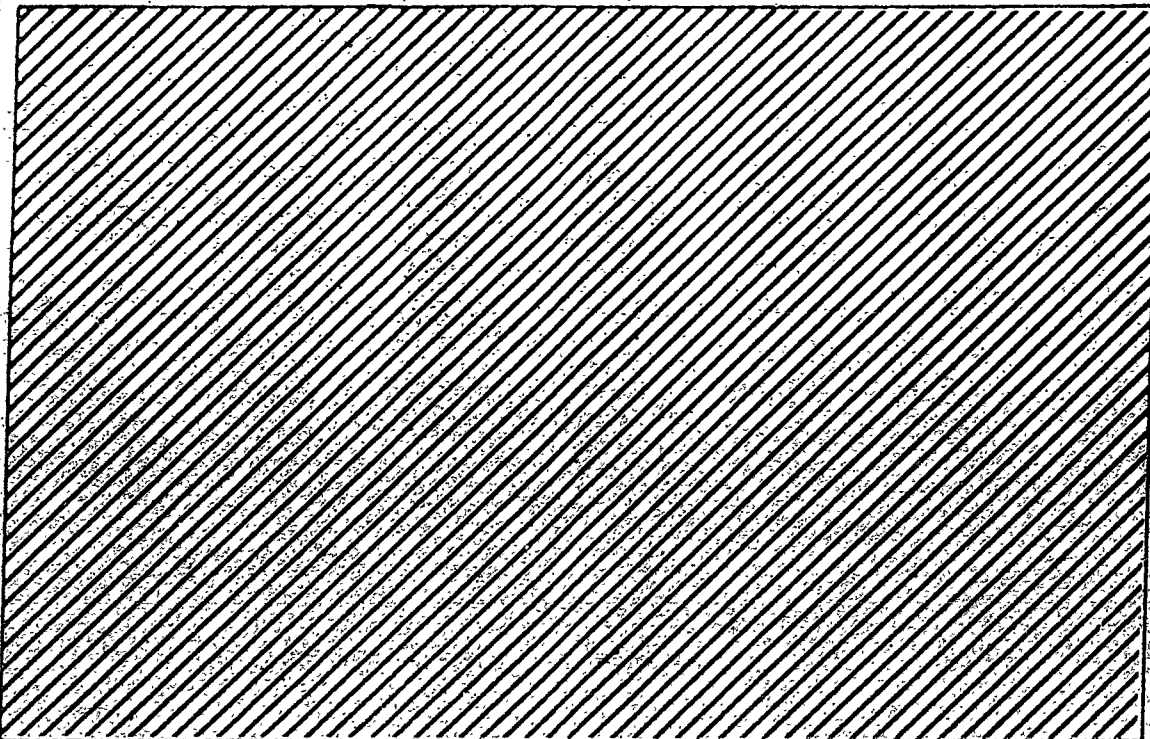
- 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.
- 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

SECRET

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) Noel, James A.	NAME AND RELATIONSHIP OF DEPENDENT* Wife-Lillian	CLAIM NUMBER 67-0415
--	---	-------------------------

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 8 August 1966.

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 2 December 1966	SIGNATURE OF BSD REPRESENTATIVE
-----------------------------------	---------------------------------

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE	DO NOT COMPLETE FOR HEADQUARTERS USE ONLY		
	AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:		
	NAME OF EMPLOYEE (true)	DATE (from item 3-1)	NAME OF SUPERVISOR (true)
	James Noel	18 Feb. 1963	
	NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:		DATE

TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE	7a. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
19 Mar 1911	GS-16	Chief of Station	23 September 1961
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		7b. EXPECTED DATE OF DEPARTURE
	Madrid		about 10 June 1964
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7c. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			

8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):

Chief of Station. Overall responsibility for all KUBARK operations and activities in country of assignment.

9. PREFERENCE FOR NEXT ASSIGNMENT:

A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.

Return to post for second tour following home leave.

B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):

None at this time.

SECRET

D. PREFERENCE FOR NEXT ASSIGNMENT (continued)

C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:

- RETURN TO MY CURRENT STATION
- BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:
1ST. CHOICE VI 2ND. CHOICE III 3RD. CHOICE -
- BE ASSIGNED TO ANOTHER FIELD STATION. WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:
1ST. CHOICE Hague 2ND. CHOICE Copenhagen 3RD. CHOICE Mexico City

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? INDICATE NUMBER OF WORK DAYS 45

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:
wife; and two sons, ages (at time of contemplated travel - June 1964) 15 and 13.

11A. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT
None - except schooling facilities for children.

12. SIGNATURE: COMPLETE ITEM NO. 9-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION.

13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

14. SIGNATURE: COMPLETE ITEM NO. 9-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

Recommend approval of extension to June 1964. A recommendation regarding a second tour or other assignment will be forwarded to the Panel at a later date.

16. NAME OF CAREER SERVICE OFFICER OR PERSONNEL OFFICER [Signature]
DATE 11 April 1963

FOR USE OF CAREER SERVICE

17. EMPLOYEE HAS HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT

18. REFERENCE DISPATCH NO. _____ CABLE NO. _____

19. TYPED OR PRINTED NAME

20. SIGNATURE

21. TITLE

22. DATE

23. COMMENTS

DO NOT COMPLETE

SECRET

MEMORANDUM FOR: Director of Personnel
VIA: Deputy Director (Plans)
SUBJECT: Admission

1. An analysis of the compromise and arrest of Agency personnel in Havana on 14 September 1960, originally made by the Chief, Operational Services, and since confirmed by a review committee, assigns to S-1 Division responsibility for command failures in control and supervision of a sensitive operation. I find that the following officers, by reason of the official assignments they then held, could or should have exercised such control and supervision:

[REDACTED]

f. James A. Noel as Chief of Station, Havana

[REDACTED]

2. This memorandum constitutes an official admission to the above officers, and will be included in their personnel files.

JSA J. C. King

J. C. KING
Chief

Western Hemisphere Division

DDP/BA-C/WH, [REDACTED]
Distribution:
Orig & 1 - Addressee
1 - ea Personnel File
1 - DD/P

[REDACTED]

SECRET

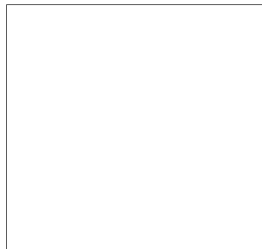
23 January 1959

MEMORANDUM FOR: JAMES A. ROZL

SUBJECT: Compensation for Extraordinary Performance of Duties.

1. It is with great personal satisfaction that I have reviewed the performance of members of this Division and, in particular, your own, during the recent crisis in Cuba. I fully concur with your commendation of various members of your staff, and I am having it made a matter of record in the personnel folder of each employee, together with a supporting comment from the Division. In addition, I wish to single out your own outstanding performance. You have justified our highest estimate of your qualifications at the time of your selection as Chief of Station, Havana. Your consistently sound and intelligent evaluation of the situation, courageous and objective proposals for action, extensive coverage of the various groups involved, immediate and comprehensive reporting, dedication to duty, and leadership, are among the major ingredients of your success.

2. Now that the military phase of the crisis is over, although the political one may linger long, I wish to thank you and the following members of your staff for a superior performance which has been a great credit to all concerned:



J. C. King
 J. C. KING
 Chief, WAB

SECRET

SECRET
COPY

DEPARTMENT OF STATE
Washington

Bureau of Inspection, Security and Consular Affairs

In reply refer to
SY

31 March 1954

My dear Mr. Dulles:

I should like to express my appreciation to you for the security assistance furnished by your representatives during the Tenth Inter-American Conference at Caracas, Venezuela. Colonel J. C. King, the Head of your Latin American Division and Mr. James A. Noel, your station Chief in Caracas were a tremendous help to us in carrying out our security arrangements for the Conference and for the protection of the Secretary and Conference Delegates.

Colonel King was most cooperative and assisted us greatly during the initial planning of the security and throughout the Conference. The cooperation and advice of Mr. Noel was an invaluable service. Through Mr. Noel's knowledge and contacts our work was greatly facilitated. He consistently made available his time, equipment and the facilities of his office and maintained a close working relationship with our security representatives in Caracas.

Please accept my thanks for the assistance of Colonel King and Mr. Noel and for a job well done.

Sincerely yours,

(Sgd.) Scott McLeod
Administrator

The Honorable
Allen Dulles
Director,
Central Intelligence Agency,
Washington, D. C.

(Original in 201 file of J.C. King)

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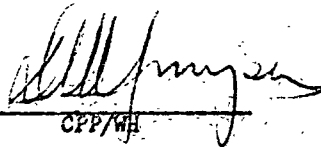
21 January 1954

MEMORANDUM FOR: CWH

File

SUBJECT : Reference to James A. Noel by William I. Clark,
Assistant Director U.S.I.A. for Latin America.

During the briefing of CIA personnel conducted by William I. Clark, Assistant Director of U.S.I.A. for Latin America, on 14 January 1954, he twice referred to the excellent cooperation between our Chief of Mission at Caracas, James A. Noel and the P.A.O., which he characterized as exemplary and a model for all other stations.


CPP/WI

Distribution:

Original and 1: Addressee

SECRET

Office Memorandum • UNITED STATES GOVERNMENT

TO : Chief, FBI

DATE: 30 June 1949

FROM : Commo

SUBJECT: Training

Mr. James A. Noel was given the training course, "Basic Familiarization in Sound and Surveillance Equipment."

This training was given on June 28, 1949 in the Commo Demonstration Room, 1005A "L" Building and was of two hours duration.



*file
mub*

SECRET
SECURITY INFORMATION

MAR 20 1952

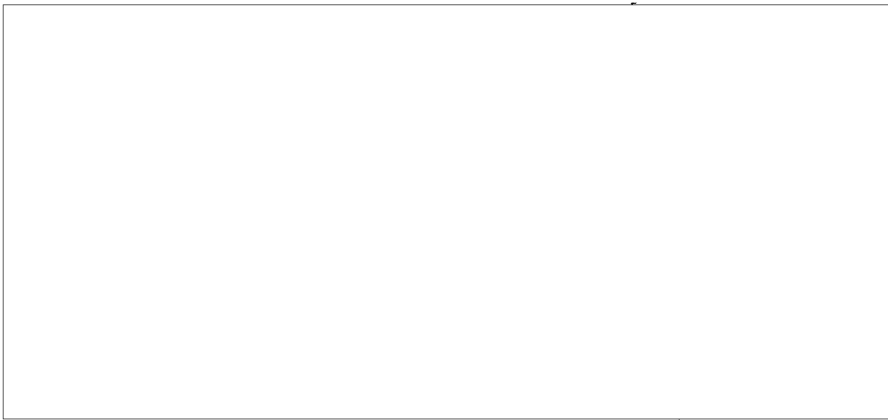
MEMORANDUM FOR: THE SECRETARY OF STATE

ATTENTION : Mr. W. Park Armstrong, Jr.

SUBJECT : BOEL, James Arthur [redacted]

REFERENCE : Appendix E-4 to Memorandum of 23 November 1951
Subject, Representation in Foreign Service
Missions

- ENCLOSURES :
- a. Application Forms 57 and DSP-34
 - b. Medical Forms 88 and 89
 - c. Occupational History Supplement
 - d. Proposed Biography

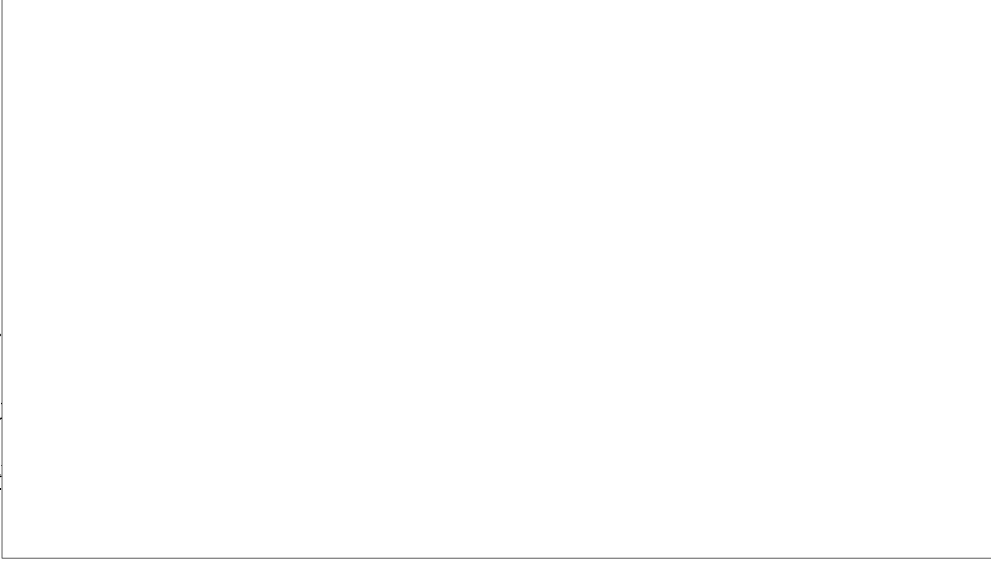


3. It is requested that subject arrive at his destination on or about 15 May 1952.

Richard Hales
for
LYMAN D. KIRKPATRICK
Assistant Director

SECRET
SECURITY INFORMATION

JAMES ALTHAM BOWEN



SECRET

SECURITY INFORMATION



SECRET
(When Filled In)

lle

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 055292	NAME (Last-First-Middle) NOEL James Arthur	DATE OF BIRTH 19 March 1911
--------------------------------	--	---------------------------------------

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------	--------------------------------	--------------------------	--

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)
	MAJOR	MINOR				
1.						
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:

2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)

3. DATE OF BIRTH 4. PLACE OF BIRTH (City, State, Country)

5. OCCUPATION 6. PRESENT EMPLOYER

7. CITIZENSHIP 8. FORMER CITIZENSHIP(S) COUNTRY(IES) 9. DATE U.S. CITIZENSHIP ACQUIRED

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				
2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE				

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GROUP 1
Excluded from automatic
downgrading and
declassification

15 AUG 1968

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(When Filled In) P. 10-10-68

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR PERIOD OF KNOWLEDGE	DATE OF KNOWLEDGE	KNOWLEDGE ACQUIRED BY - CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
1.		1942-44	2 3B 1942-44				
2.			MAIL ROOM				

SECTION VI TYPING AND STENOGRAPHIC SKILLS

1. TYPING (PPM) 2. SHORTHAND (WPM) 3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM

GREGG SPEEDWRITING STENOTYPE OTHER SPECIFY:

SECTION VII SPECIAL QUALIFICATIONS

PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.

SECTION VIII MILITARY SERVICE

CURRENT DRAFT STATUS

1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? YES NO

2. NEW CLASSIFICATION

3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS

4. IF DEFERRED, GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS

CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG

ARMY MARINE CORPS COAST GUARD NATIONAL GUARD
 NAVY AIR FORCE AIR NATIONAL GUARD

1. CURRENT RANK, GRADE OR RATE 2. DATE OF APPOINTMENT IN CURRENT RANK 3. EXPIRATION DATE OF CURRENT OBLIGATION

4. CHECK CURRENT RESERVE CATEGORY READY RESERVE STANDBY (Active) STANDBY (Inactive) RETIRED DISCHARGED

5. MILITARY MOBILIZATION ASSIGNMENT 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED

MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or As Civilian)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	RESIDENT	
			AGENCY-SPONSORED	

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO
1.			
2.			
3.			

SECTION X REMARKS

DATE: 2 May 1968

SIGNATURE OF EMPLOYEE: [Signature]

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llc

OFFICIAL USE ONLY (When Filled In)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

SECTION I BIOGRAPHIC AND POSITION DATA

1 EMP SER NO: 089292 2 NAME: Last First Middle: JOEL JAMES A 3 SEX: M. 4 DATE OF BIRTH: 03/19/11 5 SCHEDULE GRADE STEP: GS-16-05

6 SO: D 7 POSITION TITLE: CHIEF OF BASE 8 OFFICE OF ASSIGNMENT: DDD 9 LOCATION (Country, City): SAN FRANCISCO, CALIFORNIA

SECTION II AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
GUATEMALA	PCS :CC	47/09/18	49/07/81
ARGENTINA	PCS :CC	49/08/01	52/08/81
VENEZUELA	PCS :VV	52/09/03	55/12/82
SOUTH AMERICA	TDY :CC	58/06/01	58/07/81
SOUTH AMERICA	TDY :CC	57/02/01	57/02/81
SOUTH AMERICA	TDY :CC	57/11/01	57/12/81
CUBA	PCS :VV	58/09/04	61/01/87
SPAIN	PCS	61/09/21	66/07/09

OVERSEAS DATA
 CODED
 DATE: 29 Jun 67 INITIALS: JJS

SECTION III EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NO COLLEGE DEGREE ON RECORD			
NO COLLEGE DEGREE			

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GROUP 1 Excluded from automatic downgrading and declassification

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SECTION III EDUCATION (Cont'd)						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED		ADDRESS (City, State, Country)		YEARS ATTENDED From To		GRADUATE
San Diego Senior High School		San Diego, California		1927-29		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM / QTR HRS (Specify)
	MAJOR	MINOR				
1 NONE						
2						
3						
4						
5. IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.						
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> NONE NONE </div>						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1 NONE						
2						
3						
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1 NONE						
2						
3						
4						
5						
AGENCY-SPONSORED EDUCATION						
Specify which, if any, of the education shown in Section III was Agency sponsored						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1 NONE						
2						
3						
4						
5						

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(When Filled In)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			CHECK IN WORK ASSIGNMENT
				FOR OFFICE	TRAVEL	STUDY	
MEXICO (West Coast)	Political, economic, topographic, cultural	Jan. 1944 to Aug. 1944	---	X			X
SPAIN	Political, economic, topographic, cultural	Sept. 1944 to Feb. 1946	---	X			X
GUATEMALA	Political, economic, topographic, cultural	Apr. 1947 to May 1949	---	X			X
ARGENTINA	Political, economic, cultural	Aug. 1949 to Dec. 1951	---	X			X
VENEZUELA	Political, economic, cultural	Aug. 1952 to Dec. 1955	---	X			X
CUBA	Political, economic, topographic, cultural	Sept. 1958 to Jan. 1961	---	X			X
SPAIN	Political, economic, topographic, cultural	Sept. 1961 to July 1966	---	X			X

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) 60	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED. CHECK (X) APPROPRIATE ITEM. <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> SIENOTYPE <input type="checkbox"/> OTHER: _____	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (complanator, micrograph, card punch, etc.) NONE			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH. Collector contemporary Spanish art	
2. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4, SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW speed, coding & receiving), OFFSET PRESS, TURNET LATHE, EDP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES None	
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOTO ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registry number if known)	5. FIRST LICENSE/CERTIFICATE (year of issue) 6. LATEST LICENSE/CERTIFICATE (year of issue)
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. Do NOT submit copies unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest subjects, novels, short stories, etc.) NONE	
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED NONE	
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE NONE	

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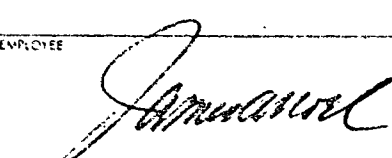
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SECTION VII MILITARY SERVICE			
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		7. SELECTIVE SERVICE CLASSIFICATION	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS		8. IF DEFERRED, GIVE REASON	
MILITARY SERVICE RECORD (Active Duty Only)			
1. MILITARY ORGANIZATION (Army, Navy, etc. - specify) NONE	2. BRANCH OR CORPS	3. DATES OF SERVICE (extended active duty) FROM TO	
4. STATUS (Regular, Reserve, etc. - specify)	5. RANK, GRADE OR RATE (at separation if past service)		6. SERIAL SERVICE OR FILE NUMBER
7. CHECK TYPE OF SEPARATION <input type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> UNDUKE HARDSHIPS <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> RETIREMENT FOR AGE <input type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY			
8. BRIEF DESCRIPTION OF MILITARY DUTIES (Record the duties and skills which best describe your work or function in the military service) NONE			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG NONE <input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT (or PROMOTION RANK)	3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STAGGER (Active) <input type="checkbox"/> STAGGER (Inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED			
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (Record the duties and skills which best describe your work or function in the military service) NONE			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS. NONE			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	
1. NONE			RESIDENT CORRESPONDENCE AGENCY SPONSORED
2.			RESIDENT CORRESPONDENCE AGENCY SPONSORED
3.			RESIDENT CORRESPONDENCE AGENCY SPONSORED
4.			RESIDENT CORRESPONDENCE AGENCY SPONSORED
5.			RESIDENT CORRESPONDENCE AGENCY SPONSORED

SECRET

(When Filled In)

SECTION II		MARITAL STATUS			
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried SPECIFY)		NO CHANGE			
2. NAME OF SPOUSE (Last First Middle Maiden)					
3. DATE OF BIRTH	4. PLACE OF BIRTH (City State Country)				
5. OCCUPATION	6. PRESENT EMPLOYER				
7. CITIZENSHIP	8. FORMER CITIZENSHIPS COUNTRIES	9. DATE U.S. CITIZENSHIP ACQUIRED			
SECTION III					
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE					
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS	
			USA		
			USA	SAJMO	
SECTION XI				PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS	
NAME AND CHAPTER	ADDRESS (Number Street City State Country)	DATE OF MEMBERSHIP			
		FROM	TO		
American Foreign Service Association	Wash. D.C. RESIGNED October 1966.				
DATE	SIGNATURE OF EMPLOYEE				
8 May 1967					

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(When Filled In)

PERSONNEL SERIAL NO. 355292		CERTIFICATION FOR LANGUAGE AWARD			CG NO. 759
1. NAME (Last, First, Middle) NOEL JAMES BIRCHALL			2. DATE OF BIRTH (Month, Day, Year) MARCH 17, 1911		
3. CAREER STATUS YES		4. SS FI	5. COMPONENT WHD/CRUISE II		
6. LANGUAGE SPANISH		CODE 740	7. DATE OF TEST (Month, Day, Year) APRIL 7, 1958	8. ANNIVERSARY DATE (Month, Day, Year) April 25, 1957	
9. TEST SCORE 100		READING H	WRITING I	PRONUNCIATION	SPEAKING
10. APPLICABLE LEVEL	COMPREHENSIVE		SPECIALIZED-READING		SPECIALIZED-SPEAKING
	ELEM.	INTER.	HIGH	ELEM.	INTER.
11. I CERTIFY THAT THE ABOVE NAMED EMPLOYEE IS ELIGIBLE FOR THE AWARD INDICATED, HAVING MET ALL THE REQUIREMENTS FOR SAID AWARD.			12. TYPE OF AWARD OF AW 5-1 C-1-1 I H R H		13. I CERTIFY FUNDS ARE AVAILABLE
DATE			SIGNATURE	AMOUNT OF AWARD \$100.00	CHARGE ALLOTMENT NO. DATE
14. FEDERAL TAX DEDUCTION			\$	15. EMPLOYEE PAYROLL NO.	
16. STATE/DC TAX DEDUCTION			\$	17. ALLOTMENT OF ASSIGNMENT	
18. NET AMOUNT OF AWARD PAID			\$	19. CHECK NUMBER ISSUED	DATE
20. FORWARD CHECK TO: FIRST NATIONAL BANK, 510 WASHINGTON					

FORM 1273 7-57

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U.S. GOVERNMENT PRINTING OFFICE: 1957 O-51461

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PERIODIC SUPPLEMENT
PERSONAL HISTORY STATEMENT

THIS DATE
SEP

INSTRUCTIONS

This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through XIII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete coverage than you have previously reported.

SECTION I

GENERAL Life

1. FULL NAME (Last-First-Middle)

NOEL, James Arthur

2. CURRENT ADDRESS (No., Street, City, Zone, State)

5528 Uppingham Street
Somerset
Chevy Chase 15, Maryland

3. PERMANENT ADDRESS (No., Street, City, Zone, State)

3506 Juniper Street
San Diego 4, California

4. HOME TELEPHONE NUMBER

OLIVER 4-3809

5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE

California

SECTION II

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME (Last-First-Middle) PRESENTLY RESIDING IN U.S.

NOEL, Lillian Bobbett

2. RELATIONSHIP

Wife

3. HOME ADDRESS (No., Street, City, Zone, State, Country)

5528 Uppingham Street, Chevy Chase 15, Maryland

4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE

5. HOME TELEPHONE NUMBER

Oliver 4-3809

6. BUSINESS TELEPHONE NUMBER

none

7. BUSINESS TELEPHONE EXTENSION

none

8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IS SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE.

Alfred E. NOEL (father), 1714 Dale Street, San Diego 2, California

SECTION III

MARITAL STATUS

1. CHECK (X) ONE: SINGLE MARRIED WIDOWED SEPARATED DIVORCED ANNULLED

2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

none

SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving data below for all previous marriages. If marriage is contemplated, provide same data for fiancée.

3. NAME (First Middle Maiden Last)
Lillian Edith Bobbett NOEL

4. DATE OF MARRIAGE 29 Sept. 1934

5. PLACE OF MARRIAGE (City, State, Country)
San Diego, California

6. ADDRESS OF SPOUSE BEFORE MARRIAGE (No., Street, City, State, Country)
3614 Fairmount Avenue, San Diego, California

CODED

7. LIVING YES NO

8. DATE OF DEATH

9. CAUSE OF DEATH

FOR

10. CURRENT ADDRESS (Give last address, if deceased)
5528 Uppingham Street, Chevy Chase 15, Maryland

QUALIFICATIONS

11. DATE OF BIRTH 12 January 1911

12. PLACE OF BIRTH (City, State, Country)
Colorado Springs, Colorado

DATE 25 JUL 1958

13. IF BORN OUTSIDE U.S., DATE OF ENTRY
N.A.

14. PLACE OF ENTRY
N.A.

15. CITIZENSHIP (Country)
U.S.A.

16. DATE ACQUIRED
birth

17. WHERE ACQUIRED (City, State, Country)
birth in U.S.

18. OCCUPATION
Housewife

19. PRESENT EMPLOYER (Also give former employer, or if spouse is deceased or unemployed, last two employers)
N.A.

20. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)
N.A.

SECTION III CONTINUED TO PAGE 2

SECRET

(When Filled In)

SECTION III CONTINUED FROM PAGE 1

71. DATES OF MILITARY SERVICE OF SPOUSE (From and To) BY MONTH AND YEAR N.A.	
72. BRANCH OF SERVICE N.A.	73. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED N.A.
74. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN Clerk in U.S. Consulate, Ensenada, B.C., Mexico, from 1935-37.	

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1. FULL NAME (Last-First-Middle) NONE	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

5. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES NO

2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? YES NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.

3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? YES NO

4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.

5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS.
None

SECTION V CONTINUED TO PAGE 3

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(When Filled In)

SECTION V CONTINUED FROM PAGE 2

6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
Bank of Bethesda (checking account)	Bethesda, Maryland
1st National Bank (checking account)	5th & Bwy, San Diego, California

7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? YES NO

8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S):

N.A.

SECTION VI: CITIZENSHIP

1. COUNTRY OF CURRENT CITIZENSHIP: **United States**

2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE:
 BIRTH MARRIAGE OTHER (Specify)

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP? YES NO

4. GIVE PARTICULARS

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (First papers, etc.)

SECTION VII: No changes since 30D EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED:

<input type="checkbox"/> LESS THAN HIGH SCHOOL GRADUATE	<input type="checkbox"/> OVER 120 YEARS OF COLLEGE OR NO DEGREE
<input type="checkbox"/> HIGH SCHOOL GRADUATE	<input type="checkbox"/> BACHELOR'S DEGREE
<input type="checkbox"/> TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE	<input type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE
<input type="checkbox"/> TWO YEARS COLLEGE OR LESS	<input type="checkbox"/> MASTER'S DEGREE <input type="checkbox"/> DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	SEM/QTTR HRS. COMPLETED (Specify)
	MAJOR	MINOR	FROM	TO			

3. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL HOURS
		FROM	TO	

4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)

NAME OF SCHOOL	STUDY OR SPECIALIZATION	DATES ATTENDED		TOTAL WEEKS
		FROM	TO	

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET
(When Filled In)

SECTION VIII GEOGRAPHIC AREA KNOWLEDGE						
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE KNOWLEDGE GAINED AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR WORK ASSIGNMENT OTHER THAN ORGANIZATION EXPERIENCE. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE," INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, COASTS, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY			
			RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Mexico	Political, economic, terrain, people	Jan. 1931 to Aug. 1944				X
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE OR TRAVEL FOR EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE Mexico - duty with U.S. Foreign Service, State Department.						
3. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE GAINED KNOWLEDGE AS A RESULT OF ORGANIZATION ASSIGNMENT OR ACTIVITY:						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF RESIDENCE, TRAVEL, ETC.	KNOWLEDGE ACQUIRED BY			
			HQTS ASSIGNMENT	FIELD ASSIGNMENT	TRAINING	
Spain	Terrain, indigenous psychology, pol. parties	Sept. 1944 thru Feb. 1947		X		
Guatemala	Terrain, sol. personalities, economic sit.	April 1947 thru April 1949		X		
Argentina	Political parties & personalities	August 1949 thru November 1951		X		
Venezuela	Political parties & personalities, industries.	September 1952 to Nov. 1955		X		
Colombia, Ecuador, Peru, Chile and Bolivia	Pol. parties & figures	June-July 56 Feb. 1957	X TRY			

SECTION IX TYPING AND STENOGRAPHIC SKILLS				
1. TYPING (W.P.M.) 60	2. SHORTHAND (W.P.M.)	3. SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM		
		<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENO-TYPED
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Comptometer, Mimeograph, Card Punch, etc.)				
SECTION X SPECIAL QUALIFICATIONS				
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH No changes since last report.				
2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK				
3. EXCLUDING EQUIPMENT NOTED IN SECTION V, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF SHORTWAVE RADIO, MULTILITH, TURRET LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.				
4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, etc.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRY NUMBER, IF KNOWN.				
5. FIRST LICENSE OR CERTIFICATE (Year of issue)		6. LATEST LICENSE OR CERTIFICATE (Year of issue)		

SECRET

SECRET
(When Filled In)

SECTION X CONTINUED FROM PAGE 8

1. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1.	1. INCLUSIVE DATES (From and To) April 1947 to April 1949	2. GRADE GS-12	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/ WH Division
4.	4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 2	5. OFFICIAL POSITION TITLE Chief of Station, Guatemala City, Guatemala	
6.	6. DESCRIPTION OF DUTIES Responsibility for the administration and operations of a field station. Opened our Station at Guatemala City. Established and maintained relations with other U.S. officials and agencies. Agent development and handling.		
1.	1. INCLUSIVE DATES (From and To) August 1949 to Nov. 1951	2. GRADE 13-14	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/ WH Division
4.	4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 8	5. OFFICIAL POSITION TITLE DCOM & later Chief of Mission, Puenos Aires, Argentina	
6.	6. DESCRIPTION OF DUTIES Chief of Station. Supervision of all station activities. Planning and execution of field operations. Maintenance of liaison with Ambassador and other U.S. officials. Agent handling.		
1.	1. INCLUSIVE DATES (From and To) Sept. 1952 to Nov. 1955	2. GRADE 14-15	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/ WH Division
4.	4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 10	5. OFFICIAL POSITION TITLE Chief of Station, Caracas, Venezuela	
6.	6. DESCRIPTION OF DUTIES Chief of Station. Supervision of all station activities. [redacted] Liaison with Amb. & other U.S. agencies. Planning & execution of field ops. Agent handling.		
1.	1. INCLUSIVE DATES (From and To) January 1956-June 1957	2. GRADE GS-15	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/WH Division, Branch I
4.	4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION 21	5. OFFICIAL POSITION TITLE Chief of Branch	
6.	6. DESCRIPTION OF DUTIES [redacted] Consulting senior staff & other components; briefing of Ambassadors & other officials.		
1.	1. INCLUSIVE DATES (From and To) June 3, 1957 to date	2. GRADE GS-15	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/WH Divisio, Branch II
4.	4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION from 20 to 25	5. OFFICIAL POSITION TITLE Chief of Branch	
6.	6. DESCRIPTION OF DUTIES As indicated in 4 above [redacted] Responsible to Division Chief for efficient handling of op matters relating to [redacted] (See other pages if required)		

SECRET
(When Filled In)

OFFICE OF PERSONNEL

SECTION XII CHILDREN AND OTHER DEPENDENTS						
1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.			2		3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepchildren, sister, etc.) WHO DEPEND ON YOU OR AT LEAST 50% OF THEIR SUPPORT, OR CHILDREN UNDER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.	
3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS						
NAME	RELATIONSHIP	YEAR OF BIRTH	SEX		CITIZENSHIP	ADDRESS
			M	F		
Lillian B. NOEL	wife	1911		x	U.S.	5528 Uorlingham St. Chevy Chase 15, Md.
	son	1948	x		U.S.	same
	son	1951	x		U.S.	same

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

Continuation Section VIII, 3.

In addition to the countries listed, I have traveled on TDY assignments to:

- [] - January 1953
- [] - Aug. 7 1955
- Cuba - Nov. 1953 and in Nov. 1956
- Panama - May 1948
- Costa Rica - May 1948
- Venezuela - July 1956

[] various during period Sept. 52-Nov. 55.

I have visited or transited every country of the Western Hemisphere []

[]

DATE COMPLETED: 12 October 1957

SIGNATURE OF EMPLOYEE: James A. NOEL *[Signature]*

SECRET
6

APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type name or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the

instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

1. NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR

2. OPTIONS (if mentioned in examination announcement)

3. PLACE OF EMPLOYMENT APPLIED FOR (City and State) **Foreign Service** 4. DATE OF THIS APPLICATION **10 Mar. 1952**

5. MR. (First name) (Middle) (Maiden, if any) (Last)
James Arthur BOEL

6. (A) STREET AND NUMBER OR R. D. NUMBER
5 111 Alban Towers, 3700 Massachusetts, N.W.,
(B) CITY OR POST OFFICE (including postal zone) AND STATE
Washington, D.C.

7. (A) LEGAL OR VOTING RESIDENCE (State) (B) OFFICE PHONE (C) HOME PHONE
California **Woodley 6400**
Ext. 511

8. DATE OF BIRTH (month, day, year) 9. MARRIED SINGLE
March 19, 1911

10. PLACE OF BIRTH (City and State; if born outside U. S., name city and country)
New York City, New York

11. MALE FEMALE 12. (A) HEIGHT WITHOUT SHOES: 6 FEET 0 INCHES (B) WEIGHT: 200 POUNDS

13. (A) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? YES NO
(B) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE
FSS-4 \$6,990. May 2, 1949

DO NOT WRITE IN THIS BLOCK
For Use of Civil Service Commission Only

APPLICANT MATERIAL ENTERED REGISTER
 RECAL APPLICANT SUBMITTED RETURNED

APPROVED:

OPTION	GRADE	EARNED RATING	PREFERENCE	AUGM. RATING
			<input type="checkbox"/> 5 POINTS (M.T.S.)	
			<input type="checkbox"/> 10 POINTS WIFE OR WIDOW	
			<input type="checkbox"/> SPECIAL	
			<input type="checkbox"/> BEING INVESTIGATED	

INITIALS AND DATE

14. (A) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ PER YEAR
You will not be considered for any position with a lower entrance salary.

(B) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED FOR:
 1 TO 3 MONTHS 3 TO 6 MONTHS 6 TO 12 MONTHS

NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a probational appointment.

(C) IF YOU ARE WILLING TO TRAVEL, SPECIFY:
 OCCASIONALLY FREQUENTLY CONSTANTLY

(D) CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED:
 IN WASHINGTON, D. C. ANYWHERE IN THE UNITED STATES
 OUTSIDE THE UNITED STATES

(E) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS:

15. EXPERIENCE: It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Begin with your present position and work back, explaining clearly the principal tasks which you performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, writers, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Military experience should be described in the spaces below in its proper sequence.

(a) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

16. PRESENT POSITION

DATES OF EMPLOYMENT (month, year)	EXACT TITLE OF YOUR PRESENT POSITION	CLASSIFICATION GRADE (if in Federal Service)	SALARY OR EARNINGS: STARTING \$ PER PERCENT \$ PER PER
FROM: TO PRESENT TIME	Unemployed		
PLACE OF EMPLOYMENT (city and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR		
	NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division)		
	KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacture of locks, etc.)		
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU	REASON FOR DESIRING TO CHANGE EMPLOYMENT		

DESCRIPTION OF YOUR WORK: **I left the Foreign Service in Dec. 1951 with the intention of entering private business in California in company with my oldest brother and other close relatives. A few months trial convinced me that I would not be happy away from Foreign Service work, in which I have spent my entire adult life, and I therefore am anxious to return to government foreign service as soon as it is possible for me to do so.**

16. CONTINUED



Jan. Arthur NOEL
511, Alban Towers,
3700 Mass. Ave., N.W.
Washington, D.C.

Birth: March 19, 1911.

Application for Federal Employment

<u>Date of Employment</u>	<u>Exact Title of Position</u>	<u>Salary</u>
Jan. 1931 to Oct. 1938	Vice Consul	Starting: \$1,800. p.a. Final: 2,000. p.a.

<u>Place of Employment</u>	<u>Name of Immediate Supervisor</u>
Ensenada, Mexico	Wm. A. Smale, Consul

<u>Name and Address of Employer</u>	<u>Reason for Leaving</u>
State Department, Foreign Service	transfer to Mazatlan

Number and kind of employees supervised

Two consular clerks

Description of Work

General consular work including shipping services, visas, passports, welfare and protection, agricultural reporting, drafting of replies to trade inquiries.

Jan. ...thur NOEL

DATE OF EMPLOYMENT (month, year) FROM **Oct. 1938** TO **Aug. 1944** EXACT TITLE OF YOUR POSITION **Vice Consul** CLASSIFICATION (if in Federal Service) **GS-11** SALARY OR EARNING STARTING **2,250** PER ANNUAL **3,000** PER MONTH

PLACE OF EMPLOYMENT (city and State) **(MEXICO) Mazatlan and Guadalajara** NAME AND TITLE OF IMMEDIATE SUPERVISOR **Rufus H. Lane, Jr. and Maurice L. Stafford, Consuls**

NAME AND ADDRESS OF EMPLOYER (firm, organization, or person, if Federal, name, department, bureau or establishment, and division) **State Department, Foreign Service** KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale or retail, manufacturing, etc.) **government**

NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU **cons. clerks** REASON FOR LEAVING **transfer to Bilbao**

DESCRIPTION OF YOUR WORK **2 posts at Mazatlan, 1 at Guadalajara**

consular officer in charge of all immigration work at these two consulates, as well as shipping, material services, passport and citizenship work, welfare and protection activities; also engaged in economic and political reporting at these posts. In charge of both consulates for prolonged periods during absence of principal officer.

If more space is required, use a continuation sheet (Standard Form No. 58) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to made of this application

17. MILITARY TRAINING. In the space below, describe any training received in the Armed Services (now already listed under Item 16) that would assist in appointing officers in places you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service awards you attended is especially important. (Extra space may be used to give full descriptions.)

DATES		LOCATION	DESCRIPTION OF TRAINING
FROM	TO		
			NONE

18. EDUCATION (Circle highest grade completed):

1 2 3 4 5 6 7 8 9 10 11 12 **(15)**

MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION

ELEMENTARY SCHOOL JUNIOR HIGH SCHOOL SENIOR HIGH SCHOOL

(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED **San Diego Senior High School, San Diego, Calif.**

(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED **History, Economics, commercial law, Spanish**

(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY

NAME AND SPECIALTY	DATES ATTENDED		YEARS COMPLETED		DEGREES COMPLETED		DEGREE OR DIPLOMA RECEIVED
	FROM	TO	DAY	NIGHT	TITLE	DATE	
None							

(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS

None

(E) LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS

None

(F) OTHER TRAINING, SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED SERVICES INSTITUTE (show name and location of school) OR IN SERVICE TRAINING IN PUBLIC OR PRIVATE EMPLOYMENT

None

19. INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES

LANGUAGE	READING		SPEAKING		UNDERSTANDING	
	EX.	GOOD	FAIR	POOR	EX.	GOOD
Spanish		X				X

DO YOU HAVE ANY OTHER SPECIAL QUALIFICATIONS, SUCH AS PHOTOGRAPHY, RADIO OPERATOR, TELETYPE OPERATOR, TEACHER, LAWYER, CPA, ETC.? YES NO

GIVE KIND OF LICENSE AND STATE: _____

FIRST LICENSE OR CERTIFICATE (YEAR) _____

20. IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRY IN REPLY TO NAME OF COUNTRY, DATES AND LENGTH OF TIME SPENT THERE, AND REASON OR PURPOSE (e.g., military service, business, education, recreation)

21. GIVE ANY SPECIAL QUALIFICATION NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS: (A) YOUR MOST IMPORTANT PUBLICATIONS (do not include copies unless requested) (B) RECORDS OF PATENTS OR INVENTIONS (C) PUBLIC AFFAIRS AND PUBLIC RELATIONS EXPERIENCE (D) MEMBERSHIP IN PROFESSIONAL OR SCIENTIFIC SOCIETIES, ETC. (E) HONORS AND FELLOWSHIPS RECEIVED.

26 DIFFERENT: List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE).

NAME	ADDRESS	OCCUPATION
Gordon B. Dunlap	321 Corona Street, San Antonio, Tex.	Motion Picture Distributor
Lee R. Elohn	903 N. Canal, Carlsbad, New Mexico	Retired FSO
H. B. Gregory	1700 Shroyer Road, Dayton, 9, Ohio	Official, Nat. Cash Register

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN

YES	NO	INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. ARE YOU NOW, OR HAVE YOU EVER BEEN, A MEMBER OF THE COMMUNIST PARTY U. S. F. OR ANY COMMUNIST ORGANIZATION?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. ARE YOU NOW, OR HAVE YOU EVER BEEN, A MEMBER OF A FASCIST ORGANIZATION?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, SOCIETY, SOCIETY GROUP, OR COMBINATION OF PERSONS WHICH ADVERTISES THE INTERESTS OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR AN ORGANIZATION, SOCIETY, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH HAS A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO OBTAIN OTHER PERSONS INTO THE SERVICE OF THE UNITED STATES OR OF ANY STATE OR TERRITORY OF THE UNITED STATES BY LEGAL MEANS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	31. HAVE YOU EVER BEEN ARRESTED, INDICTED, OR CONVICTED OF ANY CRIME AS A DEFENDANT IN A CRIMINAL PROCEEDING OR CONVICTED, FINED, OR IMPRISONED OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO POST BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, PLACE REGULATION OR ORDINANCE, INCLUDING VIOLATIONS OF FEDERAL LAWS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	32. HAVE YOU EVER BEEN BARRED OR PRECIPITATED FROM EMPLOYMENT BY ANY FEDERAL AGENCY OR STATE AGENCY?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE OR OTHER DISABILITY WHICH COULD BE CONSIDERED IN DETERMINING YOUR FITNESS FOR THE JOB?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	34. ARE YOU RECEIVING AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

SPECIAL INSTRUCTIONS FOR CLAIMING VETERAN PREFERENCE

A. If you are claiming preference as a **FRACETIME VETERAN** who has been awarded a campaign badge or service ribbon, or as a **DISABLED VETERAN**, or as the **WIFE OF A DISABLED VETERAN**, or as the **WIDOW OF A WAR OR CAMPAIGN VETERAN**, attach Veteran Preference Claim; CBC Form 14, together with proof specified therein.

B. If you are a **WAR-TIME VETERAN** not claiming disability preference, you should NOT submit your discharge with this application. Preference will be tentatively credited to you and if appointed, you will be required to submit to the appointing officer prior to entry on duty, official evidence of separation from active service in the armed forces of the United States in time of war.

YES	NO	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	37. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR?
<input type="checkbox"/>	<input type="checkbox"/>	(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION?
<input type="checkbox"/>	<input type="checkbox"/>	(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL-TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCE?
<input type="checkbox"/>	<input type="checkbox"/>	(D) DATE OF ENTRY OR ENTRIES INTO SERVICE
<input type="checkbox"/>	<input type="checkbox"/>	DATE OF SEPARATION OR SEPARATIONS
<input type="checkbox"/>	<input type="checkbox"/>	BRANCH OF SERVICE (Army, Navy, Marine Corps, Coast Guard, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	SERIAL NO. (if none, give grade or rating at time of separation)

YES	NO	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DID YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	(B) ARE YOU A DISABLED VETERAN? If so, and you have not listed your disability in answer to Item 33, explain in Item 39 below.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE-CONNECTED DISABILITY WHICH ENTITLES HIM FOR CIVIL SERVICE ADJUSTMENT?

THIS SPACE FOR USE OF APPOINTING OFFICER ONLY

The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on _____ 19____.

Agency: _____ Title: _____

ITEM NO. _____ ITEM NO. _____

If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.

Before signing this application check back over it to make sure that you have answered ALL questions correctly. I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

False statement on this application is punishable by Law (U. S. Code, Title 18, Section 89).

SIGNATURE OF APPLICANT: *Gordon B. Dunlap*

(Sign your name in INK (one given name and initial, and surname). If female, prefix Miss or Mrs. and if married, prefix your own given name as "Mrs. Mary L. Doe".)

U. S. GOVERNMENT PRINTING OFFICE: 1945 - O - 30207 10-52240-1

FORM DSF-54
1-26-51

DEPARTMENT OF STATE

**APPLICATION FOR FOREIGN SERVICE
AND DEPARTMENTAL EMPLOYMENT**
(Use with Standard Form 57)

BUDG. BAW NO. 47-8072.3
APPROX. EXPIRES August 31, 1954

If more space is required, use additional sheets of paper. Write on each sheet your name, address and date of birth. Identify each item, and attach to this application.

1. a. NAME (Print)

James Arthur NOEL

b. ADDRESS

**511, Alban Towers, 3700 Mass., N.W.,
Washington, D.C.**

2. USE OF APPLICATION - Check one box below to indicate whether you wish this application to be considered for Foreign Service employment only, or for both Foreign Service and Departmental employment. Completion of this form is not required for Department employment only. Standard Form 57 must be filled out in any case.

FOREIGN SERVICE ONLY

FOREIGN SERVICE AND DEPARTMENTAL

3. PERMANENT ADDRESS (Place from which you will expect transportation of self and household effects, if any, if appointed to the Foreign Service)

San Diego, California

4. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? IF A NATURALIZED CITIZEN, GIVE PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE. (Section 11 on Form 57).

Not applicable

5. a. ARE YOU NOW INVOLVED IN ANY LITIGATION OR SEPARATION AGREEMENT? YES NO

b. DO YOU KNOW OF ANY PROSPECTIVE LITIGATION IN WHICH YOU MAY BE INVOLVED? YES NO
(Give details, if answer is yes to a. or b.)

6. WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT FOR OVERSEAS EMPLOYMENT? (Exclusive of allowances) \$ _____ PER YEAR

7. WHAT RESTRICTIONS ARE THERE, IF ANY, ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD?

None

8. a. FULL NAME OF SPOUSE (if wife, give maiden name) **Lillian Bobbett NOEL**
b. DATE OF BIRTH **January 12, 1911**
c. PLACE OF BIRTH (City, State or Province, and Country) **Colorado Springs, Colo.**

9. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? **not applicable**
e. IF NATURALIZED, GIVE PLACE, DATE, AND NO. OF NATURALIZATION CERTIFICATE. **not applicable**

9. NAMES OF DEPENDENTS	RELATIONSHIP	DATE OF BIRTH	WILL RESIDE WITH YOU, OVERSEAS	
			YES	NO
Lillian Bobbett Noel	wife	Jan. 12, 1911	x	
James A. Noel, Jr.	son	Nov. 3, 1948	x	
Richard A. Noel	son	April 30, 1951	x	

10. a. FATHER'S NAME **Alfred E. NOEL**
b. PRESENT ADDRESS **1714 Dale St, San Diego, Calif.**
c. PLACE OF BIRTH **Plainfield, N.J.**
11. d. MOTHER'S NAME (Maiden) **Ethal Louise LEACOCK**
e. PRESENT ADDRESS **deceased**
f. PLACE OF BIRTH **New York City, N.Y.**

12. IF PARENTS BORN OUTSIDE THE UNITED STATES, DID THEY EVER OBTAIN UNITED STATES CITIZENSHIP? (Check below)

FATHER	<input type="checkbox"/> YES H.A. <input type="checkbox"/> NO	MOTHER	<input type="checkbox"/> YES H.A. <input type="checkbox"/> NO
--------	--	--------	--

13. HAVE YOU EVER APPLIED FOR A POSITION WITH THE DEPARTMENT OF STATE OR TAKEN AN EXAMINATION FOR A POSITION WITH THE DEPARTMENT OF STATE? YES NO
If "Yes" give date, nature of position applied for, and kind of examination taken, if any.

I was employed in the Foreign Service of the State Department from January 28, 1931 to December 1951.

NAME		RELATIONSHIP		ADDRESS	
None					

14. FOREIGN LANGUAGES (See instructions on Form 57)
 Give and estimate the extent of your competence, i.e. Excellent, Good, Fair

A. LANGUAGE	B. READ	C. WRITE	D. SPEAK	E. UNDERSTAND
Spanish	Excellent	Good	Good	Excellent

16. LIST PRESENT OR FORMER FOREIGN CONNECTIONS

A. BUSINESS **U.S. Foreign Service from Jan. 26, 1931 to Dec. 1951.**
 B. EMPLOYMENT
 C. MILITARY

17. DATES AND PLACES OF RESIDENCE FOR LAST 10 YEARS

DATES	STREET AND NUMBER	CITY	STATE OR COUNTRY
1941-1944	Ave. del Boque 369	Quintajalera	Mexico
1944-1946	Various	Madrid, Barcelona	Spain
1947-1949	1 ^o Calle y 2 ^o Avenida	Guatemala City	Guatemala
1949-1951	Ave. Aguirre 52	San Isidro (Buenos Aires)	Argentina
1951 (Dec)			California

18. DOES YOUR FINANCIAL POSITION PERMIT DISCHARGE OF ALL DEBTS INCURRED? YES NO
 IF "NO," STATE INFORMATION REQUESTED BELOW:

NAMES OF CREDITORS	AMOUNTS DUE	DATES ON WHICH OBLIGATIONS WERE CONTRACTED
None		

19. HAVE YOU EVER BEEN MEDICALLY DISCHARGED FROM THE ARMED SERVICE? YES NO
 IF "YES," GIVE DETAILS IN ITEM 39 OF FORM 57.

20. PRESENT MILITARY STATUS

A. ARE YOU REGISTERED WITH A SELECTIVE SERVICE BOARD? YES NO IF "YES," STATE BELOW THE NUMBER AND ADDRESS OF THE BOARD, AND YOUR CLASSIFICATION:

B. DO YOU HAVE A MILITARY RESERVE STATUS? YES NO IF "YES," STATE BELOW, THE BRANCH OF SERVICE, YOUR SERIAL NUMBER, YOUR ORDER NUMBER, UNIT AND HEADQUARTERS.

21. LIST OTHER NAMES, IF ANY, BY WHICH YOU HAVE BEEN KNOWN INCLUDING MARRIED NAMES, IF MARRIED MORE THAN ONCE, GIVING DATE DURING WHICH NAMES WERE USED. DO NOT DUPLICATE INFORMATION SUPPLIED IN ITEM 16 ON FORM 57.

None

22. HAVE YOU EVER BEEN IN THE CIVIL SERVICE RETIREMENT SYSTEM? YES NO
 Subject to C.S. Retirement Act

23. SOCIAL SECURITY NUMBER, IF ANY: _____

24. If you believe the information you have supplied on this application does not fully show your qualifications for Foreign Service Employment, state in Item 39 of Form 57 or on a separate sheet, any additional appropriate data that you wish to have considered.

DATE: **March 10, 1952** 51544795

Jan Arthur NOEL
511, Alban Towers,
3700 Mass. Ave., N.W.
Washington, D.C.

Birth: March 19, 1911.

Application for Federal Employment

<u>Date of Employment</u>	<u>Exact Title of Position</u>	<u>Salary</u>
Jan. 1931 to Oct. 1938	Vice Consul	Starting: \$1,800. p.a. Final 2,000. p.a.

<u>Place of Employment</u>	<u>Name of Immediate Supervisor</u>
Ensenada, Mexico	Wm. A. Smaile, Consul

<u>Name and Address of Employer</u>	<u>Reason for Leaving</u>
State Department, Foreign Service	transfer to Mazatlan

Number and kind of employees supervised
Two consular clerks

Description of Work
General consular work including shipping services, visas, passports, welfare and protection, agricultural reporting, drafting of replies to trade inquiries.

Jan. ...thur NOEL

5 DATES OF EMPLOYMENT (month, year) FROM Oct. 1938 TO Aug. 1944		EXACT TITLE OF YOUR POSITION Vice Consul		CLASSIFICATION (if in Force) ()		SALARY OR EARNING STARTING \$ 2,250 PER MONTH FINAL 3,000 PER MONTH																					
PLACE OF EMPLOYMENT (city and State) (MEXICO) Manatlan and Guadalajara				NAME AND TITLE OF IMMEDIATE SUPERVISOR Rufus H. Lane, Jr. and Maurice L. Stafford, Consuls																							
NAME AND ADDRESS OF EMPLOYER (Spec. organization, or person; if Federal, name department, bureau or establishment, and division) State Department, Foreign Service				NAME OF BUSINESS OR ORGANIZATION (e.g., wholesale mfr., mfg. company, manufacture of locks, etc.) government																							
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU 2 cons. clerks				REASON FOR LEAVING transfer to Bilbao																							
DESCRIPTION OF YOUR WORK consular officer in charge of all immigration work at these two consulates, as well as shipping, notarial services, passport and citizenship work, welfare and protection activities, also engaged in economic and political reporting at these posts. In charge of both consulates for prolonged periods during absence of principal officer.																											
If more space is required, use a continuation sheet (Standard Form No. 28) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.																											
17. MILITARY TRAINING. In the space below, describe any training received in the Armed Services (not already listed under item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service which you attended is especially important. (Extra page may be used to give full descriptions.)																											
DATES FROM TO		LOCATION		DESCRIPTION OF TRAINING																							
				NONE																							
18. EDUCATION (Circle highest grade completed): 1 2 3 4 5 6 7 8 9 10 11 12																											
MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION IN: <input type="checkbox"/> ELEMENTARY SCHOOL <input type="checkbox"/> JUNIOR HIGH SCHOOL <input checked="" type="checkbox"/> SENIOR HIGH SCHOOL				(A) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED San Diego Senior High School, San Diego, Calif.																							
(C) NAME AND LOCATION OF COLLEGE OR UNIVERSITY NONE				(B) SUBJECTS STUDIED IN HIGH SCHOOL WHICH APPLY TO POSITION DESIRED History, Economics, commercial law, Spanish																							
(D) LIST YOUR CHIEF UNDERGRADUATE COLLEGE SUBJECTS NONE		(E) LIST YOUR CHIEF GRADUATE COLLEGE SUBJECTS NONE		<table border="1"> <thead> <tr> <th colspan="2">DATE ATTENDED</th> <th colspan="2">YEARS COMPLETED</th> <th colspan="2">DEGREES CONFERRED</th> <th rowspan="2">SEMESTER HOURS CREDIT</th> </tr> <tr> <th>FROM</th> <th>TO</th> <th>DAY</th> <th>NIGHT</th> <th>TITLE</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				DATE ATTENDED		YEARS COMPLETED		DEGREES CONFERRED		SEMESTER HOURS CREDIT	FROM	TO	DAY	NIGHT	TITLE	DATE							
DATE ATTENDED		YEARS COMPLETED		DEGREES CONFERRED		SEMESTER HOURS CREDIT																					
FROM	TO	DAY	NIGHT	TITLE	DATE																						
(F) OTHER TRAINING (SUCH AS VOCATIONAL, BUSINESS, STUDY COURSES GIVEN THROUGH THE ARMED FORCES INSTITUTE (SHOW NAME AND LOCATION OF SCHOOL) OR IN SERVICE TRAINING IN PUBLIC OR PRIVATE EMPLOYMENT) NONE				<table border="1"> <thead> <tr> <th rowspan="2">SUBJECTS STUDIED</th> <th colspan="2">DATE ATTENDED</th> <th colspan="2">YEARS COMPLETED</th> </tr> <tr> <th>FROM</th> <th>TO</th> <th>DAY</th> <th>NIGHT</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				SUBJECTS STUDIED	DATE ATTENDED		YEARS COMPLETED		FROM	TO	DAY	NIGHT											
SUBJECTS STUDIED	DATE ATTENDED		YEARS COMPLETED																								
	FROM	TO	DAY	NIGHT																							
19. INDICATE YOUR KNOWLEDGE OF FOREIGN LANGUAGES				22. DO YOU NOW OR HAVE YOU EVER HELD A LICENSE OR CERTIFICATE IN ANY TRADE OR PROFESSION (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (GIVE KIND OF LICENSE AND STATE, FIRST LICENSE OR CERTIFICATE (YEAR))																							
Spanish		<table border="1"> <tr> <td>READING</td> <td>SPEAKING</td> </tr> <tr> <td>EXC. (GOOD)</td> <td>EXC. (GOOD)</td> </tr> </table>		READING	SPEAKING	EXC. (GOOD)	EXC. (GOOD)	<table border="1"> <tr> <td>UNDERSTAND</td> <td>WRITE</td> </tr> <tr> <td>EXC. (GOOD)</td> <td>EXC. (GOOD)</td> </tr> </table>				UNDERSTAND	WRITE	EXC. (GOOD)	EXC. (GOOD)												
READING	SPEAKING																										
EXC. (GOOD)	EXC. (GOOD)																										
UNDERSTAND	WRITE																										
EXC. (GOOD)	EXC. (GOOD)																										
20. IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRY, INDICATE (1) NAME OF COUNTRY, (2) DATES AND LENGTH OF TIME SPENT THERE, AND (3) REASON OR PURPOSE (e.g., military service, business, pleasure, etc.)				21. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS (A) SPECIAL ADVISORY EDUCATION (e.g., special training)																							

24 PREFERENCE: List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 16 (EXPERIENCE).

FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (Give complete current address, including street and number)	BUSINESS OR OCCUPATION
1. Gordon B. Dunlap	321 Corona Street, San Antonio, Tex.	Motion Picture Distributor
2. Leo R. Bloha	903 N. Canal, Carlsbad, New Mexico	Retired PSO
3. H. B. Gregory	1700 Shroyer Road, Dayton, 9, Ohio	Official, Nat. Cash Register

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN

YES	NO	INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. HAS ANY OF YOUR PRESENT EMPLOYERS REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY, U.S.P. OR ANY COMMUNIST ORGANIZATION?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

29. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH ADVERTISES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR THE ORGANIZATION, MOVEMENT, GROUP OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE USE OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF STATE, OR TO OBTAIN THE FORM OR GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?

If your answer to question 29, 30, or 31 above is "Yes," state in Item 32 the names of all such organizations, associations, movements, groups, or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein.

30. SINCE YOUR BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR BROUGHT INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR COMMITTED, TRIED, OR IMPRISONED, OR PLACED ON PROBATION, OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)?

If your answer is "Yes," list all such cases under Item 32 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appropriate, your fingerprints will be taken.

31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT, UNSATISFACTORY SERVICE, FROM ANY POSITION?

If your answer is "Yes," give in Item 32 the name and address of employer, date, and reason in each case.

32. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?

If your answer is "Yes," give dates of and reasons for such barment in Item 32.

33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE OR OTHER DISABILITY, WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK?

If your answer is "Yes," give complete details in Item 32 so that consideration can be given to your physical fitness for the job.

34. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?

If your answer is "Yes," give complete details in Item 32.

35. SPECIAL DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply)

Item No. _____ Item No. _____

36. (A) WERE YOU EVER IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING TIME OF WAR? YES NO

(B) IS THE WORD "HONORABLE" OR THE WORD "SATISFACTORY" USED IN YOUR DISCHARGE OR SEPARATION PAPERS TO SHOW THE TYPE OF YOUR DISCHARGE OR SEPARATION? YES NO

(C) WAS SERVICE PERFORMED ON AN ACTIVE FULL TIME BASIS, WITH FULL MILITARY PAY AND ALLOWANCES? YES NO

(D) DATE OF ENTRY OR ENTRIES INTO SERVICE _____ DATE OF SEPARATION OR SEPARATIONS _____

BRANCH OF SERVICE (Army, Navy, Marine Corps, Coast Guard, etc.) _____ SERIAL NO. (if none, give grade or rating at time of separation) _____

38. (A) IF YOU SERVED IN THE UNITED STATES MILITARY OR NAVAL SERVICE DURING PEACETIME ONLY, DID YOU PARTICIPATE IN A CAMPAIGN OR EXPEDITION AND RECEIVE A CAMPAIGN BADGE OR SERVICE RIBBON? YES NO

(B) ARE YOU A DISABLED VETERAN? YES NO

If so, and you have not listed your disability in answer to Item 33, explain in Item 32 below.

(C) ARE YOU A VETERAN'S WIDOW WHO HAS NOT REMARRIED? YES NO

(D) ARE YOU THE WIFE OF A VETERAN WHO HAS A SERVICE CONNECTED DISABILITY WHICH QUALIFIES HIM FOR CIVIL SERVICE ASSIGNMENT? YES NO

THIS SPACE FOR USE OF APPOINTING OFFICER ONLY

The information contained in the answers to Question 37 above has been verified by comparison with the discharge certificate on _____, 19____.

Agency: _____ Title: _____

If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination time. Attach to inside of this application.

Before signing this application check back over it to make sure that you have answered ALL questions correctly. I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80).

SIGNATURE OF APPLICANT _____
(Sign your name in INK (one given name, initial or initials, and surname). If female, prefix Miss or Mrs. and if married, give your own given name as "Mrs. Mary L. Doe.")

FORM DSP-14
9-26-51

DEPARTMENT OF STATE
**APPLICATION FOR FOREIGN SERVICE
AND DEPARTMENTAL EMPLOYMENT**
(Use with Standard Form 57)

If more space is required, use additional sheets of paper. Write on each sheet your name, address and date of birth. Identify each item, and attach to this application.

BUDGET CATEGORY NO. 47-R071.3
APPROXIMATE EXPIRES August 31, 1956

1. a. NAME (Print)
James Arthur NOEL

b. ADDRESS
**511, Alban Towers, 3700 Mass. Ave.,
Washington, D.C.**

2. USE OF APPLICATION - Check one box below to indicate whether you wish this application to be considered for Foreign Service employment only, or for both Foreign Service and Departmental employment. Completion of this form is not required for Department employment only. Standard Form 57 must be filled out in any case.

FOREIGN SERVICE ONLY FOREIGN SERVICE AND DEPARTMENTAL

3. PERMANENT ADDRESS (Place from which you will expect transportation of self and household effects, if any, if appointed to the Foreign Service)

San Diego, California

4. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED? IF A NATURALIZED CITIZEN, GIVE PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE. (Section 11 on Form 57).

Not applicable

5. a. ARE YOU NOW INVOLVED IN ANY LITIGATION OR SEPARATION AGREEMENT? YES NO
b. DO YOU KNOW OF ANY PROSPECTIVE LITIGATION IN WHICH YOU MAY BE INVOLVED? YES NO
(Give details, if answer is yes to a. or b.)

6. WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT FOR OVERSEAS EMPLOYMENT? (Exclusive of allowances) \$ _____ PER YEAR

7. WHAT RESTRICTIONS ARE THERE, IF ANY, ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD?

none

8. a. FULL NAME OF SPOUSE (If wife, give maiden name)
Lillian Bobbett NOEL

b. DATE OF BIRTH
January 12, 1911

c. PLACE OF BIRTH (City, State or Province, and Country)
Colorado Springs, Colo.

9. c. IF BORN OUTSIDE THE UNITED STATES, HOW WAS CITIZENSHIP ACQUIRED?
not applicable

e. IF NATURALIZED, GIVE PLACE, DATE, AND NO. OF NATURALIZATION CERTIFICATE.
not applicable

9. NAMES OF DEPENDENTS	RELATIONSHIP	DATE OF BIRTH	WILL RESIDE WITH YOU OVERSEAS	
			YES	NO
Lillian Bobbett Noel	wife	Jan. 12, 1911	<input checked="" type="checkbox"/>	<input type="checkbox"/>
James A. Noel, Jr.	son	Nov. 3, 1948	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Richard A. Noel	son	April 30, 1951	<input checked="" type="checkbox"/>	<input type="checkbox"/>

10. a. FATHER'S NAME
Alfred E. NOEL

b. PRESENT ADDRESS
**1714 Dale St, San Diego,
Calif.**

c. PLACE OF BIRTH
Plainfield, N.J.

11. a. MOTHER'S NAME (Maiden)
Ethel Louise LEACOCK

b. PRESENT ADDRESS
deceased

c. PLACE OF BIRTH
New York City, N.Y.

12. IF PARENTS BORN OUTSIDE THE UNITED STATES, DID THEY EVER OBTAIN UNITED STATES CITIZENSHIP? (Check below)

FATHER YES **N.A.** NO MOTHER YES **N.A.** NO

13. HAVE YOU EVER APPLIED FOR A POSITION WITH THE DEPARTMENT OF STATE OR TAKEN AN EXAMINATION FOR A POSITION WITH THE DEPARTMENT OF STATE? YES NO
If "Yes" give date, nature of position applied for, and kind of examination taken, if any.

I was employed in the Foreign Service of the State Department from January 26, 1931 to December 1951.

NAME		RELATIONSHIP	ADDRESS	
None				

15. FOREIGN LANGUAGES (Specify item 19 on Form 57)
Name and indicate the extent of your competence, i.e., Excellent, Good, Fair

A. LANGUAGE	S. READ	C. WRITE	D. SPEAK	E. UNDERSTAND
Spanish	Excellent	Good	Good	Excellent

16. LIST PRESENT OR FORMER FOREIGN CONNECTIONS:
 A. BUSINESS
 B. EMPLOYMENT
 C. MILITARY

U.S. Foreign Service from Jan. 26, 1931 to Dec. 1951.

17. DATES AND PLACES OF RESIDENCE FOR LAST 10 YEARS

DATES	STREET AND NUMBER	CITY	STATE OR COUNTRY
1941-1944	Ave. del Bosque 369	Guadalajara	Mexico
1944-1946	Variosa	Bilbao, Madrid, Barcelona	Spain
1947-1949	1° Calle y 2° Avenida	Guatemala City	Guatemala
1949-1951	Ave. Aguirre 52	San Isidro (Buenos Aires)	Argentina
1951 (Dec)			California

18. DOES YOUR FINANCIAL POSITION PERMIT DISCHARGE OF ALL DEBTS INCURRED? YES NO
 IF "NO," STATE INFORMATION REQUESTED BELOW:

NAMES OF CREDITORS	AMOUNTS DUE	DATES ON WHICH OBLIGATIONS WERE CONTRACTED
None		

19. HAVE YOU EVER BEEN MEDICALLY DISCHARGED FROM THE ARMED SERVICE? YES NO
 IF "YES," GIVE DETAILS IN ITEM 39 OF FORM 57.

20. PRESENT MILITARY STATUS

A. ARE YOU REGISTERED WITH A SELECTIVE SERVICE BOARD? YES NO IF "YES," STATE BELOW THE NUMBER AND ADDRESS OF THE BOARD, AND YOUR CLASSIFICATION:

B. DO YOU HAVE A MILITARY RESERVE STATUS? YES NO IF "YES," STATE BELOW, THE BRANCH OF SERVICE; YOUR SERVICE NUMBER; YOUR ORGANIZATION UNIT AND HEADQUARTERS.

21. LIST OTHER NAMES, IF ANY, BY WHICH YOU HAVE BEEN KNOWN INCLUDING MARRIED NAMES, IF MARRIED MORE THAN ONCE, GIVING DATE DURING WHICH NAMES WERE USED. DO NOT DUPLICATE INFORMATION SUPPLIED IN ITEM 16 ON FORM 57.

None

22. HAVE YOU EVER BEEN UNDER THE CIVIL SERVICE RETIREMENT SYSTEM? YES NO
Subject to C.S. Retirement Act

23. SOCIAL SECURITY NUMBER, IF ANY:

24. If you believe the information you have supplied on this application does not fully show your qualifications for Foreign Service Employment, state in Item 39 of Form 57 or on a separate sheet, any additional appropriate data that you wish to have considered.

DATE: **March 10, 1952** SIGNATURE: *[Signature]*

SECRET

SECURITY INFORMATION

4 June 1952

MEMORANDUM FOR: Chief, Liaison Control, OSO

SUBJECT : James A. NOEL

2. This Division has now been informed that the medical staff of CIA will not approve an overseas assignment for Mr. Noel until 1 August 1952. At that time Mr. NOEL will undergo another physical examination and if results are satisfactory he will be certified as fit for overseas duty.

3. In order to avoid cancellation of Mr. NOEL's appointment, it is requested that the Department of State be asked not to call Mr. NOEL to enter on duty until advised by OSO that he is certified for overseas duty and ready to proceed to his Caracas assignment, subject to State's concurrence. It is anticipated that this will occur about 1 August 1952, or shortly thereafter.

J. C. King
for J. C. King
Chief, Western Hemisphere

State Dept informed 10 June 52 by Walt

SECRET

Central Intelligence Agency
2430 E Street, N. W.
Washington, D. C.

Date 14 August 1953

Gentlemen:

1. In accordance with the policy of this agency, it is understood and agreed by me that I shall be required to serve a minimum term of two years from the date of my arrival at my overseas post of duty, unless terminated by the Government for its convenience. If the assignment is terminated at my request in less than twenty-four months, the following shall prevail:

(a) If I resign in less than twelve months from the date of my arrival at my overseas post of duty, I shall reimburse CIA for all travel expenses involved in the transportation of myself, my immediate family, household goods, and personal effects and automobile to the foreign station, and pay all such expenses for return to the United States.

(b) If I resign between the twelfth and twenty-fourth month from the date of my arrival at my overseas post of duty, I shall pay all expenses for the travel and transportation of myself, my immediate family, household goods, and personal effects and automobile to the United States.

2. Part (a) above shall not apply to employees who have served in a operational position with CIA or who have served an overseas tour of duty with CIA, and in such case part (b) only shall apply, amended to read: "If I desire to terminate or return to the United States prior to the expiration of two years from the date of my arrival at my overseas post of duty, I shall reimburse CIA for the travel and transportation of myself, my immediate family, household goods, and personal effects to the United States."

[Handwritten Signature]

Witness:

APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS—Answer every question below fully and completely. If you write or print in INK. Do not use correction fluid or white-out. Use the Civil Service examination card the appropriate examination carefully and file it in three parts. Mail this application to the office named in the advertisement. Be sure to call to the same office any other forms required by the advertisement. Notify the office with which you file this application of any change in your address.

1. Name of examination, or kind of position applied for
Chief of Station

2. Position subject (if mentioned in examination announcement)

3. Place of employment applied for
Barcelona, Spain

4. Name (First name) (M. I. or (Maiden, if any) (Last)
James Arthur NOEL

5. Street and number or R. D. number

City or post office (including postal zone), and State

6. Legal or voting residence (State) 7. Office phone No. Home phone
California

8. Place of birth (city and State; if born outside U. S., name city and country)
New York, New York

9. Date of birth (month, day, year) 10. Age last birthday 11. Male Female
March 19, 1913 35

12. Married Single 13. Height without shoes: **6** feet **0** inches Weight: **185** pounds

14. Have you ever been employed by the Federal Government? Yes No
If now employed by the Federal Government, give present grade and date of last change in grade.
CAF-12, July 1, 1945.

DO NOT WRITE IN THIS BLOCK
For Use of Civil Service Commission Only

Accepted Material Entered register
 Rejected Submitted Returned

Initials: _____ App. Review: _____

Approved: _____

CYCLE	GRADE	EARNED RATING	PREFER-ENCE	AUGM. RATING
			<input type="checkbox"/> 5 points (incl.)	
			<input type="checkbox"/> 10 points	
			<input type="checkbox"/> Wife or Widow	
			<input type="checkbox"/> Dead	
			<input checked="" type="checkbox"/> Being investigated	

INITIALS AND DATE

14. Would you accept short-term appointment, if offered—

Answer "Yes" or "No" answer by placing X in proper column	YES	NO
1 to 3 months?		<input checked="" type="checkbox"/>
3 to 6 months?		<input checked="" type="checkbox"/>
6 to 12 months?		<input checked="" type="checkbox"/>

15. Would you accept appointment, if offered—

Answer "Yes" or "No" answer by placing X in proper column	YES	NO
in Washington, D. C.?	<input checked="" type="checkbox"/>	
anywhere in the United States?	<input checked="" type="checkbox"/>	
outside the United States?	<input checked="" type="checkbox"/>	

16. (a) If you will accept appointment in certain locations ONLY, give acceptable locations

(d) What is the lowest minimum salary you will accept? **\$5,905.20** per year.
You will not be considered for positions paying less.

(e) If you are willing to travel, specify:
 Occasionally Frequently Constantly

16. EXPERIENCE—You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing authority to determine your qualifications for the position for which you are applying. In the spaces provided below describe EVERY position you have held. Use a separate block for EACH position. You may also include any pertinent job title, grade, position or organization with which you have been associated and work done, accounting for all parts of unemployment. Explain clearly the principal tasks which you performed in each position. Describe your experience in the Armed Services in question 17 (Military Experience).
17. If you were ever employed in any position under a name different from that shown in item 4 of this application, give under "Description of your work" for each position, the name used.
18. If you were ever employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

PRESENT POSITION

Date of employment (Month, year) From **August, 1944** To present time

Place of employment (city and State): **Barcelona, Spain**

Organization (name, organization, or person): **SSU, FBI**

Kind of business or occupation (e.g., wholesale store, insurance company, etc.):

Number and kind of employees supervised by you: **2 clerical; 12 outside agents**

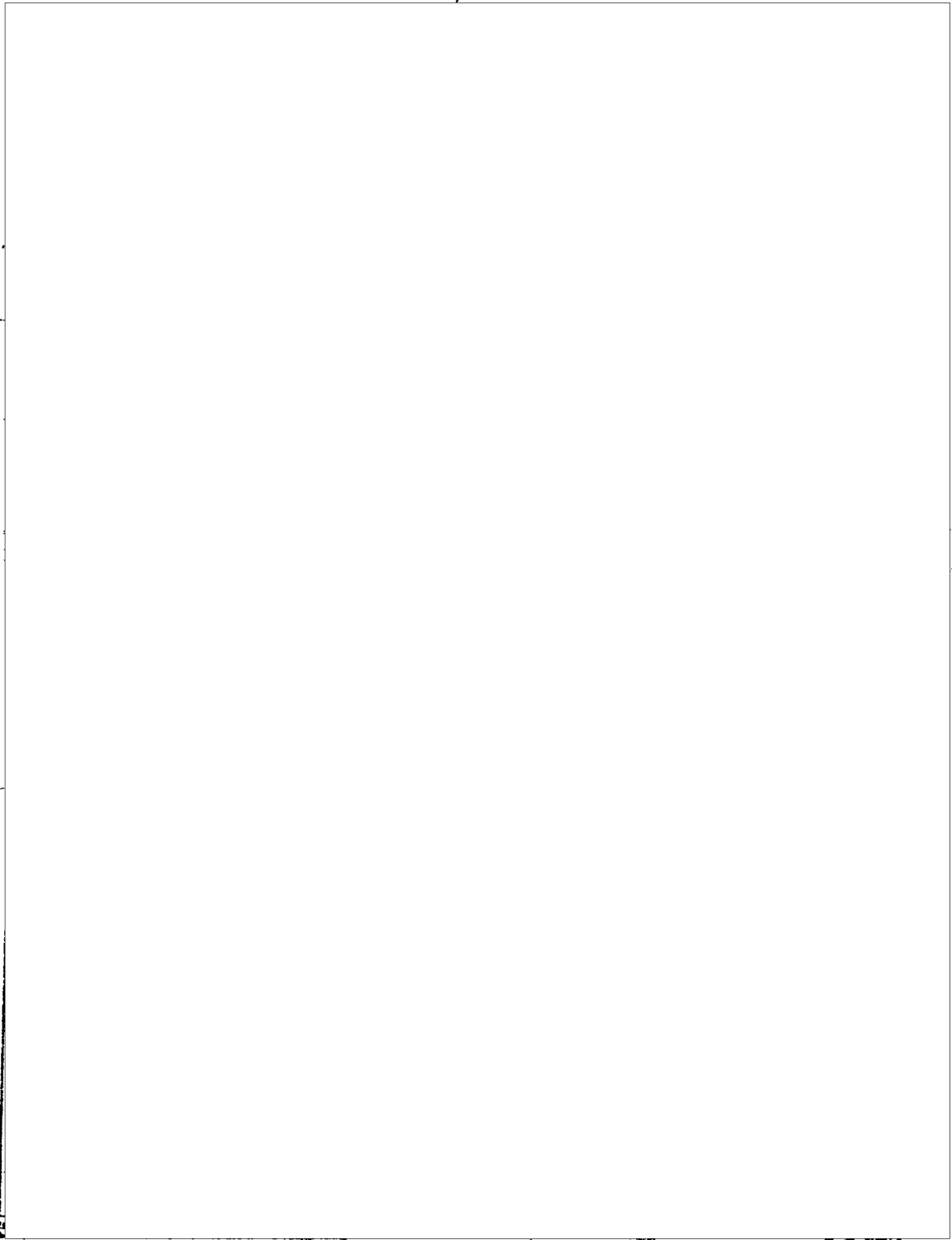
Name and title of immediate supervisor: **Acting Chief of**

Position in connection with employment: **Liquidation of SSU**

Salary or earnings, WITH OVERTIME: Starting **\$4,680** per year. Present **\$5,905** per year.

Description of your work: **Chief of Station at Barcelona. Direction of intelligence chains, evaluation of material and preparation of intelligence reports. Preparation of political reports on behalf of Consulate General, Barcelona, and military reports on behalf of Military Attache, [redacted]**

(CONTINUED ON NEXT PAGE)



17. MILITARY EXPERIENCE - In order to assist in the placement of your experience, detailed information should be given about the training and experience they have received in the Armed Forces. For each service school you have attended, list the name of the school, the location, the dates of attendance, and the type of training received. In the event you attended a service school, indicate in item (c) all important changes in duty assignment, showing dates of such assignments.

(a) First Special Service School attended:

Location: _____

Dates attended (months, years): _____

From: _____ To: _____

Rating received at end of this training: _____

(c) Duty assignment or rating after this training (give all important changes in duty assignment whether or not you attended a Service School): _____

(b) What were you taught in First Special Service School?

(a) Second Special Service School attended:

Location: _____

Dates attended (months, years): _____

From: _____ To: _____

Rating received at end of this training: _____

(c) Duty assignment after this training: _____

(b) What were you taught in Second Special Service School?

List on a separate sheet of paper a 7-8 educational experience, training, service, or special duty assignments during military service or hospitalization.

18. EDUCATION - Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Mark (X) the appropriate level in brackets and indicate completion of:

Elementary School Junior High School Senior High School

(a) State and location of College or University: _____

(b) State and location of last high school attended: **San Diego Sr. High School, San Diego, Calif.**

(c) Subjects studied in high school which apply to position desired: **Business courses with emphasis on office management.**

Date Attended	Years Completed		Degrees Conferred		Semester Hours Credit
	From	To	Title	Date	

Date Attended	Years Completed		Semester Hours
	From	To	

Subjects Studied	Dates Attended		Years Completed	
	From	To	Day	Night

(a) Give all training such as vocational, technical, duty course given through the Armed Forces (show name and location of school, or "in service training") in a Federal Agency:

Special training in intelligence work at OSS. Sixteen years of government foreign service.

19. Indicate your knowledge of foreign languages:

Language	Reading		Speaking		Understanding	
	Ext	Good	Ext	Good	Ext	Good
Spanish	X		X		X	

(a) How was your knowledge of these languages acquired?

Sixteen years of residence in Spanish speaking countries.

(b) If you have traveled or resided in any foreign countries indicate name of country, (c) name and length of time spent there and (d) country of origin as of previous voluntary registration:

Mexico, 1931-44; Spain 1944-46; Gov't

20. Give any special qualifications not covered elsewhere in your application such as:

(a) your patents or inventions (do NOT submit copies unless requested)

(b) public speaking and public relations experience

(c) membership in professional or scientific societies, etc.

21. Are you now or have you ever been a member in certified membership in any trade or profession (such as pilot, electrician, radio operator, teacher, etc.)?

Yes No Give kind of license and State:

Final license or certificate (year): _____

22. Give any special qualifications not covered elsewhere in your application such as:

(a) your patents or inventions (do NOT submit copies unless requested)

(b) public speaking and public relations experience

(c) membership in professional or scientific societies, etc.

Approximate number of words per minute in typing: **60**, shorthand: _____

23. REFERENCES - List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and know by the position for which you are applying. Do not repeat names of supervisors listed under Item 16. LIST NAME

FULL NAME	BUSINESS OR HOME ADDRESS (Give complete address, including street and number)	BUSINESS OR OCCUPATION

24. May inquiry be made of your present employer regarding your character, qualifications, etc? Yes No

Indicate "Yes" or "No" answer by placing X in proper column

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

25. Are you a citizen of the United States? YES NO

26. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence?
If your answer is "Yes," give complete details in Item 28.

27. Within the past 12 months, have you habitually used intoxicating liquors to excess?
 YES NO

Indicate "Yes" or "No" answer by placing X in proper column

YES	NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>

28. Have you any physical defect or disability whatsoever? If your answer is "Yes" give complete details in Item 29.

29. (a) Were you ever in the United States Military or Naval Service during time of War?
 YES NO

(b) Is the word "honorable" or the word "satisfactory" used in your discharge or separation papers to show the type of your discharge or separation?
 YES NO

(c) Was service performed on an active full-time basis with full pay and allowances?
 YES NO

28. Since your 16th birthday, have you ever been arrested, or fined, or imprisoned, or placed on probation, or have you ever been ordered to deposit bail, or the violation of any law, police regulation or ordinance (including minor traffic violations) for which a fine of \$25 or more was imposed?
If your answer is "Yes," list all such cases under Item 29 below. Give in each case: (1) the date; (2) the nature of the offense or violation; (3) the name and position of the court, judge, justice, or other official; (4) the name and position of the person who imposed the fine, or other disposition of the case; (5) the amount of the fine, or other disposition; (6) the name of the person who imposed the fine, or other disposition.

30. Have you ever been discharged or forced to resign by an employer, or unsatisfactory service from any position?
If your answer is "Yes," give in Item 31 the name and address of employer, date, and reason in each case.

31. Do you receive an annuity from the U. S. or D. C. Government under any retirement act or any pension or other accumulation for military or naval service?
If your answer is "Yes," give in Item 32 the name of the retirement act, and under what retirement act, and rating if retired from military or naval service.

32. Are you an official or employee of any State, Territory, county, or municipality?
If your answer is "Yes," give details in Item 33.

33. Does the U. S. Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 6 months?
If your answer is "Yes," show in Item 34 the name, address, relationship (full name), (2) present address, (3) relationship, (4) department or agency by whom employed, and (5) kind of appointment.

34. Have you ever had a nervous breakdown?
If your answer is "Yes," give complete details in Item 35.

35. Have you ever had tuberculosis?
If your answer is "Yes," give complete details in Item 36.

29. Give in each case: (1) the date; (2) the nature of the offense or violation; (3) the name and position of the court, judge, justice, or other official; (4) the name and position of the person who imposed the fine, or other disposition of the case; (5) the amount of the fine, or other disposition; (6) the name of the person who imposed the fine, or other disposition.

36. IF YOUR ANSWER TO THIS QUESTION (No. 28) INDICATE THAT YOU ARE ENTITLED TO VETERAN PREFERENCE, SUCH PREFERENCE WILL BE CARRIED IN THE EXAMINATION IF APPOINTED, YOU WILL BE REQUIRED TO FURNISH TO THE APPOINTING OFFICER, PRIOR TO ENTRY ON DUTY, OFFICIAL EVIDENCE OF SEPARATION FROM YOUR LATEST PERIOD OF ACTIVE SERVICE IN THE ARMED FORCES OF THE UNITED STATES DURING TIME OF WAR. DO NOT SUBMIT PROOF OF DISCHARGE OR SEPARATION WITH THIS APPLICATION.

30. Have you ever been discharged or forced to resign by an employer, or unsatisfactory service from any position?
If your answer is "Yes," give in Item 31 the name and address of employer, date, and reason in each case.

31. Do you receive an annuity from the U. S. or D. C. Government under any retirement act or any pension or other accumulation for military or naval service?
If your answer is "Yes," give in Item 32 the name of the retirement act, and under what retirement act, and rating if retired from military or naval service.

32. Are you an official or employee of any State, Territory, county, or municipality?
If your answer is "Yes," give details in Item 33.

33. Does the U. S. Government employ in a civilian capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 6 months?
If your answer is "Yes," show in Item 34 the name, address, relationship (full name), (2) present address, (3) relationship, (4) department or agency by whom employed, and (5) kind of appointment.

34. Have you ever had a nervous breakdown?
If your answer is "Yes," give complete details in Item 35.

35. Have you ever had tuberculosis?
If your answer is "Yes," give complete details in Item 36.

Indicate "Yes" or "No" answer by placing X in proper column

YES	NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>

37. (a) If you served in the U. S. Military or Naval Service during the Japanese War, did you participate in a campaign or expedition and receive a campaign badge or service ribbon?
 YES NO

(b) Are you a disabled veteran?
 YES NO

(c) Are you the unmarried widow of a veteran?
 YES NO

(d) Are you the wife of a veteran who has service-connected disability?
 YES NO

IF YOUR ANSWER TO QUESTION 37 (a), (b), (c) OR (d) IS "YES," AND YOU WISH TO CLAIM VETERAN PREFERENCE, ATTACH TO THIS APPLICATION VETERAN PREFERENCE CLAIM (FORM SERVICE CLAIM) FOR FORM 14 TOGETHER WITH THE NECESSARY PROOF SPECIFIED THEREIN.

THIS SPACE FOR USE OF APPOINTING OFFICE ONLY

The information contained in the answers to Question 25 above has been verified by comparison with the discharge certificate on _____ 19____.

Agency: _____ Title: _____

38. Space for detailed answers to other questions (Indicate item numbers by which answers apply)

ITEM No.	ANSWER
36	I do not know if service with OSS in a civilian capacity abroad is considered "military service." However, since an "honorably served" certificate was issued to me, and since the org. was under the Joint Chiefs of Staff, reference to the service is being included for whatever it may be worth.

If more space is required use paper the same size as this page. Write on each sheet your name, address, date of birth, and occupation title. Attach to inside of this application.

FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW (U. S. CODE TITLE 18, SECTION 1001).

I certify that the statements made by me in this application are true, correct, and correct to the best of my knowledge and belief, and are made in good faith.

Date: 3 Oct. 1946

Signature of applicant: Mary L. Lee
(Sign your name in INK (last, first, middle, and surname) If female print Miss or Mrs. and if married use your own name (e.g., Mrs. Mary L. Lee))

PERSONAL HISTORY STATEMENT

INSTRUCTIONS: ANSWER ALL QUESTIONS COMPLETELY. IF QUESTION DOES NOT APPLY WRITE "NOT APPLICABLE". WRITE "UNKNOWN" ONLY IF YOU DO NOT KNOW THE ANSWER AND CANNOT OBTAIN THE ANSWER FROM PERSONAL RECORDS. USE A SEPARATE SHEET OF PAPER FOR EXTRA DETAILS ON ANY QUESTION OR QUESTIONS FOR WHICH YOU DO NOT HAVE SUFFICIENT ROOM. ATTACH TWO RECENT PASSPORT SIZE PICTURES TO THIS FORM. DATE TAKEN WRITTEN ON THE BACK OF EACH. TYPE, PRINT OR WRITE CAREFULLY; ILLEGIBLE OR INCOMPLETE FORMS WILL NOT RECEIVE CONSIDERATION.

HAVE YOU READ AND UNDERSTOOD THE ABOVE INSTRUCTIONS? YES NO

SECTION 1. PERSONAL BACKGROUND

NAME: MR. MISS MRS. FIRST: James MIDDLE: Arthur LAST: NOEL TELEPHONE: 95-37

PRESENT ADDRESS: STREET AND NUMBER: Chalet Sylvia, 2a Av. y la. Calle de Santa Clara, Guatemala CITY: Guatemala STATE: Guate. COUNTRY: Guate.

LEGAL RESIDENCE: STREET AND NUMBER: 4389 McClintock Street, CITY: San Diego, STATE: California, COUNTRY: U.S.A.

NICKNAMES: Jim, Jaime OTHER NAMES THAT YOU HAVE USED: none

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? HOW LONG? none

IF LEGAL CHANGE, GIVE PARTICULARS (WHERE, WHEN AND BY WHAT AUTHORITY) none

DATE OF BIRTH: Mar. 19, 1911 PLACE OF BIRTH: New York City, CITY: New York, STATE: New York, COUNTRY: U.S.A.

PRESENT CITIZENSHIP: US ACQUIRED BY: BIRTH MARRIAGE NATURALIZATION

NATURALIZATION CERTIFICATE: NUMBER: --- DATE ISSUED: --- NAME OF COURT: ---

LOCATION OF COURT: CITY: --- STATE: ---

PREVIOUS CITIZENSHIP: none DATE HELD: FROM: --- TO: ---

OTHER CITIZENSHIPS (GIVE PARTICULARS): none

STEPS TAKEN TO CHANGE PRESENT NATIONALITY (GIVE PARTICULARS): none

LAST U.S. PASSPORT: NUMBER: Diplomatic 261 DATE: 25 Mar. 1947 PLACE OF ISSUE: Washington, D.C.

ALL OTHER U.S. PASSPORTS YOU HAVE HAD (GIVE APPROXIMATE DATES): Spec. Pass. 32694, 4/10/43, Wash; plus 4 other Spec. Passports issued

PASSPORTS OF OTHER NATIONS: none (between Jan. 1931 and October 1943).

IF BORN OUTSIDE U.S.: DATE OF ARRIVAL IN THIS COUNTRY: --- PORT OF ENTRY: --- PASSPORT OF COUNTRY: ---

LAST U.S. VISA: NUMBER: --- TYPE: --- DATE: --- PLACE OF ISSUE: ---

SECTION 2. PHYSICAL DESCRIPTION

AGE: 36 SEX: Male HEIGHT: 6' 0" WEIGHT: 185 Lbs. EYES: Dk. Brown HAIR: Dk. Brown

COMPLEXION: Ruddy SCARS: two scars on neck BUILD: heavy

OTHER DISTINGUISHING FEATURES: none



SECTION 3. MARITAL STATUS						
MARRIED <input checked="" type="checkbox"/>	WIDOWED <input type="checkbox"/>	SEPARATED <input type="checkbox"/>	DATE OF SEPARATION OR DIVORCE	PLACE	---	
SINGLE <input type="checkbox"/>	DIVORCED <input type="checkbox"/>				---	
REASON FOR SEPARATION OR DIVORCE						
NOTE: IF YOU HAVE BEEN MARRIED MORE THAN ONCE USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND AND GIVE DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.						
NAME OF WIFE OR HUSBAND	FIRST	MIDDLE (FOR WIFE, MAIDEN)	LAST	DATE OF MARRIAGE		
	Lillian	Bobbett	Noel	29 September 1934		
PLACE OF MARRIAGE	(HIS OR HER ADDRESS BEFORE MARRIAGE)	STREET AND NUMBER	CITY	STATE	COUNTRY	
San Diego, California		3614 Fairmount Ave.,	San Diego,	Calif.		
LIVING <input checked="" type="checkbox"/>	DATE OF DECEASE	CAUSE				
DECEASED <input type="checkbox"/>						
PRESENT OR LAST ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY		
	Chalet Sylvia, 2a. Av. y la. Calle de Sta. Clara,	Guatemala City				
DATE OF BIRTH	PLACE OF BIRTH	CITY	STATE	COUNTRY		
12 January 1911	Colorado Springs,	Colorado,		U.S.A.		
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY	
U.S.	birth					
OCCUPATION	LAST EMPLOYER					
housewife	San Diego Board of Education					
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY		
	Board of Education,	San Diego,	California,	U.S.A.		
DATE OF MILITARY SERVICE	FROM:	TO:	BRANCH OF SERVICE	COUNTRY		
	none					
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)						
U.S. Consulate, Ensenada, Baja California, Mexico, from 1934 to 1937.						
SECTION 4. CHILDREN OR DEPENDENTS (INCLUDE PARTIAL DEPENDENTS)						
NAME	RELATIONSHIP			AGE		
none						
CITIZENSHIP	ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY	
NAME	RELATIONSHIP			AGE		
CITIZENSHIP	ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY	
NAME	RELATIONSHIP			AGE		
CITIZENSHIP	ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY	
SECTION 5. PARENTS						
NOTE: FOR STEPFATHER, STEPMOTHER AND/OR GUARDIAN, GIVE THE SAME INFORMATION AS REQUIRED BELOW ON SEPARATE SHEET						
NAME OF FATHER	FIRST	MIDDLE	LAST	LIVING <input checked="" type="checkbox"/>	DECEASED <input type="checkbox"/>	
	Alfred	Edwin	Noel			
DATE OF DECEASE	CAUSE					
PRESENT OR LAST ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY		
	1714 Dale Street	San Diego, 5,	California,	U.S.A.		
DATE OF BIRTH	PLACE OF BIRTH	CITY	STATE	COUNTRY		
2 May 1886	Plainfield,	New Jersey,		U.S.A.		
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY	STATE	COUNTRY	
U.S.	birth					
OCCUPATION	LAST EMPLOYER					
Supervisor	Curtis Publishing Company					
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER	CITY	STATE	COUNTRY		
		San Diego, 5,	California,	U.S.A.		
SECTION 5. PARENTS (CONTINUED) I understand my father is, or is about to be, re-married, but I have no information concerning his prospective stepmother.						

SECTION 5. PARENTS (CONTINUED PAGE 2)						
DATE OF MILITARY SERVICE	FROM: none	TO: ---	BRANCH OR SERVICE	---	COUNTRY	
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS) none						
NAME OF MOTHER	FIRST Ethel	MAIDEN Leacock	LAST Noel			LIVING <input type="checkbox"/> DECEASED <input checked="" type="checkbox"/>
DATE OF DECEASE	21 Feb. 1943	CAUSE Bright's disease				
PRESENT OR LAST ADDRESS	1714 Dale Street,		San Diego, 5,	California,	U.S.A.	
DATE OF BIRTH	10 March 1888	PLACE OF BIRTH	New York City,	New York,	U.S.A.	
CITIZENSHIP	U.S.	DATE ACQUIRED	birth	WHERE ACQUIRED	CITY	STATE
OCCUPATION	housewife					
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER CITY STATE COUNTRY					
GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS) none						
SECTION 6. BROTHERS AND SISTERS (INCLUDING HALF-STEP- AND ADOPTED BROTHERS AND SISTERS)						
NAME	FIRST Edward	MIDDLE Charles	LAST Noel			
PRESENT ADDRESS	815 South Lake St.,		Los Angeles, 5,	California,	U.S.A.	
NAME	FIRST George	MIDDLE Thomas	LAST Noel			
PRESENT ADDRESS	Laguna Beach,		California,	U.S.A.		
NAME	FIRST William	MIDDLE Alfred	LAST Noel			
PRESENT ADDRESS	1714 Dale Street,		San Diego, 5,	California,	U.S.A.	
SECTION 7. PARENTS-IN-LAW						
NAME OF FATHER-IN-LAW	FIRST Albert	MIDDLE none	LAST Bobbett			LIVING <input checked="" type="checkbox"/> DECEASED <input type="checkbox"/>
DATE OF DECEASE	CAUSE					
PRESENT OR LAST ADDRESS	4389 McClintock Street,		San Diego,	California,	U.S.A.	
DATE OF BIRTH	Feb. 2, 1886	PLACE OF BIRTH	Wells,	Somerset	England	
CITIZENSHIP	U.S.	DATE ACQUIRED	13/1/23 naturalization	WHERE ACQUIRED	Colorado Springs,	Colorado
OCCUPATION	retired merchant		LAST EMPLOYER self			
NAME OF MOTHER-IN-LAW	FIRST Thala	MAIDEN Clausen	LAST Bobbett			LIVING <input checked="" type="checkbox"/> DECEASED <input type="checkbox"/>
DATE OF DECEASE	CAUSE					
PRESENT OR LAST ADDRESS	4389 McClintock Street,		San Diego, 5,	California,	U.S.A.	
DATE OF BIRTH	July 10, 1881	PLACE OF BIRTH	Neksø	Bornholm	Denmark	
CITIZENSHIP	U.S.	DATE ACQUIRED	22 June 1928	WHERE ACQUIRED	San Diego,	California
OCCUPATION	housewife		LAST EMPLOYER			

SECTION 5. PARENTS (CONTINUED PAGE 2)			
DATE OF MILITARY SERVICE	FROM: none	TO: ---	BRANCH OR SERVICE: ---
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS) none			
NAME OF MOTHER	FIRST Ethel	MIDDLE Leacock	LAST Noel
LIVING <input type="checkbox"/> DECEASED <input checked="" type="checkbox"/>			
DATE OF DECEASE	CAUSE		
21 Feb, 1943	Bright's disease		
PRESENT OR LAST ADDRESS	STREET AND NUMBER	CITY	STATE COUNTRY
	1714 Dale Street,	San Diego, 5,	California, U.S.A.
DATE OF BIRTH	PLACE OF BIRTH	CITY	STATE COUNTRY
10 March 1888	New York City,	New York,	U.S.A.
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY STATE COUNTRY
U.S.	birth	---	---
OCCUPATION	LAST EMPLOYER		
housewife	-----		
EMPLOYER'S OR OWN BUSINESS ADDRESS	STREET AND NUMBER	CITY	STATE COUNTRY
GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS) none			
SECTION 6. BROTHERS AND SISTERS (INCLUDING HALF-STEP- AND ADOPTED BROTHERS AND SISTERS)			
NAME	FIRST	MIDDLE	LAST
	Edward	Charles	Noel
PRESENT ADDRESS	STREET AND NUMBER	CITY	STATE COUNTRY
	815 South Lake St.,	Los Angeles, 5,	California.
NAME	FIRST	MIDDLE	LAST
	Thomas		Noel

ADD - Section 6. (Brothers and Sisters)

<u>Name</u>	<u>First</u>	<u>Middle</u>	<u>Last</u>
	Robert	Joseph	Noel
<u>Present Address</u>	<u>Street</u>	<u>City</u>	<u>State</u>
	1942 4th Street,	Seattle, 99,	Washington.

<u>Name</u>	<u>First</u>	<u>Middle</u>	<u>Last</u>
	Louise	Rhoda	Noel
<u>Present Address</u>	<u>Street</u>	<u>City</u>	<u>State</u>
	1714 Dale Street,	San Diego, 2,	California.

4008 MCCLINTOCK STREET, SAN DIEGO, CALIFORNIA, U.S.A.			
DATE OF BIRTH	PLACE OF BIRTH	CITY	STATE COUNTRY
July 10, 1881		Neksø	Eornholm Denmark
CITIZENSHIP	DATE ACQUIRED	WHERE ACQUIRED	CITY STATE COUNTRY
U.S.	22 June 1923	San Diego,	California
OCCUPATION	LAST EMPLOYER		
housewife	-----		

SECTION 8. RELATIVES			
NOTE: INDICATE BELOW THE RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO LIVE ABROAD, ARE UNDER THE INFLUENCE OF A FOREIGN POWER, ARE NOT CITIZENS OF THE UNITED STATES, OR ARE MARRIED TO NON-CITIZENS.			
NAME: I have no relatives who are not citizens of the United States or who are married to non-citizens.		RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
REASON FOR LISTING UNDER THIS QUESTION			
NAME		RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
REASON FOR LISTING UNDER THIS QUESTION			
NAME		RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
REASON FOR LISTING UNDER THIS QUESTION			
NOTE: INDICATE BELOW THE RELATIVES BY BLOOD OR MARRIAGE, IN MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE (UNITED STATES OR FOREIGN)			
NAME: George Thomas Noel		RELATIONSHIP: brother	AGE: 38
CITIZENSHIP: U.S.	ADDRESS STREET AND NUMBER	CITY: Laguna Beach, California	STATE COUNTRY
TYPE AND LOCATION OF SERVICE (IF KNOWN) Civil employee of U.S. Navy Department at El Toro Field, Santa Ana, Calif			
NAME		RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
TYPE AND LOCATION OF SERVICE (IF KNOWN)			
NAME		RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY	STATE COUNTRY
TYPE AND LOCATION OF SERVICE (IF KNOWN)			
SECTION 9. EDUCATION			
SCHOOL: S.D. Sr. High School		ADDRESS: San Diego, California, U.S.A.	
DATES ATTENDED: FROM 1926 TO Feb. 1929	DEGREE: Diploma		
SCHOOL: --		ADDRESS: --	
DATES ATTENDED: FROM -- TO --	DEGREE: --		
COLLEGE: none		ADDRESS: --	
DATES ATTENDED: FROM -- TO --	DEGREE: --		
COLLEGE: --		ADDRESS: --	
DATES ATTENDED: FROM -- TO --	DEGREE: --		
COLLEGE: --		ADDRESS: --	
DATES ATTENDED: FROM -- TO --	DEGREE: --		
SECTION 10. SELECTIVE SERVICE STATEMENTS (CONTINUED TO PAGE 5)			

SECTION 10. SELECTIVE SERVICE - U.S.				
CLASSIFICATION II-A	ORDER NUMBER 2856-B	APPROXIMATE INDUCTION DATE ---	BOARD NUMBER 186	
ADDRESS OF BOARD STREET AND NUMBER 2356 30th Street,		CITY San Diego, 2,	STATE California	
IF DEFERRED, STATE REASON ---				
SECTION 11. MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE - UNITED STATES OR FOREIGN				
COUNTRY U.S.A.	SERVICE Foreign Service	SERVICE DATES FROM: 26 January 1931	TO: date	
GRADE Attaché	SERIAL NUMBER ---	TYPE OF DISCHARGE ----		
LAST STATION American Embassy, Guatemala City		COMMANDING OFFICER Ambassador Edwin J. Kyle		
REMARKS:				
SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (USE ADDITIONAL SHEET IF NECESSARY)				
NOTE: INCLUDE BELOW PERIODS OF UNEMPLOYMENT AND CASUAL EMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. INCLUDE LAST 5 POSITIONS AND COVER AT LEAST 15 YEARS.				
EMPLOYER U.S. State Department (Consular Service)		JOB TITLE Vice Consul		
ADDRESS STREET AND NUMBER American Consulate, Ensenada, Mexico		KIND OF BUSINESS government		
YOUR DUTIES AND SPECIALITY Gen. consular, including immigration, passports		NAME OF SUPERVISOR Consul Wm. A. Smales		
DATES COVERED	FROM: 26 January 1931	TO: 6 October 1938	SALARY \$1,800.00	PER annua
REASONS FOR LEAVING transferred to American Consulate at Mazatlán, Mexico.				
EMPLOYER U.S. State Department (Consular Service)		JOB TITLE Vice Consul		
ADDRESS STREET AND NUMBER American Consulate, Mazatlán, Mexico		KIND OF BUSINESS government		
YOUR DUTIES AND SPECIALITY shipping, invoice, immigration, political rep.		NAME OF SUPERVISOR Consul Rufus H. Lane, Jr.		
DATES COVERED	FROM: November 1938	TO: August 1941	SALARY \$2,250.00	PER annua
REASONS FOR LEAVING transferred to American Consulate, Guadalajara, Mexico				
EMPLOYER U.S. State Department (Consular Service)		JOB TITLE Vice Consul		
ADDRESS STREET AND NUMBER American Consulate, Guadalajara, Mexico		KIND OF BUSINESS government		
YOUR DUTIES AND SPECIALITY passport, visa, political & economic reporting		NAME OF SUPERVISOR Consul Maurice L. Stafford		
DATES COVERED	FROM: August 1941	TO: August 1944	SALARY \$3,160.	PER annua
REASONS FOR LEAVING to accept employment with Office of Strategic Services				
EMPLOYER Office of Strategic Services		JOB TITLE Station Chief		
ADDRESS STREET AND NUMBER American Consulate, Bilbao, Spain		KIND OF BUSINESS government		

(CONTINUED TO PAGE 6)

PAGE 5

SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (CONTINUED FROM PAGE 5)

YOUR DUTIES AND SPECIALTY: special reporting; NAME OF SUPERVISOR: Donn Paul Medalie

DATES COVERED: FROM: September 1944 TO: December 1945; SALARY: \$4,000.00; PER: annum

REASONS FOR LEAVING: temporarily assigned to American Embassy, Madrid, Spain

EMPLOYER: Office of Strategic Services; JOB TITLE: -

ADDRESS: STREET AND NUMBER: American Embassy, Madrid, Spain; CITY: Madrid; STATE: Spain; KIND OF BUSINESS: Axis Assets, Allied Transport

YOUR DUTIES AND SPECIALTY: investigating and reporting; NAME OF SUPERVISOR: Donn Paul Medalie

DATES COVERED: FROM: December 1945 TO: May 30, 1946; SALARY: \$5,100.00; PER: annum

REASONS FOR LEAVING: transferred to Barcelona, Spain

EMPLOYER: Strategic Service Unit (War Department); JOB TITLE: Station Chief

ADDRESS: STREET AND NUMBER: American Consulate General, Barcelona, Spain; CITY: Barcelona; STATE: Spain; KIND OF BUSINESS: government

YOUR DUTIES AND SPECIALTY: specialized reporting; NAME OF SUPERVISOR: Donn Paul Medalie

DATES COVERED: FROM: June 1, 1946 TO: Mar. 1, 1947; SALARY: \$5,900.00; PER: annum

REASONS FOR LEAVING: -

NOTE: IN SPACE BELOW GIVE DETAILS CONCERNING ANY POSITION FROM WHICH YOU MAY HAVE BEEN DISCHARGED OR WHICH YOU MAY HAVE LEFT UNDER CIRCUMSTANCES WHICH WERE NOT ENTIRELY FAVORABLE.

DETAILS: -----

SECTION 13. CHARACTER REFERENCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHEN POSSIBLE)

NAME: Mr. Frank Forward; ADDRESS: STREET AND NUMBER: Union Title Co., San Diego, California; CITY: San Diego; STATE: California

NAME: Mr. Gordon B. Dunlap; ADDRESS: STREET AND NUMBER: 5602 Broadway, San Antonio, Texas; CITY: San Antonio; STATE: Texas

NAME: Mr. Wayne L. Brown; ADDRESS: STREET AND NUMBER: 1667 Pontiac Street, Denver, Colorado; CITY: Denver; STATE: Colorado

NAME: Col. Herbert King; ADDRESS: STREET AND NUMBER: 761 Macon Street, Brooklyn, New York; CITY: Brooklyn; STATE: New York

NAME: Mr. Wm. Blackstone; ADDRESS: STREET AND NUMBER: Riviera Lots, 1000 2nd St., Coronado, Calif; CITY: Coronado; STATE: California

SECTION 14. SOCIAL ACQUAINTANCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHEN POSSIBLE)

NAME: Mr. Paul W. Boltz; ADDRESS: STREET AND NUMBER: 4451 Monroe, San Diego, California; CITY: San Diego; STATE: California

NAME: Mr. Art Jacobs; ADDRESS: STREET AND NUMBER: 4441 42nd Street, San Diego, California; CITY: San Diego; STATE: California

NAME: Gen. Rufus H. Lane (Ret'd); ADDRESS: STREET AND NUMBER: Falls Church, Virginia; CITY: Falls Church; STATE: Virginia

NAME: Eric C. Wendelin; ADDRESS: STREET AND NUMBER: State Department, Washington, D.C.; CITY: Washington; STATE: D.C.

NAME: Jack L. Neal; ADDRESS: STREET AND NUMBER: State Department, Washington, D.C.; CITY: Washington; STATE: D.C.

SECTION 15. NEIGHBORS-THREE IN THE UNITED STATES (AT YOUR LAST NORMAL ADDRESS)

SECTION 16. NEIGHBORS—THREE IN THE UNITED STATES AT YOUR LAST NORMAL ADDRESS.		ADDRESS—STREET AND NUMBER	CITY	STATE
NAME	Mr. Harry S. Hawley	300-R-Road, State Department	Washington	
NAME	Mr. Don Morgan	4320 Glenwood Drive, Rt. 4, box 10	Riverdale	Calif.
NAME	Mr. R. G. Leddy	Street Address Unknown	Washington	D.C.

SECTION 16. MISCELLANEOUS

DID YOU EVER HAVE OR DO YOU NOW HAVE MEMBERSHIP IN, OR SUPPORT ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES? YES NO
 IF ANSWER IS "YES" EXPLAIN BELOW:

DO YOU USE, OR HAVE YOU USED INTOXICANTS? Social drinking only.

HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE, AND DISPOSITION OF CASE.
 No

HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? YES NO
 IF ANSWER IS "YES", GIVE DETAILS BELOW:

SECTION 17. FINANCIAL BACKGROUND

ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES NO IF ANSWER IS "NO", STATE SOURCES OF OTHER INCOME.

NAME(S) OF BANK(S) WITH WHICH YOU HAVE ACCOUNTS
 First National Trust & Savings Bank, San Diego, California.

HAVE YOU EVER BEEN IN BANKRUPTCY? YES NO IF ANSWER IS "YES", GIVE PARTICULARS:

SECTION 18. CREDIT REFERENCES—THREE IN THE UNITED STATES

NAME	ADDRESS—STREET AND NUMBER	CITY	STATE
First National Bank	5th & Broadway	San Diego	California
Hurston & Company	5th & W.C.	San Diego	California
Union Oil Company		San Diego	California

SECTION 19. RESIDENCES FOR PAST 15 YEARS

FROM	TO	ADDRESS—STREET AND NUMBER	CITY	STATE	COUNTRY
Jan. 1931	Oct. 1938	American Consulate	Ensenada	B.C.P.N.	Mexico
Nov. 1938	Aug. 1941	American Consulate	Mazatlan	Sin.	Mexico
Aug. 1941	Aug. 1944	American Consulate	Guadalajara	Jal.	Mexico

SECTION 19. RESIDENCES FOR PAST 15 YEARS (CONTINUED FROM PAGE 5)					
FROM:	TO:	ADDRESS - STREET AND NUMBER	CITY	STATE	COUNTRY
Sep. 1944	Dec. 1945	American Consulate,	Bilbao,	Vizcaya,	Spain
Dec. 1945	May, 1946	American Embassy,	Madrid,	Spain	
June 1946	March 1947	American Consulate General,	Barcelona,	Spain	
April 1947	date				
FROM:	TO:	ADDRESS - STREET AND NUMBER	CITY	STATE	COUNTRY

SECTION 20. RESIDENCES OR TRAVEL OUTSIDE THE UNITED STATES					
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE	
		see No. 19 above - identical with above.			
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE	
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE	
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE	
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE	
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE	

SECTION 21. CLUBS, SOCIETIES AND OTHER ORGANIZATIONS					
NOTE: IN SPACE BELOW LIST NAMES AND ADDRESSES OF ALL DOMESTIC AND FOREIGN CLUBS, SOCIETIES AND ORGANIZATIONS OF ALL KINDS TO WHICH YOU HAVE BELONGED, OTHER THAN RELIGIOUS SOCIETIES, POLITICAL PARTIES AND LABOR UNIONS. INCLUDE ANY ORGANIZATION HAVING HEADQUARTERS OR A BRANCH IN A FOREIGN COUNTRY OF WHICH YOU HAVE BEEN A MEMBER OR TO WHICH YOU HAVE GIVEN SUPPORT.					
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY	
DeMolay Society		La Mesa,	California	(1930)	
Rotary Club		Ensenada,	Mexico	(1936)	
Rotary Club		Guadalajara,	Mexico	(1941)	
Jolietta Tennis Club		Bilbao,	Vizcaya,	Spain	
British-American Club		Barcelona,	Spain		
Mayan Golf Club		Guatemala City,	Guatemala		
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY	
NAME	STREET AND NUMBER	CITY	STATE	COUNTRY	

SECTION 22. LANGUAGES-FOREIGN (STATE DEGREE OF PROFICIENCY AS "SLIGHT", "FAIR" OR "FLUENT")			
LANGUAGE	SPEAK	READ	WRITE
Spanish	fluent	fluent	fluent
French	--	slight	--
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE

SECTION 23. GENERAL QUALIFICATIONS

INDICATE SPECIFICALLY IN DETAIL THE TRAINING YOU HAVE GAINED, OR GAINING, AND QUALIFICATIONS AS A RESULT OF TRAINING OR EXPERIENCE WHICH QUALIFY YOU FOR A PARTICULAR POSITION.

I have had seventeen years of continuous service abroad with the United States government. I have had considerable experience in all phases of government foreign service work, including: political, economic and agricultural reporting; citizenship, passport, visas, shipping and protection work. For varying periods of time I have been in charge of the American Consulates at Ensenada, Mazatlan and Guadalajara, Mexico. My long experience in Latin countries has provided an insight into Latin character, temperament and psychology which cannot be acquired in any other way. Three years of my service abroad has been devoted exclusively to investigative work. I have had special training in photography and reporting.

SECTION 24. SPORTS AND HOBBIES

Golf, tennis, bridge and reading.

SECTION 25. EMERGENCY ADDRESSEE

NAME	Alfred E. Noel	RELATIONSHIP	father
ADDRESS	STREET AND NUMBER	CITY	STATE
	1714 Dale Street,	San Diego, 2,	California
		COUNTRY	TELEPHONE
			Franklin 5582

SECTION 26. INFORMATION AND FINAL COMMENTS

NOTE: YOU ARE INFORMED THAT CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED, AND YOU ARE INVITED TO MAKE ANY CHANGES (OR ADDITIONS) IN YOUR STATEMENTS THAT YOU MAY THINK ADVISABLE.
ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION, IF SO, DESCRIBE, IF NOT, ANSWER, "NO".
No.

SECTION 27. CERTIFICATION

I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY INTENTIONAL MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR MY IMMEDIATE DISMISSAL.

SIGNED AT Guatemala City, Guatemala
Francis A. Neuman
Witness

DATE 1 December 1947
[Signature]
Signature of Applicant

SECRET

file

TO : CCD
FROM : CSC
SUBJECT: Security and Cryptographic Approval

DATE: 30 June 1949

The following person has been security approved
for the purpose of performing cryptographic duties
as of dates indicated.

<u>Name</u>	<u>Security</u>	<u>Cryptographic</u>
NOEL, James A.	6 January 1944	30 June 1949

John C Bonnet
JOHN C. BONNET
Security Officer SO

SECRET

34-100-100

25786

SECURITY OFFICE

CONFIDENTIAL

Investigation Report

Date: 6 January 1944

Subject: NOEL, James A.

Number: 12951

To: Mr. E. M. Terrell.

- 1. Investigation directed by: AOT.
- 2. Sources of information: S.
- 3. Summary of information:

An American born citizen, 32 years old, son of American born parents.

Subject is a high school graduate and has had twelve years experience in the Foreign Service of the United States Government.

Confidential informants recommend the subject as to loyalty, ability and personal character.

Handwritten notes:
 Notified by [unclear] - 1-8-44
 E. J.

Large handwritten signature:
 (Over)

CONFIDENTIAL

3. Summary of information (Cons 4.7)

4. Remarks:

5. Recommendation:

Security approval recommended, though subject to the receipt of derogatory information at some future date. Interview waived.

Final interview in this case unnecessary if originating official will provide two (unsigned) passport size photographs and completed fingerprint card of Subject. Par. 6 should be returned with indication of disposition.

J. CW
By A. G. Thomson Date 1/6/44.
Security Officer
A. G. Thomson.

000.

OFFICE OF STRATEGIC SERVICES **CONFIDENTIAL**
WASHINGTON, D. C.

206
John W. ...
For Noel file
↑

8 January 1944

(2)

MEMORANDUM

TO: Major McDonough
FROM: *J. M. ...*
for W. H. Sherwood
SUBJECT: James A. Noel

Confirming our report by
telephone to your office, the Security
Office has just notified us that clearance
has been granted on Subject.

CONFIDENTIAL

Date

FORM 101 USE PREVIOUS EDITIONS

SECRET - SECURITY INFORMATION

CONTRACT PERSONNEL

OFFICE OF PERSONNEL
RETURN FILE TO 5E62, HQS

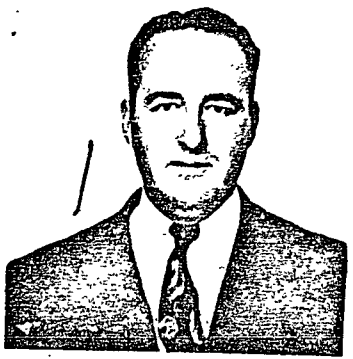
NOTICE: This is an Office of Personnel File and subject to 10 day limitation period. This file has been charged to Prilo and is due to be returned to CONTRACT PERSONNEL DIVISION, 5E-62 Hqs., x7841, as of 10/1.

RETURN TO
INCH
JOB 2E-150

30-1015

ROUTING AND RECORD SHEET

SUBJECT: (Optional) Retirement: [Redacted]			
FROM: Chief, CSPS CG-10, Hqrs		EXTENSION NO.	DATE 19 February 1970
TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS
	RECEIVED	FORWARDED	
1. Chief, DO [Signature]	25 Feb	[Signature]	COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.) To 1: To avoid any possible misunderstanding and to facilitate staffing plans, please assure prompt attention to the attached memorandum on the scheduled retirement of [Redacted] 1 to 5: Subject has been reminded** of retirement and will submit formal application at least 90 days in advance of the date scheduled in the attached memorandum. [Signature] Personnel Officer ***by dispatch USFS-860 prepared 26 February '70 and field memo addressed to him was attached. Contents of this attachment were contained in body of the dispatch.
2.			
3.			
4.			
5. Chief, CSPS CG-10, Hqrs			
6. Attn: Agent Branch			
7.			
8.			



JAMES A. NOEL

S-E-C-R-E-T

19 February 1970

MEMORANDUM FOR: Chief, DO

SUBJECT : Retirement of [redacted]
under the CSC Retirement System.

1. This memorandum is to remind all concerned that [redacted] GS-16 of your component is scheduled for retirement under the CSC system during the month of March 1971.

2. As you know, the normal retirement date is the last day of the month in which the individual becomes eligible to retire. To insure complete understanding, it is suggested that this matter be again explained to the employee and an appointment be arranged with the Retirement Counseling Branch, Retirement Affairs Division, Office of Personnel, extension 3328, for further discussions or counseling on benefits available upon retirement. Formal application for retirement should be made at least three months prior to the scheduled date.

3. If you should propose to take any steps to retain this employee after his retirement date, your attention is invited to HN 20-324. Any recommendation in that connection will require the concurrence of the Deputy Director for Plans and should be submitted at least 12 months prior and not more than 18 months prior to the scheduled retirement date.

4. If a replacement is required, early notification to CSPS will assist in locating a qualified replacement. (See CSPS Memo No. 15-69, dated 9 July 1969, "Staff Personnel Requisition".)

Robert W. Sheay
Robert W. Sheay
Chief, Clandestine Service
Personnel Staff

S-E-C-R-E-T

GROUP I-Excluded from
automatic downgrading
and declassification

21 July 68

CCS has this memorandum for consideration.

Action is being held up pending

TDY in D. C. beginning 29 July 1968.

Appropriate modifications will be worked out with

CCS at that time.

Montgomery

6 October 1967

MEMORANDUM FOR: Chief, Central Cover Staff

FROM : Chief, [redacted]

SUBJECT : [redacted]

The following paragraphs are keyed to points raised in Form 10-64, 2311.

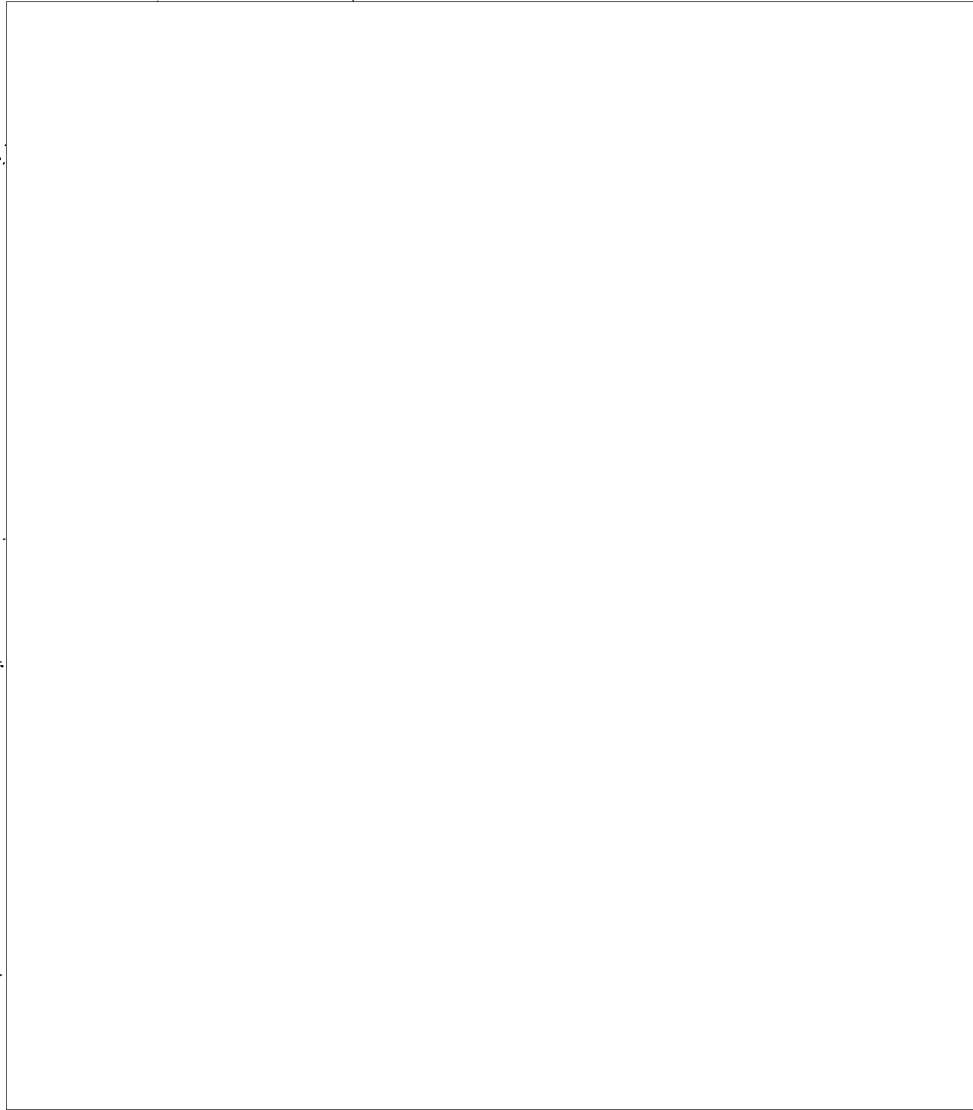
A. General Information

[redacted]

Submitted by Do/E

SECRET

SECRET



SECRET

S E C R E T

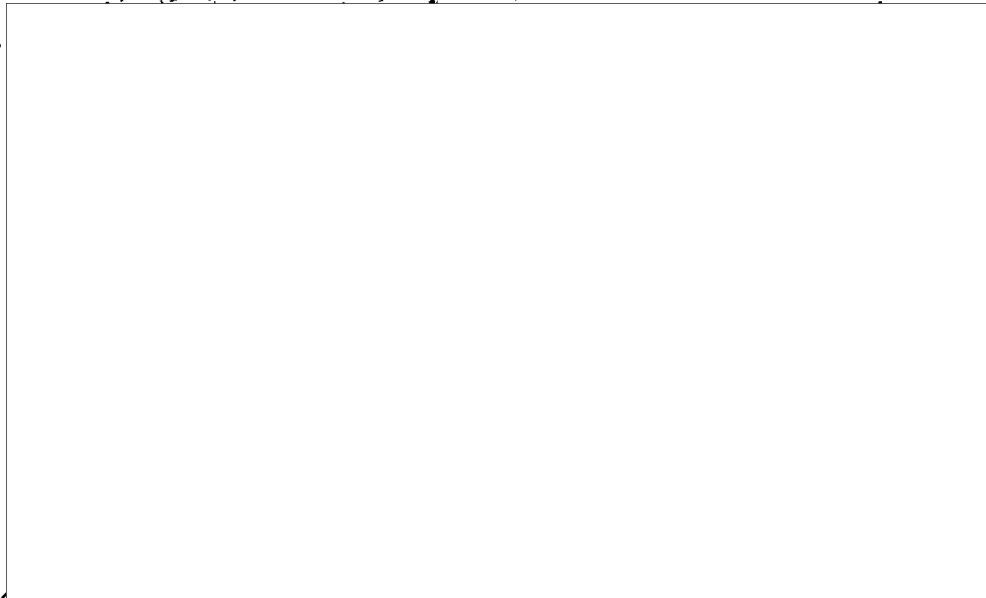
- 5. See A. (General Information)
- 6. None known
- 7. None known



- 9. N.A.
- 10. N.A.
- 11. N.A.
- 12. N.A.
- 13. N.A.



SECRET



- 4 -

SECRET

SECRET

18 March 1968

MEMORANDUM FOR: Chief, Clandestine Services Personnel
Staff

ATTENTION : Mr. Frank De Wald

SUBJECT : Request to Revert to Civil Service
Retirement System - James A. Noel

In accordance with your request there is attached (sterilized)
copy of the original dispatch [redacted]
addressed to the Director of Personnel, in which he requests to
revert to the Civil Service Retirement System. This is forwarded
for appropriate action by C/CSPS.

Virginia C. Lynch
Chief, DO Personnel & Training

Attachment: A/S Above

SECRET

DISPATCH

SECRET

PROCESSED ACTION

TO	Director of Personnel	XX	ADMINISTRATIVE INDEXING
INFO	Chief, Domestic Operations		NO INDEXING REQUIRED
FROM	Chief of Base, San Francisco		ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT	Request to Revert to Civil Service Retirement System		

ACTION REQUIRED - REFERENCES

Reference: USFS-577 dated 21 April 1967

1. On 26 November 1967, I reached the "break even" point between the Civil Service Retirement System and the Organization's System, having completed 36 years and 11 months of Government Service on that date.

2. Since I plan to work until age 60, at which time I will have 40 years of Government Service, it is my desire to revert to the Civil Service System in order to take advantage of the increased annuity under that System.

3. I would appreciate it therefore if you would take whatever steps may be necessary to transfer my retirement account back to the Civil Service Retirement System.

Sign. James H. Keef

in Person. Conf. Fed

*Respectfully Signed
C/D/DO/Personnel*

Distribution:

- 2 - C/DO
- 2 - C/Personnel

CROSS REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE
	USFT-1301	26 Feb 1968
	CLASSIFICATION	HQS FILE NUMBER
	SECRET	

SECRET

12 March 1968

*Original info
EJP
3/13/68*

MEMORANDUM FOR THE RECORD

SUBJECT: James A. Noel

1. Chief, DO and I talked to Jim Noel this morning about the possibility of his converting from staffer to career agent. After considerable discussion, Jim agreed to the conversion. He is obviously doing this reluctantly, but he appreciates the situation within the DDP in which the encumbrance of senior grades by long-time employees is blocking the promotions of junior officers.

2. Jim urged that he be retained as a career agent until he reaches the age of mandatory retirement (about three years). Chief, DO stated that the need [redacted] for handlers of contacts and assets is such that there would be a continuing need for experienced career agents [redacted]

[redacted] I told Jim that unless he pulled something stupid, he was virtually assured of career agent status until he reached age 60, and perhaps could be employed as a retired annuitant after that time if his performance was productive and if operational requirements remain as they are at present.

3. Jim explained why he could not retire -- the next five years will be difficult for him financially with two teen-age boys to put through college.

4. Chief, DO and Jim will work out the details and timing of his conversion to career agent.

V. L. Gresham
V. L. Gresham
Chief, Operational Services

cc:
DDP
C/DO

*V. L. Gresham
Chief, Operational Services
4/16/68*

Secret

James A. Noel

Date of birth: 3/19/11 SCD: 1/26/31 ECD: 9/18/47

Estimated retirement annuities:

	CIA <u>31 March 69</u>	CIA <u>31 March 70</u>	CIA <u>31 March 71</u>	CSR <u>31 March 71</u>
Basic Annuity	\$15725 p.a.	\$16398 p.a.	\$16902 p/a	\$18,491 p.a.
Reduced annuity for survivor benefits	\$11424 p.a.	\$15028 p.a.	\$15482 p.a.	\$16912 p.a.
Survivor benefits	\$8649 p.a.	\$9019 p.a.	\$9296 p.a.	\$10,170 p.a.

Memo sent to DOD Pers to advise Noel that he would receive a higher annuity under the Civil Service Retirement rather than the CIA System in view of the amount of his service.

A policy decision has been made that a participant in the CIA Ret System should not later than 18 months prior to his retirement apply to be removed from the CIA Retirement System and transferred to the CSR System.

In order to retire under the CSR System (55-30) he must be under that system for at least one year prior to retirement.

*Y. G. ...
4 March 68*

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ROUTING AND RECORD SHEET

SUBJECT: (Optional)

file
James A. Noel

FROM:

CSPS/Dowald

EXTENSION:

NO:

Date:

24 July 1967

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)

1.

Virginia Lynch

2.

C/DOD/Pers

3.

4.

5.

6.

7.

8.

9.

10.

11.

12.

13.

14.

15.

1- Please see that Mr. Noel gets the attached information as asap. Note para c. If Mr Noel decides to go back to the CSR system, would appreciate routing his request through C/CSPS.

f
Frank

FORM 3-67

610

USE PREVIOUS EDITIONS

SECRET

CONFIDENTIAL

INTERNAL USE ONLY

UNCLASSIFIED

SENDER WILL CHECK CLASSIFICATION ON TOP AND BOTTOM
UNCLASSIFIED CONFIDENTIAL SECRET

CENTRAL INTELLIGENCE AGENCY
OFFICIAL ROUTING SLIP

TO	NAME AND ADDRESS	DATE	INITIALS
1	CSPS, Attn: Mr. Dewald GC-10 Hqs.	21/4/67	D
2			
3	R. Shoup		
4			
5			
6	F. Dewald Jr.	21/4/67	D
ACTION		DIRECT REPLY	PREPARE REPLY
APPROVAL		DISPATCH	RECOMMENDATION
COMMENT		FILE	RETURN
CONCURRENCE		INFORMATION	SIGNATURE

Remarks: *F.Y.T.*
 This is the first and only one of this type that we will get for some time -
 Please return to me
 DOB - 3/19/11
 SCD 1/26/31 *L.*

FOLD HERE TO RETURN TO SENDER

FROM: NAME, ADDRESS AND PHONE NO	DATE
<i>Benjamin M. Benthal</i> OP/BSO/RB M. Benthal 205 Magazine X2847	
UNCLASSIFIED CONFIDENTIAL <input checked="" type="checkbox"/> SECRET	

18 JUL 1967

MEMORANDUM FOR: Mr. James A. Noel

SUBJECT : Retirement Information

1. There are a few situations in which an employee at the time of retirement may have so many years of service (almost 37) that he would receive a higher annuity under the Civil Service Retirement System than under the Organization System. Because of this, the policy decision has been made that a participant in the Organization System who would receive a higher annuity under the Civil Service System may, not later than eighteen months prior to his retirement, apply to be removed from our system and transferred to the Civil Service System. Since you will complete 37 years of Federal service in January of next year it is felt that you should be advised of your retirement status under the Organization System and also if returned to the Civil Service System. The following information is being submitted to assist you in determining which course of action you desire to follow:

a. During the period from 15 August 1944 through 19 October 1946 there were no retirement deductions withheld from your salary. In order for this time to be credited in counting total service under the Organization System it would be necessary for you to make a deposit, with interest, to cover this period. The maximum annuity under our system is 70 per cent based on 35 years of creditable service. If you should return to the Civil Service System in order to receive the maximum annuity it would be necessary for you to make a deposit, with interest, to cover that period for which no contributions were made; however, you may receive full credit in counting total service without making a deposit but your annuity will be reduced by one-tenth of the amount due as deposit.

b. As you are aware, you are presently entitled to apply for voluntary retirement under the Organization Retirement and Disability System. The annuity estimate given below as of 31 October 1967 would be applicable if a deposit were made to cover the period for which no deductions were withheld. The annuity estimate given for 31 March 1968 would be applicable without a deposit since you would have completed 35 years of creditable service at that time without this period of service.

<u>31 October 1967</u>		<u>31 March 1968</u>
\$14,265.00	Basic Annuity	\$14,640.00
\$13,109.00	Reduced to Provide for	\$13,446.00
\$ 7,848.00	Survivor Benefit	\$ 8,052.00
	Survivor Benefit	

SECRET

SECRET

SUBJECT: Retirement Information

c. If you were to return to the Civil Service Retirement System, you would be entitled to retire under the 55-30 optional provision at any time after you have been back in that system for a period of one year. The Civil Service Regulations state that to retire under the Civil Service Retirement System an employee must have been under that system for at least one year during the two years immediately preceding retirement under that System. Therefore if you should desire to return to the Civil Service System you should submit a request to Headquarters sufficiently in advance of your planned retirement in order to allow time for your request to be acted upon and for transfer to be made effective, as well as allowing for the aforementioned one year required by Civil Service Regulations. The following annuity estimate would be applicable in this situation as of 31 December 1968, assuming a deposit is made:

Basic Annuity	\$15,755.00
Reduced to Provide for Survivor Benefit	\$14,450.00
Survivor Benefit	\$ 8,664.00

2. The above information is being forwarded for your consideration and should not be considered as anything more. If you have any questions regarding the above please feel free to forward them to Headquarters.

Sr. B. DeFolice

B. DeFolice

Chief, Benefits and Services Division

7/13/68 - 10:50 AM

Called Virginia Lynch - asking if there is anything or to discuss anything for her information -

She will go out with another dispatch &

him and quote part of this memo. DoD memo only, mentioned 1 year - we did not say anything.

Sub. request must be made at least 18 months prior to retirement date. She will coordinate dispatch with CSRS

with CSRS

SECRET

in handbook let 12/13/68/01
approved of this 7/13/68

DoD

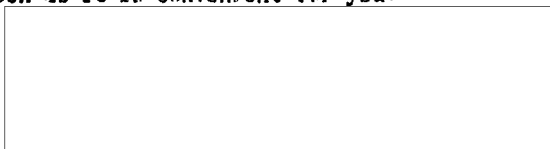
SECRET

21 June 1967

MEMORANDUM FOR: JAMES A. NOEL

SUBJECT : Retirement Planning

- 1. The attached memorandum dated 29 May 1967 from the Director of Personnel concerns current Agency policy on retirement of personnel at age 60.
- 2. According to our records, you will achieve age 60 on 3/19/71, having completed 40 years 2 months of service. On this basis you would be scheduled to retire on 31 MARCH 1971.
- 3. If there are any questions relative to your status, please feel free to call Frank J. Dewald, Jr., of the clandestine Services Personnel Staff, extension 5476. We also urge you to contact the Retirement Branch, Office of Personnel, extension 2257 as soon as it is convenient for you.



DDF/OF

SECRET

14-00000

ADMINISTRATIVE
INTERNAL USE ONLY

DOD
65-16

27 APR 1967

MEMORANDUM FOR : James A. Noel

SUBJECT : Retirement Planning

1. As a participant in the CIA Retirement and Disability System, you will reach mandatory retirement at age 60. The prospect of retirement deserves serious thought and planning because of its impact on each of us and for this reason, we are taking this opportunity to provide you with this advance notice that according to our records you will be required to retire on March 1971.

2. Planning ahead can bring about, with each passing year, definite progress toward your retirement goals and the Agency is anxious to assist you in your retirement planning.

3. We would like to make available to you as much information as possible on the general subject of retirement, your annuity estimates, life and health insurance protection in retirement, opportunities for other employment, Social Security benefits, and other additional material which is available. The Agency feels that this type of information and advisory service should be made available and, hopefully, will be used by employees well in advance of the date of retirement.

4. Our Chief, Retirement Branch, on extension 3257, is available to discuss with you any aspect of your retirement planning and we encourage you to contact him.



Emmett D. Echols
Director of Personnel

ADMINISTRATIVE
INTERNAL USE ONLY

01-360

SECRET

29 MAR 1966

MEMORANDUM FOR: Director of Personnel
THRU : DDP/OP
SUBJECT : PCS Return Prior to Completion of Tour of Duty - James A. Noel
REFERENCE : CSN-20-59, dated 17 November 1965

1. This memorandum contains in paragraph 2 a recommendation for the approval of the Director of Personnel.
2. Mr. Noel arrived in Madrid as the Chief of Station on 21 September 1961. After home leave, he returned to Madrid on 7 August 1964, for a second tour of duty which would normally be completed on 6 August 1966. We have been advised that upon completion of his current assignment, Mr. Noel will be assigned as Chief of the DODS field office in San Francisco, California. Since the officer now filling that position is required to leave in early September for another assignment, it is very desirable that Mr. Noel arrive in San Francisco about 6 September. Therefore, it is requested that Mr. Noel be permitted to leave Madrid on or about 1 July 1966. This will permit him to take some home leave and arrive at his new post in sufficient time to settle his family, which includes two school age children, and report for his projected assignment on schedule.

Edward Ryan
Acting Chief
Western Europe Division

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET

2

**SUBJECT: PCS Return Prior to Completion of Tour of Duty -
James A. Noel**

CONCUR:

See Concurrence on Page 1
DDP/OP

22 April 1966
Date

The recommendation in paragraph 2 is APPROVED:

/s/ [Signature]
Director of Personnel

24 APR 1966
Date

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1-1)	NAME OF SUPERVISOR (true)	DATE (from item 8-2)
James Noel	18 Feb. 1963		
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE AND GRADE	7a. DATE OF PCS ARRIVAL IN FIELD ON THIS TOUR
19 Apr 1911	GS-16	Chief of Station	23 September 1961
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		7b. EXPECTED DATE OF DEPARTURE FROM FIELD
	Madrid		about 10 June 1964
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7c. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
Chief of Station. Overall responsibility for all KUTANK operations and activities in country of assignment.			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 6, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
Return to post for second tour following home leave.			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
None at this time.			

SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:	
<input checked="" type="checkbox"/> RETURN TO MY CURRENT STATION	
<input checked="" type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY, WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS. INDICATE CHOICE OF COMPONENT:	
1ST. CHOICE <u>NS</u> 2ND. CHOICE <u>WII</u> 3RD. CHOICE <u>---</u>	
<input checked="" type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION, WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:	
1ST. CHOICE <u>Hague</u> 2ND. CHOICE <u>Copenhagen</u> 3RD. CHOICE <u>Mexico City</u>	
10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? INDICATE NUMBER OF WORK DAYS <u>45</u>	
11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU: <u>wife; and two sons, ages (at time of contemplated travel - June 1964) 15 and 13.</u>	
12. INDICATE ANY CHANGE IN YOUR PERSONAL OR FAMILY SITUATION WHICH SHOULD BE CONSIDERED IN DETERMINING YOUR NEXT ASSIGNMENT <u>None - except schooling facilities for children.</u>	
13. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION	
14. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:	
15. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE CAREER SERVICE OFFICER OR PERSONNEL OFFICER AT HEADQUARTERS	
16. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING: <u>Recommend approval of extension to June 1964. A recommendation regarding a second tour or other assignment will be forwarded to the Panel at a later date.</u>	
16. NAME <u>[redacted]</u> OR PERSONNEL OFFICER	SIGNATURE <u>[Signature]</u>
DATE <u>11 April 1963</u>	
FOR USE OF CAREER SERVICE	
17. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE DISPATCH NO. _____ CABLE NO. _____
19. TYPED OR PRINTED NAME	20. SIGNATURE
21. TITLE	22. DATE
23. COMMENTS	

SECRET

SECRET

SEP 8 - 1955

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1)	NAME OF SUPERVISOR (true)	DATE (from item 2)
JAMES A. NOEL	11 Jan 55	J. C. KING	26 Jan 55
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
<i>J. C. King</i>			2/7/55
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
11 March 1911	GS-15	Chief of Mission	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		
KUPIRE SD-FI	Caracas		
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7. EXPECTED DATE OF DEPARTURE
None			September 1955
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>Chief of Mission at Caracas. Supervisory jurisdiction over [redacted] Supervision of all KUMARK activities [redacted] Liaison with Ambassador, Service Attachés, and Embassy section heads; [redacted] [redacted] Projects and plans.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
<p>First preference: Branch Chief in WH Division</p>			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
<p>CE Course Communist Party Operations Operational Security</p>			

SECRET

B. PREFERENCE FOR NEXT ASSIGNMENT (continued)

C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 IN THE BOXES BELOW:

RETURN TO MY CURRENT STATION BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY

BE ASSIGNED TO ANOTHER FIELD STATION

WITH RESPECT TO A POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE YOUR 1ST, 2ND AND 3RD CHOICE FOR GEOGRAPHIC AREA OR SPECIFIC STATION:

1ST CHOICE: Mexico City

2ND CHOICE: Santiago

3RD CHOICE: London

OFFICE: 98. P6 RC 24 TEL

FEB. 8 2 24 PM '55

MAIL ROOM

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?
15 work days INDICATE NUMBER OF WORK DAYS 15

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:
Wife, 43; two children, 6 and 4.

12. SIGNATURE: COMPLETE ITEM NO. 9-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.
 TO BE COMPLETED BY SUPERVISOR AT FIELD STATION

13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

14. SIGNATURE: COMPLETE ITEM NO. 9-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.
 TO BE COMPLETED BY APPROPRIATE SUPERVISOR AT HEADQUARTERS

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE DIVISION TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

I concur in subject's expressed preference for next assignment and recommend that he be given the training courses listed in 9B.

16. NAME OF SUPERVISOR
J. C. KING

TITLE:
CHIEF, WH DIVISION

SIGNATURE:
JCKING

DATE:
26 January 1955

17. REMARKS (additional comment)
This officer, who will have been with the Agency for nine years on the completion of his present tour, never has had a Headquarters assignment. His performance in the field has been excellent and his long experience will make him a valuable addition to WH Headquarters staff.

SECRET

104-102

INSTRUCTIONS: 1. PERMIT FOR: A. CONTRACT EMPLOYEES (TYPE A, B AND CAREER) B. INDEPENDENT CONTRACTORS UNDER WRITTEN CONTRACT OR MOC (US CITIZENS OR RESIDENT ALIENS ONLY) C. THIS FORM IS NOT APPLICABLE FOR OPERATIONAL OR FIELD AGENTS 3. COPIES OF THE FORM WILL BE RETAINED BY THE ORIGINATING COMPONENT (NUMBER OF COPIES AT THE DISCRETION) AND BY CSRS/AGENT FRANCHISE (COPY ONLY)

NAME (LAST, FIRST, MIDDLE) [REDACTED] SEX MALE DATE OF BIRTH 19 March 1911

MARITAL STATUS Married NO. DEPENDENTS 2 YEARS(S) OF BIRTH 1911 and 1951 NATIONALITY U.S. LAST MEDICAL EXAM Dec. 1967

DATE OF LATEST SECURITY/OPERATIONAL APPROVAL 3 April 1968 JOB TITLE Ops Off COMPONENT DO

CONTRACT CATEGORY Career Agent EFFECTIVE DATE 4 Aug. 1958 EXPIRATION DATE NA SALARY 30,054 GRADE EQUIVALENT GS-16/7 PROJECT OR PLAN # [REDACTED]

BENEFITS YES NO SOCIAL SECURITY YES NO FECA DEATH AND DISABILITY YES YES ANNUAL AND SICK LEAVE YES YES CIVIL SERVICE RETIREMENT YES NA CIA RETIREMENT OR COMMERCIAL CIA ANNUITY YES NO FEDERAL EMPLOYEES GROUP LIFE AND HEALTH INSURANCE YES NO CONTRACT LIFE AND HEALTH INSURANCE MISSING PERSONS BENEFITS YES NO OTHER (EXPLAIN) UNLIC, WARPA, DENTAL DISEASE & ASS'N YES

NON-CIA EDUCATION: HEALTH PLAN

High School Graduate

DATES FROM - TO	NON-CIA EMPLOYMENT			
	EMPLOYER	LOCATION	FUNCTION	SALARY
1931 - 1936	Dept. of State	Mexico	Vice-Consul	
1936 - 1941	" "	"	" "	
1941 - 1943	" "	"	" "	
1944 - 1947	CSS/SSU/CIC	Spain & Guatemala	COS	

CIA TRAINING



DATES FROM - TO	CIA EMPLOYMENT HISTORY (BEGINNING WITH COS)					
	FUNCTION	CONTR. CAT.	LOCATION	PROJECT	SALARY	GRADE EQUIV.
4 Aug 1958	Ops Off	Career Agent	San Francisco	[REDACTED]	26,540	15/6
					30,054	16/7
					31,857	

14-00000
FACTORS AFFECTING SUBJECT (PUBLIC EXPOSURE - PRESS, RADIO, TV), KNOWN OR SUSPECTED IDENTIFICATION TO OTHER THAN CIA STAFF PERSONNEL, INTELLIGENCE, OR SECURITY SERVICES

If such factors exist, they have not affected his performance in his present assignment. He is far removed geographically from his overseas assignment.

COVER

ADAPTABILITY (SUBJECT AND FAMILY) TOWARDS DUAL LIFE

Excellent

B. PREVIOUS COVER WAS: OFFICIAL NON-OFFICIAL (GIVE BRIEF DESCRIPTION IF NOC)

MOBILITY

INDICATE LIMITING FACTORS BOTH PERSONAL AND OPERATIONAL

None

FUTURE UTILIZATION

INDICATE PLANS OR RECOMMENDATIONS FOR USE AFTER CURRENT ASSIGNMENT

This is [redacted] last tour as he reaches the mandatory retirement age in March 1971.

SECRET

05592 SIGG. AIC PROFILE (PA. 300: 24 Jan 1968)

NAME: James Arthur
 MARITAL STATUS: Married
 NO. YEARS OF BIRTH: 3
 DATE OF BIRTH: Mar 1911
 US NATURALIZATION DATE: 18 Jan 1967

EDUCATION: High school graduate
 CURRENT SERVICE: None

15. NON-CIA EMPLOYMENT

1931-33 Dept of State, Encarnada, Mexico - Vice Consul
 1933-41 Dept of State, Mazatlan, Mexico - Vice Consul
 1941-44 Dept of State, Guadaluajara, Mexico - Vice Consul
 1944-47 OSS/SSU/CIC, Spain and Guatemala - Chief of Station

16. NON-CIA EDUCATION

High school graduate

17. FOREIGN LANGUAGE ABILITIES

Spanish - R High; W Interm - Apr 1958 P, U, High; S, Intor: Interp & Trans Apr 1957.

18. AGENCY SPONSORED TRAINING

1947 Invest Tech 1949 AIC 1956 Basic Supervision
 1947 Photo 1949 Documentation 1953 Cland Pol Warfare
 1947 Commo Trng 1949 Crypto
 1949 Famil in Sound/Carveil Equip 1952 Psych Warfare
 1949 Intel Orient 1952 Cland Pol War

19. CIA EMPLOYMENT - TOURS OF DUTY (Personnel Actions, Military Orders, or Principal Details)

EFFECTIVE DATE	POSITION TITLE & COLP	GRADE	SO	ORGANIZATION & ORG. NO.	LOCATION
Sep 1947	I.O.	0132.00	12	OSO/FBT/COS	Guatemala
Mar 1949	" "	0132.00	13	" " "	"
Aug 1949	I.O. (Stf)	0132.00	13	OSO/FBT/COM	Buenos Aires
Dec 1950	" "	0132.00	13	OSO/FBT/COS	"
Aug 1951	I.O.	0132.00	14	OSO/FBT/SC/COS	"
Sep 1952	" "	0132.00	14	WH-I COM	Caracas
Aug 1954	Area Ops Off	0136.01	15	DDP/WH-I/CS	"
Jan 1956	" " "	0136.01	15	DDP/WH/Ch, Br-I, NWC	EC
Jun - Jul 1956	TDY South America				
Jun 1957	Area Ops Off	0136.01	15	DDP/WH Ch, Br II	"
Sep 1953	" " "	0136.01	15	DDP/WH-III/HavanaCubaSta/COS	Havana
Mar 1950	Ops Off	0136.01	16	" " "	"
Sep 1961	Chief of Station	0136.01	16	DDP/WH/COS	Madrid
Jun 1965	" " "	0136.05	16	" " "	"
Aug 1966	Chief of Base	0136.08	16	DDP/DOD/USF/USSta	San Francisco
Oct 1967	" " "	0136.08	16	DDP/DOD/USF/Intel Ops Grp	"

20. DATE REVIEWED: 13 Feb 1968
 21. PROFILE REVIEWED BY: hms/hc
 22. ITEMS 19 IS REVIEWED & VERIFIED BY EMPLOYEE: No

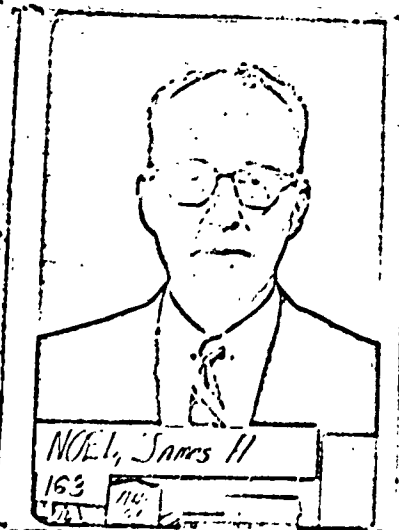
SECRET
(When Filled In)

Post. Serial No.
055292

BIOGRAPHIC PROFILE (PART 2)

Name (Last-First-Middle)
NOEL, James Arthur

DATE OF BIRTH
Mar 1911



20. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE

21. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL

22. ADDITIONAL INFORMATION

Appreciation 1954 from Administrator, Bureau of Inspection, Security & Consular Affairs, Dept of State for security assistance furnished during the Tenth Inter-American Conference at Caracas, Venezuela.

Commendation 1959 from Chief, WH Division for superior performance during the Cuban crisis.

Admonition 1963 from C/WH for part in command failure in control and supervision of a sensitive operation.

23. DATE REVIEWED
20 Apr 1966

24. PROFILE REVIEWED BY
hms/nc

FORM NO. 1200 (PART 2) REPLACES FORM 1000 (PART 2) OF SECRET
1 FEB 65 WHEN IN OBSOLETE

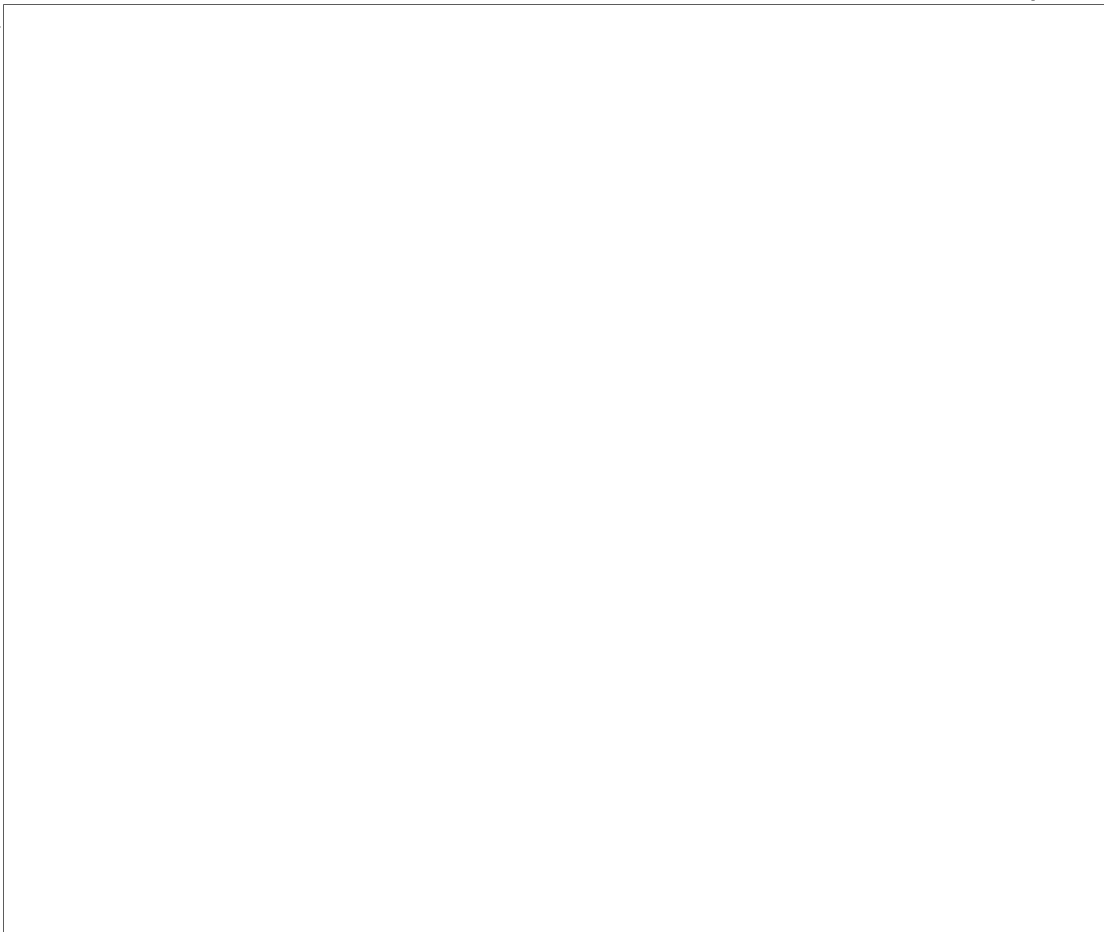
PROFILE

(6)

SECRET RYBAT

12 May 1970

Memorandum in Lieu of Fitness Report for [redacted]
for the Period 31 March 1969 to 31 March 1970



[redacted] is cost conscious in the expenditure of operational funds; he does not have supervisory responsibilities.

SECRET RYBAT

SECRET RYBAT

Page 2

[Redacted]

his performance has been Strong.

Signed in [Redacted] on 45a on 12 May 1970
Chief of Base, [Redacted]

[Redacted] by employee on 12 May 1970
Employee

I concur with the rating and narrative comments. Subject has done remarkably well in establishing himself [Redacted]

REVIEWING OFFICIAL:

[Redacted] Signature C/DOI/1 11 June 1970 Date

SECRET RYBAT

CAREER AGENT

SECRET RYBAT

(K)
att. USFT-1498

27 May 1969

Memorandum in Lieu of Fitness Report for
for the Period 26 July 1968 to 31 March 1969



1 SECRET RYBAT

SECRET RYBAT

att to USFT-1498

Page 2

[Redacted]

[Redacted] is cost-conscious in the expenditure of operational funds; he does not presently have any supervisory responsibility.

As has been indicated above, [Redacted] has been given a very difficult primary target [Redacted]

[Redacted] While it has been a frustrating and sometimes exasperating assignment, [Redacted] has shown both initiative and perseverance in attacking it; his performance has been Strong.

[Redacted]

[Redacted]

10 June 1969

Date

[Redacted]

Title

[Redacted]

SECRET RYBAT

SECRET
(When Filled In)

6

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 055292			
SECTION A GENERAL							
1. NAME <i>(Last) (First) (Middle)</i> Noel, James A.			2. DATE OF BIRTH 3-19-11		3. SEX M	4. GRADE GS-16	5. SD D
6. OFFICIAL POSITION/TITLE Chief of Base				7. OFF/DIV. BR OF ASSIGNMENT DDP/DOD		8. CURRENT STATION San Francisco	
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"/> REASSIGNMENT EMPLOYEE	
CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL			
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 1 April 67 - 31 March 1968			
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 Chief of Base supervising six professional and three clerical subordinates.						RATING LETTER S	
SPECIFIC DUTY NO. 2 Establishment and maintenance of operational support mechanisms.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Operational reporting.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Liaison with FBI and DCS, et al.						RATING LETTER S	
SPECIFIC DUTY NO. 5 Direction of recruitment and handling of support assets.						RATING LETTER S	
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 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.						RATING LETTER S	

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

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 and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Noel is much too experienced and practiced a hand for his performance to vary very much from year to year. He has continued to turn in the highly creditable performance in San Francisco that has been standard for him for many years. He has managed his subordinates well and has exercised uniformly good judgment in directing their operational efforts. Of particular value has been his steadiness in the face of administrative adversity disrupting the organization of his Base. Mr. Noel insured that the work of the Base continued uninterrupted and demonstrated his capacity to keep on top of all details and report them to Headquarters as appropriate. It is a credit to Mr. Noel that in the post-Ramparts exposure period there was not a single instance of an academic asset withdrawing from a relationship with the Base.

The performance of his officers attests the careful guidance and wise leadership which has enabled them to operate securely and well in sensitive areas. His relations with the FBI and DCS are excellent. He is appropriately economy minded. In short, he is a decidedly strong supervisor.

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
------	-----------------------

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
18 months	Mr. Noel is in the Field and will be shown a copy of this Fitness Report on his next TDY trip to Headquarters.

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
15 July 1968	C/DO/I	Stanley H. Gaines

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur in rating officer's judgment.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
17 July 1968	Chief, DO Division	(Signed) Gordon L. Jorgensen Gordon L. Jorgensen

SECRET
(When Filled In)

DC

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				056292			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Noel, James A.			3/19/11	M	16	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Chief of Base			DDP/DOD		San Francisco		
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"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR		<input type="checkbox"/> REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 October 1966 - 31 March 1967			
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	
Chief of Base supervising six professional and three clerical subordinates.						B	
SPECIFIC DUTY NO. 2						RATING LETTER	
Establishment and maintenance of operational support mechanisms.						B	
SPECIFIC DUTY NO. 3						RATING LETTER	
Operational reporting.						B	
SPECIFIC DUTY NO. 4						RATING LETTER	
Liaison with the FBI and DCS, et al.						B	
SPECIFIC DUTY NO. 5						RATING LETTER	
Direction of recruitment and handling operations.						B	
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 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.						RATING LETTER	
						B	

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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.

Mr. Noel is an old hand at running Bases or Stations abroad and his performance as Chief of Base, San Francisco, amply attests that. It goes without saying that he understands all aspects of the business, knows how to delegate, organize, direct and report. He has continued to do all these things well. His seniority, experience and maturity served the Agency in particularly good stead during this period when the location of his Base was compromised in the public press, through no fault of Mr. Noel. His subsequent and consequent actions were all taken with sound judgment and appropriate calm and circumspection. He was also most receptive to, and cooperative in, Headquarters suggestions in this matter. He is, of course, cost conscious and an excellent supervisor. His overall performance is that of a high order of senior Agency officers.

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	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
6 months	Subject is in the field; a copy of this report is being retained to show him on his next TDY to Hqs.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE (signed in draft)
21 August	C/DO/I	Stanley H. Gaines
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
Concur fully in overall rating of "Strong".		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
28 August 1967	Chief, DO Division	Gordon L. Jorgensen

SECRET

SECRET

21 July 1966

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: James A. Noel, Employee Serial No. 055292, DDP/EUR,
Period: 1 April 1965 - 1 July 1966. SD: D, YOB: 1911

1. Subject, who was born 19 March 1911, is a GS-16 and has been assigned to Madrid as Chief of Station since October 1961.

2. Subject is an experienced and mature officer dedicated to the Agency's mission. Conscientious and diligent, he readily accepts responsibility and is both thorough and reliable in the performance of his duties. Morale at his station has been consistently high, and Subject enjoys the respect and confidence of his subordinates. He evidences sound and objective judgment and operates well under pressure. In all aspects of the station's activities, he exhibits a high degree of cost consciousness in the expenditure of Government funds and property.

3. Subject's performance has been Strong throughout the rating period and he has obtained a maximum effort from his subordinates. He has enjoyed the confidence of the Ambassador and the other senior Embassy officials, all of whom have demonstrated considerable dependence upon the station.

Rolfe Kingsley
Rolfe Kingsley
Chief, European Division

Concur
1st H DDP (TK)
26 July 66

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				059292			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
NOEL, James A.			19 March 1911	M	OS-16	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Chief of Station			DDP/WE/Iberian		Madrid		
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 checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)				<input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From- to-)			
				1 April 1965 - 27 September 1965			
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	
My rating of the performance of this officer remains the same as the description of his performance which is contained in his fitness report for the period ending 31 March 1965.						B	
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 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.						RATING LETTER	
						B	

SECRET

OFFICE OF PERSONNEL

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position. Give 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.

MAIL ROOM

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	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
	Mr. Noel is currently at his overseas post.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
27 September 65	Chief, WE Division	William D. O'Ryan
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
19 OCT 1965	ADDP	Thomas H. Karamessines

SECRET

SECRET

12 May 1965

MEMORANDUM IN LIEU OF FITNESS REPORT

**SUBJECT: James A. Noel, Employee Serial No. 055292
Fitness Report for the Period 1 April 1964
to 31 March 1965**

1. Subject, who was born 19 March 1911, is a GS-16 and has been assigned to Madrid as Chief of Station since October 1961.

2. As Chief of Station, he is charged with the organization and management of the station and is responsible for the planning, direction, and supervision of all its activities. He also exercises general supervision of the Barcelona base. Assisting him and under his general supervision are [redacted] contract employees.

3. Subject serves as the Ambassador's principal intelligence officer, as chairman of the Embassy Defector Committee, as the Agency representative on the Embassy Country Team, and as the coordinator of U.S. clandestine intelligence operations in Spain. Accredited as the Agency's representative to [redacted]

4. Subject is an experienced and mature officer, possessing an excellent command of Spanish. Highly motivated, conscientious, and industrious, he readily accepts responsibility and is both thorough and reliable in the execution of his duties. Even tempered and affable, he holds the confidence and friendship of those whom he directs and those to whom he is responsible, and the morale of his station is noticeably high. He is alert to the operational possibilities [redacted]

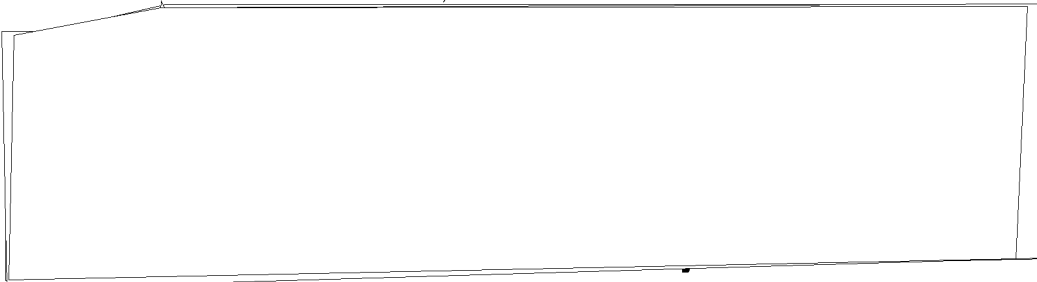
SECRET

70M 3 3 05 LN. 02

OFFICE OF DEPT. WAF.

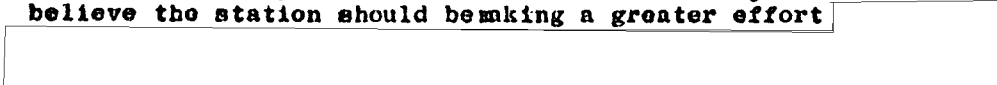
of any given situation, evidences sound and objective judgment, and works well under pressure. He writes lucidly, speaks articulately, and exhibits a high degree of cost consciousness in the use of government funds and property. His delegation of responsibility to others is meaningful and well delineated.

5. Subject's performance has been strong throughout the rating period. He has given the station purposeful direction and competent management and as an effective supervisor who commands the loyalty and respect of those whom he supervises, he has succeeded in obtaining a maximum effort from the station personnel. He enjoys the confidence of the Ambassador and other principal officers of the Embassy, several of whom have expressed their appreciation of subject's work and commented on the value of the station's contribution to the functioning of the Embassy. The fact that the Ambassador arrived in Madrid with definite prejudices regarding the Agency but was of quite another mind upon his departure is testimony to subject's skill and tact.



7. In addition to his considerable executive and liaison duties, subject has carried out the previously cited operational assignments with marked ability. He is a convincing and persuasive agent handler, and his operational reporting is prompt and thorough.

8. The only criticism I would make of subject is that I believe the station should be making a greater effort



Original Signed
WDR: b000

EDWARD RYAN
Deputy Chief of Mission
Western Europe Division

OVERALL PERFORMANCE IN CURRENT POSITION: "S"

COMMENTS OF REVIEWING OFFICIAL: CONCUR

WILLIAM D. O'RYAN, C/WE
10/11/60

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 055292	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle) NOEL, James A			2. DATE OF BIRTH 1911	3. SEX M	4. GRADE 16	5. SO D
6. OFFICIAL POSITION TITLE Chief of Station, Madrid			7. OFF/DIV/RR OF ASSIGNMENT DDP/WE/Iberia	8. CURRENT STATION Madrid		
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 checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 April 1963 - 31 March 1964			
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 As Chief of Station, Madrid, plans and directs all FI, and CA operations within Spain					RATING LETTER P	
SPECIFIC DUTY NO. 2 Supervises Madrid Station and Barcelona Base personnel					RATING LETTER P	
SPECIFIC DUTY NO. 3 Maintains contact with senior officials <input type="text"/>					RATING LETTER S	
SPECIFIC DUTY NO. 4 Represents the Director of CIA with the Ambassador to Spain and other U.S. officials in Spain					RATING LETTER O	
SPECIFIC DUTY NO. 5 Personally handles several sensitive operations. <input type="text"/>					RATING LETTER S	
SPECIFIC DUTY NO. 6 Supervises <input type="text"/>					RATING LETTER O	
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.					RATING LETTER S	

SECRET

(When Filled In)

SECTION C NARRATIVE COMMENTS

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.

Subject is one of the Agency's truly mature, experienced operations officers. He has had unusual operational experience in Central and South America, both in the field and in Headquarters. His activities have spanned both the FI and the CA spectrum. He has and does deal easily and graciously with high ranking officials, both American and foreign. His good sense, poise and dignity never fail to impress. He is a person of principal and high morals. He does not hesitate to express his conviction even though he may have reason to believe such convictions are not popular. He is a strong supervisor who enjoys his subordinate's respect. He is economy minded and made diligent efforts to comply with requests to economize. Mr. Noel has succeeded in creating a cohesive station in Madrid.

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
------	-----------------------

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
20 April 1964	Chief, WE/5	Fred E. Hubbard

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
5 May 64	CIWE	W. D. [Signature]

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					055292	
SECTION A			GENERAL			
1. NAME (Last) (First) (Middle) NOEL, James A.			2. DATE OF BIRTH 1911	3. SEX M	4. GRADE GS 16	5. SD D
6. OFFICIAL POSITION TITLE Chief of Station			7. OFF/DIV/BR OF ASSIGNMENT DDP/WR/Iberian Br.	8. CURRENT STATION Madrid		
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 CAREER-PROVISIONAL (See instructions - Section C) SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 22 April 1963			12. REPORTING PERIOD (From- to-) 1 April 1962-31 March 1963			
SECTION B PERFORMANCE EVALUATION						
<p>W - <u>Weak</u> 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 counselling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> 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 Direction of all FI and CA operations.					RATING LETTER S	
SPECIFIC DUTY NO. 2 Administration of Station and supervision of personnel.					RATING LETTER S	
SPECIFIC DUTY NO. 3 Direct supervision of senior ops officer <input type="text"/>					RATING LETTER S	
SPECIFIC DUTY NO. 4 Personally handles a sensitive operation of interest to another CB component.					RATING LETTER S	
SPECIFIC DUTY NO. 5 Maintains contact with senior <input type="text"/> personnel.					RATING LETTER S	
SPECIFIC DUTY NO. 6 Maintains a working relationship with the Ambassador and other U. S. officials.					RATING LETTER S	
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.					RATING LETTER S	

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

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.

Mr. Noel has ably administered a large Station and has displayed maturity, good judgment and tact in the day-to-day management and direction of Station activities and personnel. This has been achieved despite the physical location of Station staff personnel [redacted]

Under the direction of Mr. Noel a far reaching and fruitful major operational program against the high priority [redacted] has been undertaken and Madrid Station today is making a substantial contribution in good operations and good intelligence information to the over-all Agency effort. Another notable accomplishment directly attributable to Mr. Noel, and in part a reflection of his long years of service in Latin America, has been his professional handling personally of the Station operation involving [redacted]. Interested CS components have stated categorically that Madrid Station coverage of [redacted] and his activities is essential in satisfying existing intelligence requirements on [redacted].

Despite the Station's heavy diversion into [redacted] Latin American activities and [redacted] activities, Mr. Noel has encouraged the development of a long-range program involving activities against the [redacted] Communist Party and clandestine contact with the [redacted] political opposition.

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	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
19	Subject employee is in the field. Report will be shown to him upon his return to Headquarters.	
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
25 APR 1963	DC/SE	[redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I concur in above assessment.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
25 APR 1963	C/SE	William D. O'Ryan

SECRET

BAT

Recorded by
CCPD

17 April 1962

MEMORANDUM FOR: Acting Chief, WE

SUBJECT : Mr. James A. Noel
Fitness Report Covering the Period 14 August 1961 to
31 March 1962

1. Mr. Noel assumed his duties as Chief of Station, Madrid on 23 September 1961. The Station, as constituted when Mr. Noel arrived, included some [redacted] plus numerous contract personnel, as well as a [redacted]. The Madrid Station proper not only includes the Embassy installation but an outside operations section as well. Since Mr. Noel arrived the Station has been launched into a [redacted] operations program of considerable scale and on a crash basis. In addition, in this period, [redacted] and the experienced Chief of [redacted] had to be brought home due to a family emergency.

2. To date Mr. Noel has given every evidence of a particular ability to cope with the crash program and the acute shortage of personnel with judiciousness and maturity. While it is too early, yet, to pass judgement, there are indications that Mr. Noel has been preoccupied [redacted]

[redacted]

3. As indicated above, Mr. Noel has not been in place as Chief of Station long enough to justify firm reservations concerning his management, nor to permit meaningful criticism. Also, as indicated above, his outstanding noticeable strength to date has been his ability to cope with a heavy operational program, a shortage of personnel, and a sometimes difficult operational climate, with judgement, calmness and patience.

THOMAS F. THIELE
Chief, WE/5

CONCUR:

William D. O'Ryan/AC/WE

BAT

Contract Service - [Redacted]

<u>Date</u>	<u>Action</u>	<u>Compensation</u>	<u>GS Equivalent</u>
	Former Staff Employee		
4 Aug 68	Employee Career Agent with Civil Service Retirement, LPAs and PSIs.	\$26,640	GS-16/6
13 Jul 69	LPI	29,219	GS-16/6
5 Oct 69	PSI	30,054	GS-16/7
28 Dec 69	LPI	31,857	GS-16/7
10 Jan 71	LPI	33,757	"
31 Mar 71	Contract terminated (subject retired)	33,757	"

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER		2 NAME (LAST, FIRST, MIDDLE)		PREPARED: 04/16/71	
3 NATURE OF PERSONNEL ACTION CONTRACT TERMINATION (08H0000)			4 EFFECTIVE DATE MO DA YR 03 31 71		5 CATEGORY OF EMPLOYMENT CAREER AGENT (S)

6 FUNDS		7 FEDERAL AGENCY (NO. CHARITABLE)		8 EMP. OR OTHER LEGAL AUTHORITY	
Y TO Y CF TO Y		Y TO CF CF TO CF		1129-2507	

9 ORGANIZATIONAL DESIGNATIONS DDP DIRECTORATE DOMESTIC OPERATIONS DIV		10 LOCATION OF OFFICIAL STATION UNITED STATES OF AMERICA			
---	--	---	--	--	--

11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER		13 EMPLOYER SERVICE DESIGNATION	
----------------------------------	--	--------------------	--	---------------------------------	--

14 CLASSIFICATION SCHEDULE (GS, LB, etc.) (FULL TIME) GS		15 OCCUPATIONAL SERIES J-2600		16 GRADE AND STEP 16 7	
				17 SALARY OR RATE DOG: 032060 LEI: 100569	

18 PERIODS: ----- STATUS INFORMATION -----
 BIRTH DATE: * SEX: M MARITAL ST: MAR NO. DEPENDENTS: 03
 CITIZENSHIP: US/BIRTH LONGEVITY COMP: 091847 FED SERVICE COMP: 012631
 TYPE RETIREMENTS: CSC/FICA HOSPITALIZATION: F PLAN:
 FEGLI: YES PREV. GOVT SERV: 4 SAL. TASK LIMIT:
 PAY BASIS: A W/L IND: 0 S/L INC: 4

----- CONTRACT INFORMATION -----
 EFF DATE: 080768 EXPIRATION DATE: 080371 DATE ORIG CONTRACT: 080468
 REFERRING OFFICER: DDL PERSONNEL REF# GRG: B08 PHONE: 3376

----- ENTITLEMENTS/ELIGIBILITIES/ALLOWANCES -----
 TAX STAFF: Y FED EXMP: STATE EXMP: STATE:
 TRAVEL: NHN OPS EXPNSE: Y HOUSING: N FST/EQUAL: N
 HOME LEAVE: C DIFFERENTIAL: N OFFSET CLAUSE: Y STD GOVT: N
 LEGISL PAY: Y PREMIUM PAY: N ALLOWANCE COMB: N EDUCATION: N
 STEP INCRS: Y STR. TAX ENTL: N OTHER ALLOWNS: N SEPARATION: N

NOTE: ITEMS PRECEDED BY AN ASTERICK * REFLECT CHANGED DATA

SIGNATURE OR OTHER AUTHENTICATION

SECRET

7 April 1971

MEMORANDUM FOR: OF/C&TD/CAS

VIA : Contract Personnel Division

SUBJECT :
Retirement

Career Agent, retired effective 31 March 1971 under the Civil Service Retirement System. This memorandum authorizes the payment by the Office of Finance of any money due him.

Paul S. Latchford
Chief, DO Personnel

CONCUR:

/s/ Don H. Luetschell 14 APR 1971

Chief, Contract Personnel Division
Distribution:

Orig & 1 - Addressee
1 - CPD
1 - Subject's File

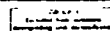
1 - DO/Pers Chrono
DO/Pers, (7 Apr 71) 3193

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET

CLEARANCE SHEET FOR TERMINATION OF CONTRACT PERSONNEL			DATE 22 March 1971	
<small>THIS FORM MUST BE SIGNED AND SUBMITTED IN DUPLICATE</small>				
PERSONAL DATA				
NAME		OFFICE AND BRANCH OF ASSIGNMENT DO Division		
LOCAL		PERMANENT ADDRESS San Diego, California		
PERMAN		POSITION OR FUNCTIONAL TITLE dOps Officer		
CONTRACT DATA				
DATE CONTRACT EFFECTIVE 8/4/68	DATE CONTRACT LAST RENEWED	DATE CONTRACT EXPIRES Indefinite	DATE OF CONTRACT TERMINATION 3/31/71	
REASON FOR CONTRACT TERMINATION Subject is retiring effective 31 March 1971.				
<small>INTERNAL STAFF OR DIVISION CLEARANCES (Add or delete as applicable)</small>				
COMPONENT	CLEARED BY	DATE	REMARKS	
FINANCE	Mr. Randall			
LOGISTICS				
PERSONNEL	Mr. Latchford			
Registry				
CONTRACT APPROVING OFFICER		CLEARED BY (Signature) Carroll L. Hauver, C/DO/80	DATE	
<small>SCHEDULE OF INTERVIEWING OFFICES (OFFICES NOT REQUIRING INTERVIEW WILL SO INDICATE)</small>				
OFFICE	<small>SCHEDULE</small>			INTERVIEWING OFFICIAL
	DATE	TIME	LOCATION	
CENTRAL COVER STAFF				CLEARED BY (Signature) DATE
OFFICE OF SECURITY PSD				CLEARED BY (Signature) DATE
OFFICE OF PERSONNEL CPD				CLEARED BY (Signature) DATE
REMARKS (Please Initial)				
APPROVED: /s/ Dow H. Luotscher Special Contracting Officer				
STAFF OR DIVISION AND BRANCH OF ASSIGNMENT DO Division		SIGNATURE OF STAFF OR DIVISION RESPONSIBLE OFFICER Paul S. Latchford, C/DO/Personnel		DATE



SECRET

8 MAR 1971

MEMORANDUM FOR: CSPS/Agent Panel
VIA : Central Cover Staff
VIA : Office of Security
VIA : CI Staff
SUBJECT : Summary of Employment
Mr. James A. Noel

Attached hereto is Mr. Noel's Summary of
Employment for approval and permanent record.

Carroll L. Hauver
Carroll L. Hauver
Chief, DO Support Group

Attachment:
As Stated

CONCURRENCE:

<u>Lawrence J. Mulhearn</u>	(CSPS Agent Panel)
<u>John J. Mulhearn</u>	(Central Cover Staff)
<u>John J. Mulhearn</u>	(Office of Security)
<u>John J. Mulhearn</u>	(CI Staff)

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

SUMMARY OF EMPLOYMENT

James A. Noel



SECRET
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST	
2. NAME (Last, First, Middle) Boel, James A. (T) Career Agent		10 February 1971	
3. POSITION TITLE Ops Officer		4. GRADE 08-16	
5. OFFICE, DIVISION, BRANCH		6. EMPLOYEE'S EXT.	
7. PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HDQS/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input type="checkbox"/> TDY STANDBY		ETA	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		San Francisco	
<input type="checkbox"/> RETURN TO DUTY		TDY OR PCS	
<input type="checkbox"/> FITNESS FOR DUTY		TYPE OF COVER	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS TO ACCOMPANY	
		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
		<input type="checkbox"/> RETURN FROM OVERSEAS	
		ETA	
		STATION	
		NO. OF DEP.'S	
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER	
<input type="checkbox"/> YES		SIGNATURE <i>[Signature]</i>	
<input checked="" type="checkbox"/> NO		ROOM NO. & BUILDING 201 Key	
		EXT. 3193	
		DC/Personnel	

10. COMMENTS	
Subject will retire effective 31 March 1971. He will come to Headquarters and be available for a medical examination on 22 March. Please schedule the medical during that week. DO is requesting approval for him to enter the Hq building.	
11. REPORT OF EVALUATION	
Qualified Executive Annual	
DATE	SIGNATURE FOR CHIEF OF MEDICAL STAFF
31 March 1971	<i>[Signature]</i> OMS/pro

1. SERIAL NO.		2. NAME (Career Agent)		3. ORGANIZATION DDP/DO		4. FUNDS CF		5. LWOP HOURS .	
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS-16	6	\$29219	10/08/67	GS-16	7	\$30054	10/05/69	X	
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
						28 Oct 69			
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS						AUDITED BY			
						<i>[Signature]</i> 13 Oct 69 (4 31)			
FORM 7-60 560 E Use previous editions PAY CHANGE NOTIFICATION									

WVDM

[]

22 April 1969

MEMORANDUM FOR: OP/PAB

SUBJECT : - Career Agent

Attached is a copy of USFT-1477 dated 4 April 1969
in which subject requests cancellation of his optional
FEGLI plan to be effective 3 May 1969.

/s/
Virginia C. Lynch
Chief, DO Personnel and Training

Attachment: USFT-1477 and authorization

CC - OP/C&ED/BAAS
CED

SEARCHED
SERIALIZED
INDEXED
FILED
APR 23 1969
FBI - WASH DC

OK
1/24

DISPATCH

CLASSIFICATION
S E C R E T

PROCESSING ACTION

TO Chief, Domestic Operations

MARKED FOR INDEXING

INFO.

NO INDEXING REQUIRED

FROM Chief of Base, [redacted]

ONLY QUALIFIED DESK CAN JUDGE INDEXING

SUBJECT ISOLOG/ADMIN [redacted] -Life Insurance Coverage

MICROFILM

ACTION REQUIRED - REFERENCES

Reference: USFT-1303 dated 29 February 1968 *me*

Forwarded under separate cover is a memorandum from [redacted] requesting cancellation as of 3 May 1969 of the \$10,000 optional life insurance coverage under FEGLI which he elected to take in 1968 per the reference. Please forward the memorandum to the Insurance Branch for appropriate action.

Originated by [redacted]

Attachment:
Memorandum a/s/a, 2 copies USC

Distribution:
2 - Chief, DO w/attachment

CROSS REFERENCE TO

DISPATCH SYMBOL AND NUMBER

DATE

USFT-1477

4 April 1969

CLASSIFICATION

WGS FILE NUMBER

S E C R E T

4 April 1969

MEMORANDUM

TO :

FROM : James A. Noel

SUBJECT : \$10,000 Optional Insurance

This memorandum is authorization to cancel the \$10,000 additional optional life insurance coverage under the Federal Employees Group Life Insurance Program which I elected to take in February 1968. I request that this cancellation be effective as of 3 May 1969.


James A. Noel

5 August 1968

MEMORANDUM FOR: OP/PAB

SUBJECT :

Career Agent - Employee No.

Subject converted from Staff Employee to Career Agent status effective 4 August 1968. Attached is his FEOLI application signed in pseudonym.

Virginia C. Lynch
Chief, DO Personnel and Training

Attachment: A/B

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

- 1 FOLLOW THESE GENERAL INSTRUCTIONS:**
- Read the back of the "Duplicate" carefully before you fill in the form.
 - Fill in BOTH COPIES of the form. Type or use ink.
 - Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here if you **WANT BOTH** optional and regular insurance

(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE
I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here if you **DO NOT WANT** OPTIONAL but do want regular insurance

(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE
I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here if you **WANT NEITHER** regular nor optional insurance

(C)

WAIVER OF LIFE INSURANCE COVERAGE
I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4 SIGN AND DATE. IF YOU MARKED BOX "A" OR "C", COMPLETE THE "STATISTICAL SUB." THEN RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.

SIGNATURE (do not print)

DATE

18 July 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

Aug 8 11 15 AM '68
COAST PERS DIV

See Table of Effective Dates on back of Original.

DUPLICATE COPY—For Agency Use

S E C R E T

6 Aug 68

MEMO FOR: The File

SUBJECT : Service
Computation Date

1. On his SF-144 dated 31 July 68 subject claimed following creditable service:

Service	From	To
Dept of State	26 Jan 31	15 Aug 44
OSS/SSJ/CIG	16 Aug 44	17 Sep 47
CIA Staff Employee	18 Sep 47	3 Aug 68
CIA Career Agent	4 Aug 68	date

2. Subject has had continuous service from 26 Jan 1931. Accordingly, this date was set as subject's SCD. Review of subject Staff Employee file this date ~~found~~ found that the Staff Employee file also cited subject's SCD as being 26 Jan 1931.

Paul Wilson

*WLP
3/5/71*

S E C R E T

[REDACTED]

Dear [REDACTED]

The United States Government, as represented by the Contracting Officer, hereby contracts with you for your services as a Career Agent under the following terms and conditions:

1. Status. Your status is that of a Government employee under contract and, as such, your rights and benefits are governed by the provisions of this agreement. It is specifically understood that you are not entitled to rights and benefits pertaining to appointed staff status, except as provided herein.

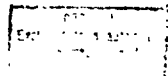
[REDACTED]

3. Compensation. For your services as a Career Agent, you will be compensated at a basic salary of \$26,640 per annum, the equivalent of a GS-16/6. In addition you will be entitled to legislative pay adjustments and within grade promotions in substantial conformance with rules and regulations applicable to Government appointed employees.

4. Funding. If necessary to protect the security of this arrangement, monies due you hereunder may be funded in other than a direct manner. It is understood and agreed that any monies so funded constitute payment by the Government in satisfaction of its obligations under this agreement.

5. Taxes. As a Career Agent, monies paid you under paragraph three (3) above constitute taxable income for Federal tax purposes and you must satisfy your Federal tax liability thereon. Such income may be paid you by or through a cover facility. Because of cover, operational, and security considerations the Tax Committee of this organization is authorized to make certain determinations and establish procedures (including tax withholdings) which will result in the full satisfaction of your Federal income and Social Security tax obligations. It is specifically understood and agreed that such determinations and procedures, whether oral or written, constitute an integral part of this contract and are legally incorporated herein by reference.

SECRET



6. Travel. You will be advanced or reimbursed funds for necessary expenses incurred in connection with such operational travel as may be directed or authorized by this organization. This may include per diem in lieu of subsistence in the course of such travel and while on temporary duty away from your post of assignment. All travel, transportation and per diem provided for under this paragraph must be properly authorized, and expenses incurred hereunder are subject to payment and accounting in compliance with applicable Government regulations, or according to the established policies of your cover facility, whichever is directed by the Government.

7. Operational Expenses. You will be advanced or reimbursed funds for necessary operational expenses including, but not limited to, entertainment and the purchase of information, as specifically approved by the Government or your cover facility. Such funds will be subject to payment and accounting in substantial compliance with applicable Government regulations or according to the established policies of your cover facility, whichever is directed by the Government.

8. Repayment. It is recognized that your failure to account for or refund any monies advanced you hereunder shall entitle the Government to withhold the total amount of such indebtedness or any portion thereof from any monies due you under the terms of this contract in such manner as it deems appropriate.

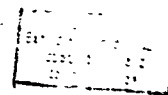
9. Benefits. By virtue of your employment relationship with the Government hereunder, you are herein authorized:

(a) Coverage under the Federal Employees' Compensation Act, as amended. Claims by you, your heirs or legal representatives under this Act will be processed by this organization in accordance with its procedures in such manner as not to impair security.

(b) Continued participation in the Civil Service Retirement System in conformance with rules and regulations applicable to appointed employees of this organization. From the basic compensation paid you hereunder there shall be deducted the appropriate rate percentage (presently 6-1/2%) for deposit and eventual crediting to the Civil Service Retirement Fund. Social Security deductions required by virtue of your cover activities will not be reimbursed you by this organization.

(c) Continuation of your present coverage under the Federal Employees' Health Benefits Act. This organization is presently authorized to bear a portion of the premium cost, you will bear the remainder. Your financial contribution will be effected either by payroll deduction or by direct remittance at periodic intervals to be established by this organization.

SECRET



(d) Continued coverage under the Federal Employees' Group Life Insurance Act unless you have previously executed a written waiver of said coverage. This organization is presently authorized to bear a portion of the premium cost, you will bear the remainder. Your financial contribution will be effected either by payroll deduction or by direct remittance at periodic intervals to be established by this organization.

(e) Sick and annual leave equal to and subject to the same rules and regulations applicable to Government appointed employees. Annual leave may only be taken at times and places approved in advance by appropriate Government representatives. All accrued but unused leave credited to your former account as an appointed employee of this organization will be transferred to the leave account established for you under this agreement.

10. Offset. Emoluments (including benefits in kind) received from or through your cover activities are the property of the U. S. Government. Procedurally, such emoluments will be offset against amounts due you under this agreement and are acknowledged to be payment by the Government hereunder and for Federal income tax purposes. You will render signed reports to this organization, every six (6) months, indicating all cover emoluments received during the reporting period. Negative reports covering the same period will be submitted if no cover emoluments are received. Failure to submit timely reports may result in suspension of any contractual payments due you hereunder. If cover emoluments exceed those due you under this contract, you will dispose of the excess amount in conformance with Governmental instructions.

11. Execution of Documents. If, in the performance of services under this contract, you assume the custody of Government funds or take title of record to property of any nature whatsoever and wherever situate, which property has in fact been purchased with monies of the U. S. Government, you hereby recognize and acknowledge the existence of a trust relationship, either express or constructive, and you agree to execute whatever documents may be required by the Government to evidence this relationship.

12. Secrecy. (a) You will be required to keep forever secret this contract and all classified information which you may obtain by reason hereof (unless released in writing by the Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the espionage laws of the United States and other applicable laws and regulations.

(b) In the event you marry or remarry during the term of this contract, you agree to advise this organization at least one hundred twenty (120) days in advance of such contemplated marriage, or otherwise as soon as known, and to furnish such personal history data on your prospective spouse as may be required by this organization. You understand and agree that should this organization determine that your marriage would limit or otherwise impair your usefulness to the Government, this contract may be terminated.

SECRET

13. Instructions. Instructions received by you from the Government in briefing, training or otherwise are a part of this contract and are incorporated herein, provided that such instructions are not inconsistent with the terms hereof.

14. Reassignments. During your period of service under this agreement, it may be necessary for this organization to terminate an assignment for reasons beyond your control. In such event, you will be given every consideration for other assignments appropriate to Career Agents.

15. Unauthorized Commitments. No promises or commitments pertaining to rights, privileges or benefits other than those expressly stipulated in writing in this agreement or any amendment thereto shall be binding on the Government. Specifically, you herein acknowledge that this organization makes no commitment, either express or implied, that appointed employment status will be offered you at the conclusion of or during your period of contractual service.

16. Term. This contract is effective as of 4 Aug 68, and shall continue thereafter until your retirement from the organization upon reaching age sixty (60) unless sooner terminated:

(a) Upon ninety (90) days' actual notice by either party hereto, or

(b) Upon actual notice to you in the event the results of an initially required medical examination are determined by this organization to be unsatisfactory, or

(c) Without prior notice by the Government, in the event of a breach of this contract by your violation of the security provisions hereof or by your otherwise rendering yourself unavailable for acceptable service.

Termination of this agreement will not release you from the obligations of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY _____
Contracting Officer

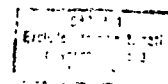
ACCEPTED:

Cecil J. Klobukar

WITNESS: _____

APPROVED: _____

JLW
EVJ J. K.
930 J. J. 68



SECRET

19 July 1968

MEMORANDUM FOR: Chief, CSPA
ATTENTION: Chief, Agent Branch
SUBJECT: Conversion to Career Agent Status
James A. Noel - GS-16

1. Transmitted herewith are the following documents in connection with subject's conversion to Career Agent status:

Contract Check List (3)

Biographic Profile (9)

Latest Fitness Report (9)

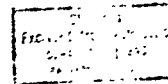
2. The Request [redacted] form has been sent to Chief, Central Cover Staff for consideration. Action is being held up pending subject's TDY at headquarters, on or about 29 July 1968. Appropriate modifications will be worked out with CCS at that time.

3. Subject will convert at his current salary, GS-16/6 and will be assigned to the San Francisco area, [redacted] engaged in spotting, assessing, recruiting and handling agents. The effective date of his contract will be determined following discussions with Mr. Noel during his TDY.

W. T. Montgomery
W. T. MONTGOMERY
Chief, DO Support Group

Attachments:
as stated above

SECRET



Complete all items, including "NA" when listed as not applicable. Forward original and 100 copies for preparation of contract.

11- 1096

19 March 68

SECTION I GENERAL			
1. NAME <input checked="" type="checkbox"/> PSEUDO <input type="checkbox"/> TRUE		3. ALLOTMENT NO.	4. SLOT NO.
20. PERMANENT STATION San Francisco, Calif.		3A. FUNDS	
		v <input checked="" type="checkbox"/> v	
5. ALIASES		6. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If yes, describe and include dates and salary.) \$24,477.00 (GS-16 step 6) Staff from Sept. 1967 to present XXXXXXXXXXXXXXXXXXXX	
7. SECURITY CLEARANCE (Type and date) Conv. app. 3 Apr 68		7A. MEDICAL CLEARANCE <input checked="" type="checkbox"/> OBTAINED <input type="checkbox"/> INITIATED <input type="checkbox"/> NOT REQ'D.	8. CONTRACT IS TO BE WRITTEN IN STERILE FORM I.E., "U.S. GOVERNMENT" <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
9. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input type="checkbox"/> YES <input type="checkbox"/> NO		10. PROPOSED CATEGORY (Contract agent, contract employee, etc.) CAREER AGENT	
SECTION II PERSONAL DATA			
11. CITIZENSHIP USA	12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input type="checkbox"/> NO	13. AGE	14. DATE OF BIRTH (Month, day, year)
15. LEGAL RESIDENCE (City and state or country)		16. CURRENT RESIDENCE (City and state or country) Calif.	
17. MARITAL STATUS (Check as appropriate). <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED			
18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE: Wife Son Son		19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input type="checkbox"/> NO RELATIONSHIP:	
SECTION III U.S. MILITARY STATUS			
20. RESERVE	21. VETERAN	22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)	
23. BRANCH OF SERVICE	24. RANK OR GRADE	25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input type="checkbox"/> NO	26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input type="checkbox"/> NO
SECTION IV COMPENSATION			
27. BASIC SALARY \$26,640* XXXXXXXXXXXXXXXXXXXX \$26,640.00 (GS-16 step 6)	28. POST DIFFERENTIAL	29. COVER (Breakdown, if any)	30. FEDERAL TAX WITHHOLDING
			COVER CIA
			YES YES
			NO NO
SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)			
31. QUARTERS	32. POST	33. OTHER	
34. COVER (Breakdown, if any)			
SECTION VI TRAVEL			
35. TYPES <input type="checkbox"/> PCS <input checked="" type="checkbox"/> DOMESTIC OPERATIONAL <input checked="" type="checkbox"/> FOREIGN OPERATIONAL			36. WITH DEPENDENTS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
37. HME TO BE SHIPPED	37A. HME TO BE STORED	38. PERSONAL VEHICLE TO BE SHIPPED	39. TRANSPORTED VEHICLE TO BE USED FOR OPERATIONAL TRAVEL
YES NO	YES NO	YES NO	YES NO
40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH			
<p>*Salary includes IPI - 14 July 1968</p> <p><i>Compensation appears wrong (1) time base type of base, 1/1/68</i></p>			
41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS a/o <input checked="" type="checkbox"/> COVER POLICIES AND PROCEDURES			
SECTION VII OPERATIONAL EXPENSES			
2. PURCHASE OF INFORMATION	43. ENTERTAINMENT	44. OTHER	
yes	yes	as authorized	
5. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS a/o <input checked="" type="checkbox"/> COVER POLICIES AND PROCEDURES			

CONTRACT INFORMATION AND CHECK LIST
(CONTINUED)

Laurens H. Montgomery
TELEPHONE EXTENSION
11-5 042

DATE
10 March 1955

NOTE: SEE INSTRUCTIONS ON FIRST SHEET

SECTION VIII OTHER BENEFITS
46. BENEFITS (See H 20-615, H 20-620, H 20-670, H 20-1000, and HB 20-620-1, HB 20-1000-1 and/or successor regulations for benefits applicable to various categories of contract personnel.)

ALL CAREER AGENT BENEFITS

SECTION IX COVER ACTIVITY
47. STATUS (Check) PROPOSED ESTABLISHED
48. TYPE (Check) PROPRIETARY CULTURAL COMMERCIAL TOURIST
 SUBSIDIZED EDUCATIONAL MILITARY OTHER
49. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS
 YES NO COMPLETE PARTIAL

SECTION X OFFSET OF INCOME
50. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.)
 TOTAL PARTIAL NONE

SECTION XI TERM
51. DURATION: DAYS, MONTHS, YEARS
52. EFFECTIVE DATE
53. RENEWABLE YES NO
54. TERMINATION NOTICE (Number of days) 90 days
55. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION YES NO

SECTION XII FUNCTION
56. PRIMARY FUNCTION (CI, PI, PP, other) FI

SECTION XIII DUTIES
57. GENERAL DESCRIPTION OF DUTIES TO BE PERFORMED
Spotting, assessing, recruitment and handling of agents in San Francisco.

SECTION XIV QUALIFICATIONS
58. EXPERIENCE
Staff

59. EDUCATION (Check Highest Level Attained)
GRADE SCHOOL HIGH SCHOOL GRADUATE TRADE SCHOOL GRADUATE
BUSINESS SCHOOL GRADUATE COMMERCIAL SCHOOL GRADUATE
COLLEGE (No degree) COLLEGE DEGREE POST GRADUATE MA PHD
60. LANGUAGE COMPETENCY (Check Appropriate Degree Competency)
LANGUAGE: Spanish
SPEAK: FLUENT, AVERAGE, POOR
WRITE: Inter.
READ: High
61. INDIVIDUAL'S COUNTRY OF ORIGIN

62. AREA KNOWLEDGE

SECTION XV EMPLOYMENT PRIOR TO CIA
63. GIVE INCLUSIVE DATES, POSITION TITLE OR TYPE WORK, SALARY AND REASON FOR LEAVING
1931-36 State Dept., Mexico - Vice-Consul (Ensenada)
1938-41 " " " " " (Nazathen)
1941-44 " " " " " (Guadalajara)
1944-47 OCS/SSU/CIC, Spain and Guatemala - Chief of Station

SECTION XVI ADDITIONAL INFORMATION
64. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)

APPROVAL
65. TYPED NAME & SIGNATURE OF REQUESTING OPERATING OFFICIAL: Virginia C. Lynch, C/DO/Pers & Trng
DATE
TYPED NAME & SIGNATURE OF CONTRACT APPROVING OFFICER: W. T. MONTGOMERY, C/DO/SG