

GOVERNMENT PRINTING OFFICE: 1961 O - 541,000
Federal Personnel Manual, Ch. 209

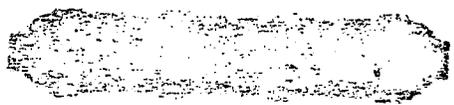
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Official Personnel Folder

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BIOGRAPHIC PROFILE

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

FOX, JEROME
PO Box 593514 AMF
M. AM, FL 33159

Ret. in 75

23 February 1977

Mr. Jerome Fox
P.O. Box 593514 AMF
Miami, Florida 33159

Dear Mr. Fox:

Enclosed is correspondence received in the Agency to be forwarded to you. Pursuant to the Privacy Act of 1974, we have made no response. In accordance with our policy, the request is mailed to you for any personal attention you wish to give it.

Sincerely,

/s/

Abraham Schwartz
Chief, Control Division

Dist.
Orig. - Adsp.
1 - TRB
1 - OFF/FOX, Jerome
OP/TRB/PCS/GSmith:isa(23Feb77)

UNCLASSIFIED

INTERNAL USE ONLY

CONFIDENTIAL

SECRET

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:

Glenn D. Smith *GD*

EXTENSION

NO

5695

DATE

02/22/77

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.

OC/TRB

2.

3.

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7.

8.

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10.

11.

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13.

14.

15.

Mr. Jerome Fox
P. O. Box 593514 AMP
Miami, FL 33159

Dear Mr. Fox:

Enclosed is correspondence received in the Agency to be forwarded to you. Pursuant to the Privacy Act of 1974, we have made no response. In accordance with our policy, the request is mailed to you for any personal attention you wish to give it.

Sincerely,

410

SECRET

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UNCLASSIFIED

21 MAY 1975

Mr. Jerome Fox



Dear Mr. Fox:

I am happy to send to you, under separate cover, your Agency Retirement Medallion. The Medallion is a tangible form of recognition and appreciation of your service to the Agency. It should serve as a lasting reminder of an honorable career, rewarding associations and the knowledge that you played your part in a vital activity.

Let me, therefore, add my congratulations and wish you the very best for the future.

Sincerely,

F. W. M. Jarney
Director of Personnel

75-6735

21 APR 1975

Mr. Jerome Fox



Dear Mr. Fox:

As you bring to a close your active career of service to your country, I join your friends and colleagues in wishing you well in your retirement.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I extend to you my sincere appreciation for the important work you have done.

Sincerely,

W. E. Colby
Director

Distribution:

0 - Addressee
1 - OPE

Originator:

W. E. Colby
Director of Personnel

OP/RAD/ROB/JF:latko:jat/3287 (25 April 1975)

21 APR 1975

DLH: 23 MAY 75

NOTIFICATION OF PERSONNEL ACTION

REF

1. SERIAL NUMBER 317374		2. NAME (LAST FIRST MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION (DISABILITY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM FROM RSL			4. EFFECTIVE DATE MO DA YR 05 15 75
5. CATEGORY OF EMPLOYMENT REGULAR			6. CK, OR OTHER LEGAL AUTHORITY
7. FUNDS: <input checked="" type="checkbox"/> V TO V	<input type="checkbox"/> V TO CP	7. PAN AND NSCA 5237 1332 0044	8. CK, OR OTHER LEGAL AUTHORITY PI 88-643 SACT 231
<input checked="" type="checkbox"/> CP TO V	<input type="checkbox"/> CP TO CP	9. ORGANIZATIONAL DESIGNATIONS	
11. POSITION TITLE OPS OFFICER		10. LOCATION OF OFFICIAL STATION	
12. CLASSIFICATION SCHEDULE (E, G, GS)		13. POSITION NUMBER JCDP	14. SERVICE DESIGNATION JAC
15. OCCUPATION SERIES 0136, 31		16. GRADE AND STEP 13 6	17. SALARY OR RATE 75451
18. REMARKS			
SIGNATURE OR OTHER AUTHENTICATION			

SECRET

(U.S. Gov. Form No. 1)

REQUEST FOR PERSONNEL ACTION		DATE PREPARED																																		
1. MEMO NUMBER 017974		2. NAME (Last-First-Middle) FOX, JEROME																																		
3. NATURE OF PERSONNEL ACTION RETIREMENT - DISABILITY - CIARDS FROM EXTENDED SICK LEAVE		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 14 75																																		
5. PAY AND ASSA 5237-1392-0000		6. CATEGORY OF EMPLOYMENT REGULAR																																		
7. ORGANIZATIONAL DESIGNATIONS DDO/EA-DIVISION DEVELOPMENT COMPLEMENT		8. LEGAL AUTHORITY (Cite Title of Public Law 88-643, Section 231)																																		
9. POSITION TITLE OPS OFFICER		10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.																																		
11. CLASSIFICATION SYMBOL (G.S. I.D. #)		12. CAREER SERVICE DESIGNATION																																		
13. OCCUPATIONAL SERIES 0136.01		14. GRADE AND STEP 13/6																																		
15. REMARKS LWD: 6 SEPTEMBER 1974 Co-ordinated with Frank Driscoll/ROB 22 May 1975. CMG/MSB: <i>[Signature]</i> ROB: _____		16. SALARY OR RATE \$ 25,451 ✓																																		
17. SIGNATURE OF EMPLOYEE OFFICIAL MICHAEL PAVYLAN, CIA/PEPS		18. SIGNATURE OF CAREER MOVE APPROVING OFFICER <i>[Signature]</i>																																		
DATE SIGNED 5/15/75		DATE SIGNED 6/17/75																																		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																				
<table border="1"> <tr> <td>19. ACTION CODE</td> <td>20. PAY CODE</td> <td>21. GRADE CODE</td> <td>22. PAY RATE</td> <td>23. PAY STEP</td> <td>24. PAY BAND</td> <td>25. PAY POINT</td> <td>26. PAY RANGE</td> <td>27. PAY TABLE</td> <td>28. PAY PLAN</td> <td>29. PAY PLAN CODE</td> <td>30. PAY PLAN DESCRIPTION</td> <td>31. PAY PLAN EFFECTIVE DATE</td> <td>32. PAY PLAN EXPIRES DATE</td> <td>33. PAY PLAN STATUS</td> <td>34. PAY PLAN ACTION</td> <td>35. PAY PLAN COMMENTS</td> </tr> <tr> <td>01</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> <td>00</td> </tr> </table>			19. ACTION CODE	20. PAY CODE	21. GRADE CODE	22. PAY RATE	23. PAY STEP	24. PAY BAND	25. PAY POINT	26. PAY RANGE	27. PAY TABLE	28. PAY PLAN	29. PAY PLAN CODE	30. PAY PLAN DESCRIPTION	31. PAY PLAN EFFECTIVE DATE	32. PAY PLAN EXPIRES DATE	33. PAY PLAN STATUS	34. PAY PLAN ACTION	35. PAY PLAN COMMENTS	01	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00	00
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<p>SECRET</p> <p>1157</p> <p>63-00001-01-01</p>																																				

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
3 September 1974

1. SERIAL NUMBER 017974		2. NAME (Last-First-Initial) Fox, Jerome	
3. NATURE OF PERSONNEL ACTION Extended Sick Leave Pending Disability Retirement NTE: 14 MAY 75			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 08 74
5. FUNDS X V TO V O TO V O TO O		6. CATEGORY OF EMPLOYEE Regular	
7. PAN AND NSCA 5237-1392 0000		8. LOCAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATION DDO/EA Division Development Complement		10. LOCATION OF OFFICIAL STATION Wash., D. C.	
11. POSITION TITLE Ops Officer		12. POSITION NUMBER 9997	13. CAREER SERVICE DESIGNATION DMG
14. CLASSIFICATION SYMBOL (A.S. L.R. etc.) GS	15. OCCUPATIONAL SERIES 0138.01	16. GRADE AND STEP 13 0	17. SALARY GRADE 24,122
18. REMARKS			

LWD: 6 September 1974

HB: EA

Pending Disability Retirement

Reassigned from DDO/EA/JK/K Position 4408

Kathleen R. Ball
MSB/MP

*CTHR

124. SIGNATURE OF REQUESTING OFFICIAL <i>Robert E. Brown</i>	DATE SIGNED <i>9/10/74</i>	125. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Jessie...</i>	DATE SIGNED <i>6 Sept 74</i>
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F 42

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. AGENCY USE ONLY	20. AGENCY USE ONLY	21. AGENCY USE ONLY	22. AGENCY USE ONLY	23. AGENCY USE ONLY	24. AGENCY USE ONLY	25. AGENCY USE ONLY	26. AGENCY USE ONLY	27. AGENCY USE ONLY	28. AGENCY USE ONLY	29. AGENCY USE ONLY	30. AGENCY USE ONLY	31. AGENCY USE ONLY	32. AGENCY USE ONLY	33. AGENCY USE ONLY	34. AGENCY USE ONLY	35. AGENCY USE ONLY	36. AGENCY USE ONLY	37. AGENCY USE ONLY	38. AGENCY USE ONLY	39. AGENCY USE ONLY	40. AGENCY USE ONLY	41. AGENCY USE ONLY	42. AGENCY USE ONLY	43. AGENCY USE ONLY	44. AGENCY USE ONLY	45. AGENCY USE ONLY	46. AGENCY USE ONLY	47. AGENCY USE ONLY	48. AGENCY USE ONLY	49. AGENCY USE ONLY	50. AGENCY USE ONLY	51. AGENCY USE ONLY	52. AGENCY USE ONLY	53. AGENCY USE ONLY	54. AGENCY USE ONLY	55. AGENCY USE ONLY	56. AGENCY USE ONLY	57. AGENCY USE ONLY	58. AGENCY USE ONLY	59. AGENCY USE ONLY	60. AGENCY USE ONLY	61. AGENCY USE ONLY	62. AGENCY USE ONLY	63. AGENCY USE ONLY	64. AGENCY USE ONLY	65. AGENCY USE ONLY	66. AGENCY USE ONLY	67. AGENCY USE ONLY	68. AGENCY USE ONLY	69. AGENCY USE ONLY	70. AGENCY USE ONLY	71. AGENCY USE ONLY	72. AGENCY USE ONLY	73. AGENCY USE ONLY	74. AGENCY USE ONLY	75. AGENCY USE ONLY	76. AGENCY USE ONLY	77. AGENCY USE ONLY	78. AGENCY USE ONLY	79. AGENCY USE ONLY	80. AGENCY USE ONLY	81. AGENCY USE ONLY	82. AGENCY USE ONLY	83. AGENCY USE ONLY	84. AGENCY USE ONLY	85. AGENCY USE ONLY	86. AGENCY USE ONLY	87. AGENCY USE ONLY	88. AGENCY USE ONLY	89. AGENCY USE ONLY	90. AGENCY USE ONLY	91. AGENCY USE ONLY	92. AGENCY USE ONLY	93. AGENCY USE ONLY	94. AGENCY USE ONLY	95. AGENCY USE ONLY	96. AGENCY USE ONLY	97. AGENCY USE ONLY	98. AGENCY USE ONLY	99. AGENCY USE ONLY	100. AGENCY USE ONLY
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9/12/74

SECRET

FORM NO. 100-10 (Rev. 1-73)

100-10

SUMMARY OF AGENCY EMPLOYMENT

Mr. Jerome Fox

1955-1962: Economic Analyst - Conducted research and analysis including statistical studies of Sino-Soviet Bloc production of military equipment and related materials. Duties included the collection of economic intelligence information; briefings and debriefings; training of human sources in Latin America and Asia; the preparation of inter-departmental studies and the development of technical devices to aid in the collection of economic intelligence.

1963-1974: Intelligence Operations Officer - Served in various staff, supervisory and liaison capacities on U.S. and Asian area assignments. Was primarily concerned with the collection, evaluation and reporting of high priority intelligence of national interest including economic, political, social and military aspects of nations where assigned. Conducted liaison with foreign government officials, law enforcement officers, senior military officers, influential businessmen and an array of socio-political and religious leaders who had knowledge of interest to the U.S. Government and some of whom were in a position to influence their governments and mold public opinion in support of U.S. foreign policy objectives.

Supervised a staff of as many as 10 Americans and foreign nationals and provided guidance and assistance to colleagues involved in similar activities. At various times was responsible for the staffing, budgeting and management of major programs and projects.

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
9 September 1974

1. SERIAL NUMBER: 017974
2. NAME (Last-First-Middle): Fox, Jerome

3. NATURE OF PERSONNEL ACTION: Reassignment
4. EFFECTIVE DATE REQUESTED: 09 05 74
5. CATEGORY OF EMPLOYMENT: Regular

6. FUNDS: X V TO V, Q TO V
7. FAN AND NSCA: 5237-1392 0000
8. LEGAL AUTHORITY (Complied by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS: DDO/EA Division Development Complement
10. LOCATION OF OFFICIAL STATION: Washington, D.C.

11. POSITION TITLE: Ops Officer
12. POSITION NUMBER: 9997
13. CAREER SERVICE DESIGNATION: CMG

14. CLASSIFICATION SCHEDULE (GS, LP, AC): GS
15. OCCUPATIONAL SERIES: 0136-01
16. GRADE AND STEP: 13 6
17. SALARY OR RATE: 24,122

18. REASON: *HB:EA
Reassigned from: DDO/EA/JK/K Position #4408
Pending Disability Retirement
*OTHER

18A. SIGNATURE OF REQUESTING OFFICIAL: Robert E. Pavlyak
18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [Signature]
DATE SIGNED: 9/10/74
DATE SIGNED: 11 Sept 74

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE: 37	20. EMPLOY CODE: 18	21. OFFICE CODES: 45717 EA	22. STATION CODE: 75013	23. UTILITY CODE: 1	24. MONTHS: 10	25. DATE OF BIRTH: 09 28	26. DATE OF GRADE: [] [] []	27. DATE OF LEI: [] [] []
28. RET. EXPIRES: [] [] []	29. SPECIAL INCENTIVE: [] [] []	30. RETIREMENT DATA: [] [] []	31. SEPARATION DATA CODE: [] [] []	32. CORRECTION/CALCULATION DATA: [] [] []	33. SECURITY RES. NO.: [] [] []	34. SEC: [] [] []	FOD DATA	
35. PREVIOUS: [] [] []	36. SERV. COMP. DATE: [] [] []	37. LONG. COMP. DATE: [] [] []	38. CAREER CATEGORY: [] [] []	39. HEALTH/HEALTH INSURANCE: [] [] []	40. SOCIAL SECURITY NO.: [] [] []			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE: [] [] []	42. LEAVE CAT.: [] [] []	43. FEDERAL TAX DATA: [] [] []	44. STATE TAX DATA: [] [] []					

45. POSITION CONTROL CERTIFICATION: [Signature] 9/10/74
46. OFF APPROVAL: [Signature] 9/10/74

FORM 1152 1-72

USE PREVIOUS EDITION

SECRET

CLASSIFIED BY 01-0332

11-7 APR 68

ADMINISTRATIVE

6 SEP 1974

MEMORANDUM FOR : Mr. Jerome Fox
THROUGH : Head of D Career Service
SUBJECT : Notification of Approval of Disability Retirement

1. This is to inform you that the Director of Personnel has approved your request for disability retirement under the CIA Retirement and Disability System. On the basis of medical evidence, the Director of Personnel has determined that your disability is of a permanent nature; therefore, no further medical review of your case will be required.

2. Your retirement will become effective 14 May 1975, the expiration date of your accrued sick leave. You may be assured that every effort will be made to expedite delivery of your first check following completion of the administrative details required to effect your retirement.

Ronald Gage
Chief
Retirement Affairs Division

Distribution:
0 - Addressee
1 - D Career Service
1 - OMS
1 - CPF
1 - ROB Soft File
1 - ROB Reader

OP/RAD/ROB/WF Madigan:jat/3257 (5 September 1974)

ADMINISTRATIVE
INTERNAL USE ONLY

2 JUL 1974

MEMORANDUM FOR : Chairman, Board of Medical Examiners

SUBJECT : Request for Medical Evaluation -
Mr. Jerome Fox

1. Subject, a participant in the CIA Retirement and Disability System, has applied for disability retirement under the provisions of Section 231 of Public Law 88-643, Central Intelligence Agency Retirement Act of 1964 for Certain Employees. It is requested that a medical examination be arranged for Subject and that a written report of the Board of Medical Examiners as prescribed in paragraph f.(4) of HR 20-50 be submitted to the Director of Personnel.
2. Attached are copies of the Supervisor's Statement and the Application for Disability Retirement. The Office of Personnel has been advised by the Office of Medical Services that a private physician's statement has been forwarded directly to them.
3. Mr. Fox will remain on duty pending a decision on his application for retirement.

R. L. Austin, Jr.
Deputy Director of Personnel
for Special Programs

Attachments:

- a. Supervisor's Statement
- b. Application

Distribution:

- 0 & 1 - Addressee
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB F nder

ADMINISTRATIVE
INTERNAL USE ONLY

OP/RAD/ROB/WF Madigan:jat/3257 (28 June 1974)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

3 JANUARY 1974

1. SERIAL NUMBER 017974	2. NAME (Last-First-Middle) FOX, JEROME
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3. NATURE OF PERSONNEL ACTION REASSIGNMENT	4. EFFECTIVE DATE REQUESTED MONTH: 01 DAY: 20 YEAR: 74	5. CATEGORY OF EMPLOYMENT REGULAR
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6. FUNDS X V TO V O TO O	7. FINANCIAL ANALYSIS NO. (PHAROSABLE) 4237-1374-0000	8. LEGAL AUTHORITY (Completed by Office of Personnel)
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9. ORGANIZATIONAL DESIGNATIONS DDO/EAST ASIA DIVISION JAPAN AND KOREA BRANCH KOREA SECTION	10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.
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11. POSITION TITLE OPS OFFICER	12. POSITION NUMBER 13	13. CAREER SERVICE DESIGNATION D
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14. CLASSIFICATION SYMBOL (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 6	17. SALARY OR RATE \$-24,122
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18. REMARKS
FROM: EA/PMI #4024

19A. SIGNATURE OF REQUESTING OFFICER <i>Ernest L. Hardt</i> ERNEST L. HARDT, CFA/PERS	DATE SIGNED 1/10/74	19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Paul R...</i> Paul R...	DATE SIGNED 7 Jan 74
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 3710	20. EMPLOY CODE 4500	21. OFFICE CODING ALPHABETIC EA	22. STATION CODE 7003	23. INTEGRITY CODE	24. POSTS CODE	25. DATE OF BIRTH MO. DA. YR. 1 10 09 28	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. NTE CLASSES MO. DA. YR.	29. SPECIAL REFERENCE -AC -ORIG -FILE -OTHER	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	EOD DATA →		33. SECURITY REQ. NO.	34. SER
35. VET. PREFERENCE CODE A - NONE B - 5 YR. C - 10 YR.	36. SERV. COMP. DATE MO. DA. YR.	37. LONG. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CAP. APT. CODE PROV. TEMP. CODE	39. FEEDBACK/HEALTH INSURANCE CODE 1 - FEEDBACK 2 - 280/077 3 - HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
41. FEDERAL CIVILIAN GOVERNMENT SERVICE CODE 1 - 25 PERIODS SERVICE 1 - 25 PERIODS SERVICE 1 - 25 PERIODS SERVICE (LESS THAN 3 YEARS) 1 - 25 PERIODS SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO	44. STATE TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO	45. POSITION CONTROL CERTIFICATION				

45. POSITION CONTROL CERTIFICATION <i>WCB 1-8-74</i>	46. C.F. APPROVAL <i>William B...</i>	DATE APPROVED 1-9-74
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FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
2 OCTOBER

1. SERIAL NUMBER
017974

2. NAME (Last - First - Middle)
FOX, JEROME

3. NATURE OF PERSONNEL ACTION
REASSIGNMENT AND TRANSFER TO
VOUCHERED FUNDS

4. EFFECTIVE DATE REQUESTED
MONTH DAY YEAR
10 14 73

5. CATEGORY OF EMPLOYMENT
REGULAR

6. FUNDS
V TO V
C TO V
XX C TO V

7. PAN AND NSCA
4237-1374-0000

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATION
DDO/EA DIVISION
P.I., MALAYSIA, INDONESIA BRANCH
PHILIPPINE SECTION

10. LOCATION OF OFFICIAL STATION
WASH., D.C.

11. POSITION TITLE
OPS OFFICER (D-13)

12. POSITION NUMBER
4024

13. CAREER SERVICE DESIGNATION
D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)
GS

15. OCCUPATIONAL SERIES
0136.01

16. GRADE AND STEP
13 63

17. SALARY OR RATE
24,122
~~22,915~~

18. REMARKS
FROM: DDO/EA/PMI/MS/#4939/MANILA, P.I.

19A. SIGNATURE OF REQUESTING OFFICIAL
Ernest L. Hardt, C/EA/PERS

DATE SIGNED
10/2/73

19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE SIGNED
10-4-73

SPACES BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

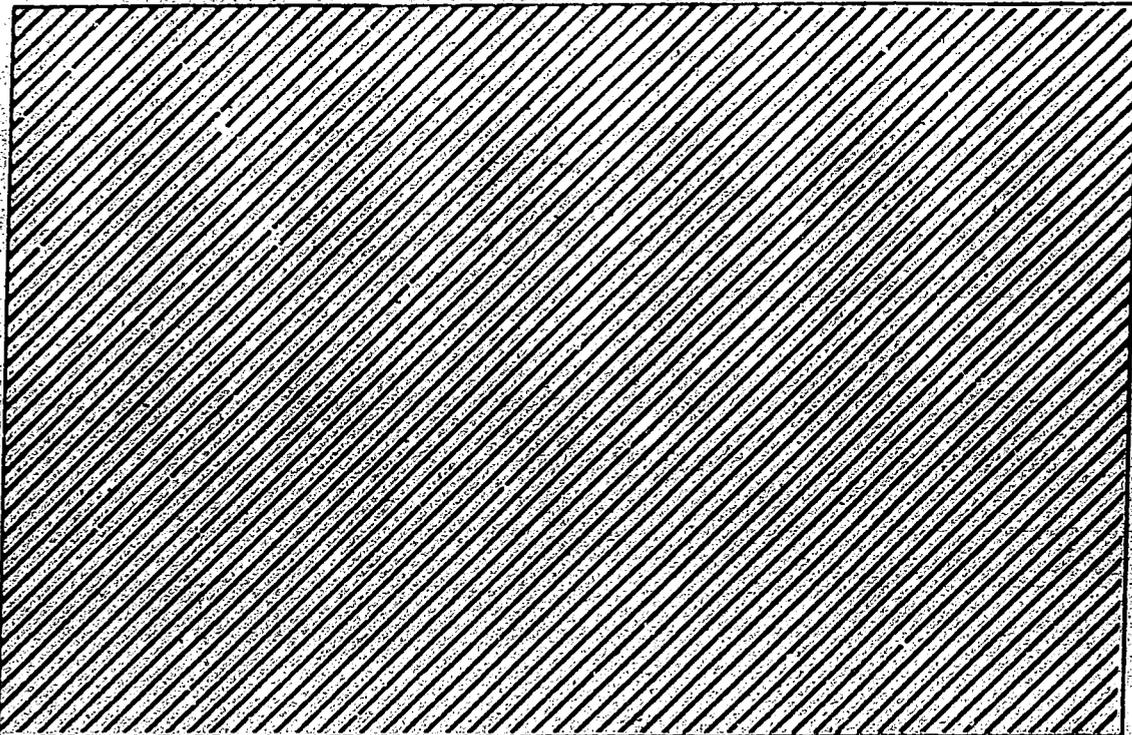
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING ALPHABETIC 10 US140 EA 7003	22. STATION CODE	23. INITIALS CODE	24. REGIES CODE	25. DATE OF BIRTH MO DA YR 10 10 19 128	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. RET. EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA CODE -LV -DCA -DOM	31. SEPARATION DATA CODE	32. LOGS/REGISTRATION DATA TYPE MO DA YR	EOD DATA		33. SECURITY REG. NO.	34. SLS
35. VET. PREFERENCE CODE 0-None 1-5 YR. 2-10 YR.	36. SERV. COMP. DATE MO DA YR	37. LONG. COMP. DATE MO DA YR	38. CAREER CATEGORY CODE CAR/RESV PGOV/TEMP	39. FEGLI/HEALTH INSURANCE CODE 9-PAID 1-10/01 2-10/01 3-10/01 4-10/01	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-22222 IN SERVICE (LESS THAN 3 YEARS) 3-22222 IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXEMPTION CODE 1-TES 2-NO		44. STATE TAX DATA FORM EXECUTED 1-TES 2-NO		45. SOCIAL SECURITY CODE	
46. POSITION CONTROL CERTIFICATION URB 104-78				47. OP. APPROVED H. A. M. [Signature]		48. DATE APPROVED 9 Oct 73		

FORM 8-72 1152 USE PREVIOUS EDITION

SECRET CLASSIFIED BY 01-0332

11-2 APR 68

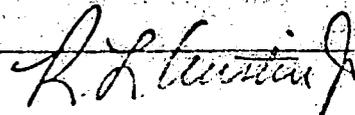
ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
FOX, Jerome	W-Mary A.	74-0194

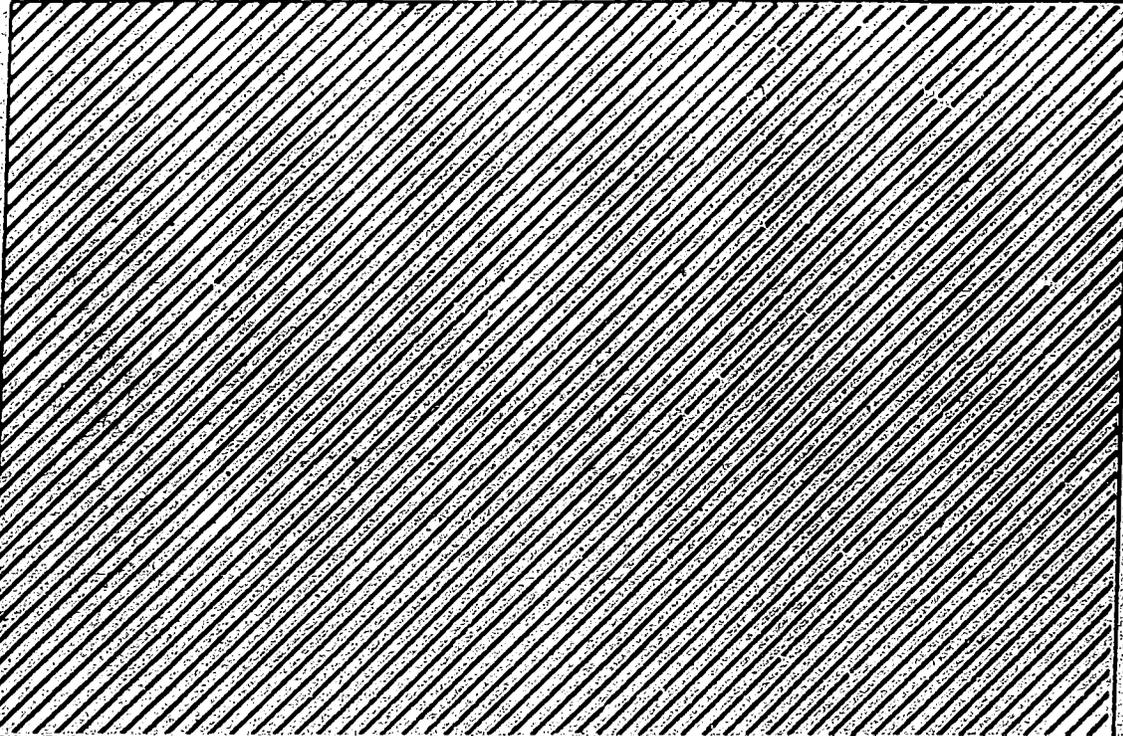
There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 1 July 1973.

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	SIGNATURE OF DSD REPRESENTATIVE
11 Sept 1973	

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

ADMINISTRATIVE - INTERNAL USE ONLY



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
FOX, Jerome	Self	74-0096

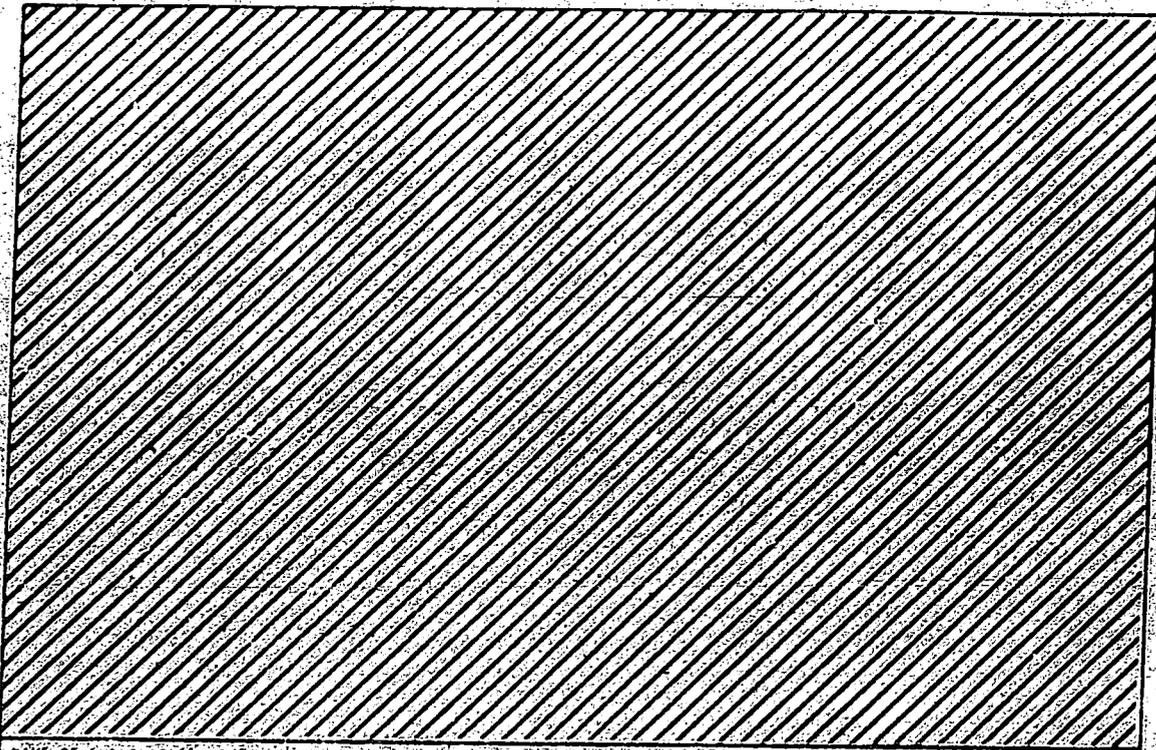
There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 30 June 1973.

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	SIGNATURE OF BSO REPRESENTATIVE
27 August 1973	<i>[Handwritten Signature]</i>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Initial)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
FOX, Jerome	SELF	72-0959

There is on file in the Personal Affairs 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 18 February 1972.

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	SIGNATURE OF USG REPRESENTATIVE
9 May 72	

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

1-2164

MEMORANDUM FOR: Deputy Director for Plans 20 April 1971

THROUGH : Director of Personnel

SUBJECT : Departure Short of Tour and Home Leave -
Mr. Jerome Fox

REFERENCE : CSN 20-89, PERSONNEL, 16 April 1971

1. Paragraph four contains a recommendation for your approval.

2. Mr. Jerome Fox is a GS-13 Operations Officer who has been assigned to the Manila Station since 20 May 1969. His current tour will end on 19 May 1971; his request for a second tour after home leave has been approved.

3. Mr. Fox's wife has acrophobia and does not fly. In view of her condition she has been authorized round-trip travel by sea. The Division has authorized Mr. Fox and children to accompany her on the voyage from Manila to the U. S.

4. Manila Station advises that the Fox Family can be accommodated on a ship scheduled to sail from Manila on 3 May. In order to make the sailing, Mr. Fox would have to depart post before completion of his tour. The Far East Division recommends approval for Mr. Fox to depart Manila short of tour for home leave.

William E. Nelson
William E. Nelson
Chief, Far East Division

CONCUR:

J. C. Christy
Director of Personnel

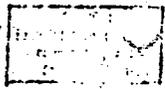
20 April 1971
Date

The request contained in Paragraph four is APPROVED:

D. M. Moran
Deputy Director for Plans

3 May 1971
Date

SECRET



SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
1. SERIAL NUMBER 017214		2. NAME (Last-First-Middle) FOX, JEROME		18 AUGUST 1970			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED 08/21/70		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS		7. FINANCIAL ANALYSIS NO. CHARGEABLE 1137-1639		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/FE FOREIGN FIELD Manila Station FE/PAI Unilateral Branch				10. LOCATION OF OFFICIAL STATION Philippine Sea MANILA, PH			
11. POSITION TITLE OES: OFFICER		12. POSITION NUMBER 4945		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, IS, PW) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 4		17. SALARY OR RATE \$ 18,437	
18. REMARKS FROM: LANE/4947							
18A. SIGNATURE OF PERSONNEL OFFICER James R. Doherty, Jr. Chief, FE Personnel				DATE SIGNED 18 AUG 1970		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Robert M. White	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING 45440 FE	22. STATION CODE 57557	23. INTEGRAL CODE	24. HOURS CODE 3	25. RATE OF RPTA 10109/70	26. DATE OF RPTA
27. DATE OF GRACE	28. DATE OF LEI	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION / LABELATION DATA	33. SECURITY REQ NO.	34. SER.
35. NET PREFERENCE		36. SERV. COMP. DATE	37. LONG COMP. DATE	38. EARLIER CATEGORY	39. LEGAL HEALTH INSURANCE		40. SOCIAL SECURITY NO.
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA	
45. POSITION LOCATION CERTIFICATION				46. O.P. APPROVAL 08.21.70 [Signature]		DATE APPROVED 08.21.70	

F
22

FORM 1152 3-67 PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED					
1. SERIAL NUMBER 017974		2. NAME (Last-First-Initial) FOX, JEROME		18 APR 1970					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH: DAY: YEAR:		5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS <input type="checkbox"/> TO V <input type="checkbox"/> TO C <input checked="" type="checkbox"/> TO V <input type="checkbox"/> TO C		7. FINANCIAL ANALYSIS NO. CHARGEABLE 1137-1639		8. LEGAL AUTHORITY: (Completed by Office of Personnel)					
9. ORGANIZATIONAL DESIGNATIONS DIP/YE FOREIGN FIELD FK/FBI - UNILATERAL BRANCH MANILA STATION			10. LOCATION OF OFFICIAL STATION MANILA, P.I.						
11. POSITION TITLE CPS OFFICER		12. POSITION NUMBER 3-1A	13. CAREER SERVICE DESIGNATION D						
14. CLASSIFICATION SCHEDULE (GS, FS, etc.) GS		15. OCCUPATIONAL SERIES 0136-01	16. GRADE AND STEP 13 A	17. SALARY OR RATE \$ 18,437.					
18. REMARKS FROM: SAME/1967									
18A. SIGNATURE OF REQUESTING OFFICIAL /s/ James R. Doherty, Jr. James R. Doherty, Jr. Chief, FK Personnel			DATE SIGNED 11 APR 1970	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER					
DATE SIGNED									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	24. EMPLOY CODE	21. OFFICE CODES NUMBER ALPHABETIC	22. STATION CODE	23. INTEGRAL CODE	24. HOURS CODE	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF ENTRY MO. DA. YR.	27. DATE OF LEI MO. DA. YR.	
28. NET EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. EXTENSION DATA 1-CE 2-SE 3-TE 4-RE	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO. DA. YR.	EOD DATA →		33. SECURITY RES. NO.	34. SEE	
35. VET PREFERENCE CODE 1-NO 2-1 YR 3-5 YR	36. SERV. COMP. DATE MO. DA. YR.	37. LEAS. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY JOB TITLE CODE	39. FEEL. HEALTH INSURANCE CODE 1-YES 2-NO	40. SOCIAL SECURITY NO.				
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1-NO PREVIOUS SERVICE 2-1 YEAR TO 5 YEARS 3-6 YEARS TO 10 YEARS (OVER 3 YEARS) 4-10 YEARS TO 15 YEARS (OVER 3 YEARS)			42. ALIAS CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO	44. LEAD RES. DATA FORM EXECUTED CODE 1-YES 2-NO		45. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO		
45. POSITION CONFIRMATION CERTIFICATION				46. OFF. APPROVAL		DATE APPROVED			

FORM 1152 USE PREVIOUS EDITION

SECRET

COPIES FROM THIS FORM ARE UNCLASSIFIED
DATE 08-11-2010 BY 60322 UCBAW

SECRET

(To be filled in)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

14 April 1969

F
22

1 SPECIAL NUMBER 017974	2 NAME (Last-First-Middle) FOX, JEROME
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3 NATURE OF PERSONNEL ACTION REASSIGNMENT	4 EFFECTIVE DATE REQUESTED MONTH: 05 DAY: 02 YEAR: 69	5 CATEGORY OF EMPLOYMENT REGULAR
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6 POINTS V TO V: <input type="checkbox"/> V TO O: <input type="checkbox"/> O TO V: <input type="checkbox"/> O TO O: <input checked="" type="checkbox"/>	7 FINANCIAL ANALYSIS NO. CHARGEABLE 9137-1639	8 LEGAL AUTHORITY (Completed by Office of Personnel)
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9 ORGANIZATIONAL DESIGNATIONS DDP/FE FOREIGN FIELD FE/PMI - MANILA STATION Liaison Branch	10 LOCATION OF OFFICIAL STATION MANILA, PHILIPPINE IS
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11 POSITION TITLE OPS. OFFICER	12 POSITION NUMBER 4947	13 CAREER SERVICE DESIGNATION D
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14 CLASSIFICATION SCHEDULE (GS, LS, PL, etc.) GS	15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 13 3	17 SALARY OR RATE \$ 15,369
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18 REMARKS
FROM: DDP/FE PMI/PHILIPPINES, MALAYSIA, INDONESIA/PHILIPPINE SECTION/4024
Mr. Fox is replacing Mr. James Gillis who is being reassigned.
Home Base: FE

Security Clearance: CONFIDENTIAL
CO 354-16-69
11-5-69

19A SIGNATURE OF REQUESTING OFFICIAL <i>Mary T. Bouliger</i> Mary T. Bouliger C/FE Personnel	DATE SIGNED 29 APR 1969	19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Paul M. [unclear]</i>	DATE SIGNED 25 APR 69
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SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

20 EMPLOY CODE 37	21 OFFICE SYMBOL 10	22 STATION CODE 1000	23 INTEREST CODE 5	24 NOTES CODE 5	25 DATE OF RPTN 10 09 68	26 DATE OF GRACE MO. DA. YR.	27 DATE OF LET MO. DA. YR.
28 EMP CODE	29 SPECIAL EMPLOYEE	30 RETIREMENT DATA TYPE CODE	31 SEPARATION DATA CODE	32 CONNECTION (CANCELLATION) DATA TYPE MO. DA. YR.	EOD DATA →		
33 EMP PREFERENCE CODE	34 EMP (COMP. DATA)	35 LEAVE COMP. DATA MO. DA. YR.	36 CAREER CATEGORY CODE	37 PHYS. HEALTH (UN)GRADE CODE	38 SOCIAL SECURITY NO.		
39 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE	40 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE	41 LEAVE CAT. CODE	42 FEDERAL TAX DATA AGRY. EMPLOYED CODE	43 FEDERAL TAX DATA NON-AGR. EMPLOYED CODE	44 SOCIAL SECURITY NO.	45 SOCIAL SECURITY NO.	46 SOCIAL SECURITY NO.
47 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				48 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
49 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				50 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
51 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				52 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
53 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				54 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
55 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				56 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
57 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				58 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
59 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				60 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
61 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				62 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
63 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				64 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
65 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				66 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
67 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				68 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
69 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				70 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
71 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				72 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
73 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				74 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
75 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				76 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
77 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				78 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
79 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				80 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
81 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				82 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
83 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				84 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
85 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				86 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
87 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				88 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
89 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				90 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
91 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				92 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
93 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				94 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
95 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				96 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
97 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				98 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			
99 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE				00 EMPLOYER (CIVILIAN GOVERNMENT SERVICE) CODE			

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8

04-30-69 [Signature] Cameron B. Russell 04-30-69

FORM 1152 USE PREVIOUS EDITIONS

SECRET

FORM 1152 USE PREVIOUS EDITIONS

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION	DATE PREPARED 11 April 1969
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F
8

1. SYMBOL NUMBER 017974	2. NAME (Last-First-Middle) FOX, Jerome
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3. NATURE OF PERSONNEL ACTION CONVERSION FROM FBR STATUS	4. EFFECTIVE DATE REQUESTED MONTHS: 04 YEAR: 06 69	5. CATEGORY OF EMPLOYMENT REGULAR
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6. RANGE V TO V	7. TO V O TO V	8. TO O X O TO O	9. FINANCIAL ANALYSIS NO. CHARGEABLE 8137-1373	10. LEGAL AUTHORITY (Completed by Office of Personnel)
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9. ORGANIZATIONAL DESIGNATIONS DDP/FE FE-PHI - PHILIPPINES, MALAYSIA, INDONESIA PHILIPPINE SECTION	10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.
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11. POSITION TITLE OPS OFFICER (13)	12. POSITION NUMBER 4024	13. CAREER SERVICE DESIGNATION D
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14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 3	17. SALARY OR RATE 15,369
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18. COMMENTS
Wash, D.C. New Dev (FE)

FROM: Same

18A. SIGNATURE OF REQUESTING OFFICIAL <i>Mary T. Boulger</i>	DATE SIGNED 4/10/69	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Paul M. V. ...</i>	DATE SIGNED 4/10/69
---	-------------------------------	---	-------------------------------

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. POSITION CODE	20. EMPLOY CODE	21. GRADE (GS, LB, etc.) GS 13 3	22. STATION CODE 75013	23. PAY RATE CODE	24. MONTHS CODE	25. DATE OF BIRTH 10/09/28	26. DATE OF SEAS	27. DATE OF LEI					
28. SECURITY NO.		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA (CODE)		32. CORRECTION CANCELLATION DATA		33. SECURITY REG. NO.		34. SEE	
35. SOCIAL SECURITY NO.		36. MILITARY COMP. DATA		37. CIVILIAN COMP. DATA		38. CAREER CATEGORY		39. FECA HEALTH INSURANCE		40. SOCIAL SECURITY NO.			
41. FEDERAL EMPLOYMENT SERVICE		42. LEAVE (CODE)		43. FEDERAL TAX DATA		44. STATE TAX DATA		45. FEDERAL EMPLOYMENT SERVICE					
46. FEDERAL EMPLOYMENT SERVICE		47. LEAVE (CODE)		48. FEDERAL TAX DATA		49. STATE TAX DATA		45. FEDERAL EMPLOYMENT SERVICE					

46. PERSON CENTER IDENTIFICATION

47. OFF APPROVAL

04-11-69 BR Carol B. Russell 04-11-69

FORM 1132 USE PREVIOUS EDITIONS

SECRET

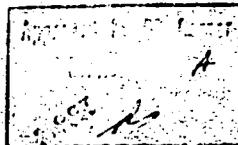
CLASSIFIED BY: 2500
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1 SERIAL NUMBER 017974										18 OCTOBER 1968	
2 NAME (Last-First-Middle) POE JEROME											
3 NATURE OF PERSONNEL ACTION PROMOTION					4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 10 30 68			5 CATEGORY OF EMPLOYMENT REGULAR			
6 FUNDS V TO V C TO V		V TO C C TO C		7 FINANCIAL ANALYSIS NO CHARGEABLE 9137 1375			8 LEGAL AUTHORITY (Complied by Office of Personnel)				
9 ORGANIZATIONAL DESIGNATION DDP/FE FE/PHI - PHILIPPINES, MALAYSIA, INDONESIA PHILIPPINE SECTION					10 LOCATION OF OFFICIAL STATION WASH., D. C.						
11 POSITION TITLE OPS OFFICER (D-13)					12 POSITION NUMBER 4034		13 CAREER SERVICE DESIGNATION				
14 CLASSIFICATION SCHEDULE (GS, FS, etc.) FBS GS			15 OCCUPATIONAL SERIES 0136, 01		16 GRADE AND STEP GS/5 13/3		17 SALARY OR RATE \$13,330 \$16,369				
18 REMARKS FROM: SAME (09-12/6 to 09-13/3)											
<i>Payroll called</i>											
19 BY SO FE/DAF											
19A SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i>				DATE SIGNED <i>[Date]</i>		19B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>				DATE SIGNED <i>[Date]</i>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES ALPHABETIC		22 STATION CODE	23 INTEREST CODE	24 ROUTING CODE	25 DATE OF INFO.	26 DATE OF GRACE	27 DATE OF LEI		
28 HIS EMPLOY	29 SPECIAL EMPLOY	30 EST. PLANT DATA	31 OPERATIONAL DATA CODE	32 EXECUTION LABEL/DATE	EOD DATA		33 SECURITY	34 SLS			
35 (1) PREFERENCE	36 (2) COMP. DATA	37 (3) COMP. DATA	38 (4) CAREER EFFECT	39 (5) REL. DATA	40 (6) SOCIAL SECURITY						
41 (7) CIVILIAN GOVERNMENT SERVICE	42 (8) LEAVE CAT.	43 (9) FEDERAL TRAVEL DATA	44 (10) STATE TRAVEL DATA	45 (11) STATE TRAVEL DATA							
46 POSITION CONTROL OPERATIONS											
47 OFF APPROVAL <i>[Signature]</i>										DATE APPROVED <i>[Date]</i>	

S-E-C-R-E-T



MEMORANDUM FOR: Clandestine Services Career Service Board

SUBJECT : Recommendation for Promotion from GS-12 to GS-13 for Mr. Jerome A. Fox

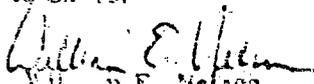
1. FE Division recommends the promotion of Mr. Jerome A. Fox from GS-12 to GS-13.

2. Mr. Fox first joined the Agency in 1955 in the DDI. He rose rapidly from GS-07 to GS-12 which grade he achieved in March 1961. He spent one overseas tour [redacted] In April 1963 he transferred to the DDP. This action and the adjustments it necessitated have undoubtedly held him back from the normal career advancement to be expected for one of his ability.

3. In the DDP Mr. Fox first served in Vietnam Operations in Headquarters and then from 1964-1966 in Saigon. There he performed effectively in both liaison and unilateral operations [redacted] He personally recruited several agents and established a successful [redacted] He was first recommended for promotion to GS-13 during his Vietnam tour.

4. In November 1966 Mr. Fox joined FE/PMI, first on the Indonesian and currently on the Philippine Desk. He has served as the Indonesia Desk and Branch referent for Communist Party Operations, where he proved himself to be an excellent analyst. He has also served as a desk officer handling a variety of projects. He has performed his duties in a consistently strong manner, and has shown sound operational judgment. Mr. Fox writes well, and gets along extremely well with his co-workers and contacts. He is now scheduled for a field assignment in Manila in 1969. In view of his strong Headquarters desk performance and his previous recommendation from Vietnam, Mr. Fox was recommended for promotion again in February 1968.

5. Mr. Fox is an experienced and competent Headquarters and field operations officer. He has repeatedly demonstrated his ability to perform at the GS-13 level. In consideration of his fine record of productivity I recommend that he be promoted to GS-13.


William E. Nelson
Chief, Far East Division

SECRET

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

9 May 1968

1 SERIAL NUMBER 017974 2 NAME (Last-First-Middle) JYX FOX, JEROME

3 NATURE OF PERSONNEL ACTION REASSIGNMENT 4 EFFECTIVE DATE REQUESTED MONTH 05 DAY 19 YEAR 68 5 CATEGORY OF EMPLOYMENT REGULAR

6 RANKS V 10 V V 10 O V 10 O V 7 FINANCIAL ANALYSIS NO CHARGEABLE 8237-1375 8 LEGAL AUTHORITY (Completed by Office of Personnel)

9 ORGANIZATIONAL DESIGNATIONS DDP/VE FE/PMI - Philippines, Malaysia, Indonesia Philippine Section 10 LOCATION OF OFFICE STATION WASHINGTON, D.C.

11 POSITION TITLE OPS OFFICER 12 POSITION NUMBER 4005 13 CAREER SERVICE DESIGNATION D

14 CLASSIFICATION SYMBOL (GS, FS, etc.) PUR GS 15 OCCUPATIONAL SERIES 0136.01 16 GRADE AND STEP 5/5 12/5 17 SALARY OR RATE 12,604 12,989

18 REMARKS FROM: DEVELOPMENT COMP. SLOT WAS VACANT X Wash, DC

19A SIGNATURE OF REQUESTING OFFICIAL MARY T. BULLYER CTR/Per 19B DATE SIGNED 10 May 68 19C SIGNATURE OF CAREER SERVICE APPROVING OFFICER Paul M. Yule 19D DATE SIGNED 10 May 68

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL. Includes fields for ACTION CODE, EMPLOYMENT CODE, WORK CENTER, STATION, DISTRICT, etc.

SECRET

SECRET

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10

30 January 1968

MEMORANDUM FOR: FE Career Management Committee

SUBJECT: Recommendation for Promotion from GS-12 to GS-13 of Mr. Jerome Fox

1. This office wishes to reiterate its previous endorsement of the Saigon Station's recommendation for the promotion of Mr. Fox from GS-12 to GS-13.

2. Mr. Fox was initially assigned to the Indonesian Desk as an Operations Officer responsible for Headquarters support of the Djakarta Station's Communist Party Operations Program. This was a demanding task requiring sound operational judgment, experience, and the capacity to absorb large quantities of operational data and information. Despite no prior background in Indonesia, Mr. Fox quickly got on top of the material and projects and made a valuable contribution. He also had other duties concerned with support for other Station unilateral activity.

3. Mr. Fox was subsequently assigned to the Philippines Desk in preparation for an assignment to the Philippines.

His work on the Philippines Desk in support of Manila station operations was also marked by a high degree of professionalism and competence.

4. Mr. Fox is a capable and experienced Operations Officer. His has proven in Vietnam a unique ability to develop valuable operational assets.

and his work in this Branch has been excellent. In view of this good record of productivity, and as a stimulus for future development, I strongly recommend that Mr. Fox be promoted to GS-13.

John P. Kennedy
John P. Kennedy
Acting Chief, FE/PMI

SECRET

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
				20 NOVEMBER 1967			
1. SERIAL NUMBER 01797		2. NAME (Last-First-Middle) FOX, JEROME ✓					
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE REQUESTED MONTH: 11 DAY: 21 YEAR: 67		5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS V 100 0 100 X 0 100			7. FINANCIAL ANALYSIS NO. CHARGEABLE 8137 1375		8. LEGAL AUTHORITY (Complied by Title of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP/FE DEVELOPMENT COMPLEMENT			10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.				
11. POSITION NUMBER 9997			12. CAREER SERVICE DESIGNATION D				
13. CLASSIFICATION SCHEDULE (F.S. 1.B. 401) FSR GS		14. OCCASIONAL SERIES 0136.01	15. GRADE AND STEP 5 5 12 5		16. SALARY OR RATE 12,074 \$ 12,443		
17. REMARKS All SICK AND All HOURS ANNUAL LEAVE TO BE TRANSCERIBED MARITAL STATUS - MARRIED <i>* [Signature]</i>							
18. SIGNATURE OF REQUESTING OFFICER			19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED		
SPACES BELOW FOR FILLING IN BY THE OFFICE OF PERSONNEL							
1. INDEX NO.	2. EMPLOY. NO.	3. OFFICE SYMBOL	4. STATION (CODE)	5. EMPLOYEE NO.	6. DATE OF BIRTH	7. SERVICE BRANCH	8. SERVICE NO.
55	18	11500/FE	75013				
9. DATE OF ENTRY	10. DATE OF ENTRY	11. DATE OF ENTRY	12. DATE OF ENTRY	13. DATE OF ENTRY	14. DATE OF ENTRY	15. DATE OF ENTRY	16. DATE OF ENTRY
17. PAY PATTERN	18. 1950 COMP. RATE	19. 1955 COMP. RATE	20. CAREER PARTICIP.	21. FICA REALTY (1950-55)	22. SOCIAL SECURITY NO.	23. SECURITY NO.	24. SECURITY NO.
25. PERSONAL (1950-55) (1955-59)	26. 1950-55	27. 1955-59	28. 1960-64	29. 1965-69	30. 1970-74	31. 1975-79	32. 1980-84
33. REMARKS (1950-55) (1955-59) (1960-64) (1965-69) (1970-74) (1975-79) (1980-84)							
34. SIGNATURE (1950-55) (1955-59) (1960-64) (1965-69) (1970-74) (1975-79) (1980-84)							

FORM 1157 USE PREVIOUS EDITIONS

SECRET

1967-11-20

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 017974						30 October 1967	
2. NAME (Last-First-Middle) FOX, Jerome							
3. NATURE OF PERSONNEL ACTION Reassignment and Transfer to Confidential Funds				4. EFFECTIVE DATE REQUESTED MONTH: 10 DAY: 19 YEAR: 67		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS V TO V O TO V		X O TO O		7. FINANCIAL ANALYSIS NO. CHARGEABLE 8137-1392		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/FE FE/Development Complement				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE Ops Officer				12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 5		17. SALARY OR RATE \$ 12,443	
18. REMARKS FROM: DDP/FE/PMI [redacted] /3877 Subject is being assigned to [redacted] NTE: [redacted] and training for overseas assignment. *							
19A. SIGNATURE OF REQUESTING OFFICIAL Mary T. Boulger, CFE/Pers.				DATE SIGNED OCT 1967		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [redacted]	
19C. DATE SIGNED 3. Oct 67		DATE SIGNED 3. Oct 67					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. ACTION CODE	21. EMPLOY CODE	22. OFFICE CODES ALPHABETIC	23. STATION CODE	24. PAYROLL CODE	25. POSITION CODE	26. DATE OF BIRTH	27. DATE OF GRADE
90	103	LS499	FE	25013	1	10/19/67	
28. MIL. SERVICE	29. SPECIAL REFERENCE	30. IDENTIFICATION DATA	31. RESERVATION DATA CODE	32. CONNECTION (CERTIFICATION) DATA	33. SECURITY REG NO.		
					FOD-DATA		
34. NET PREFERENCE	35. SLEW (COMP. DATA)	36. CODE (COMP. DATA)	37. (A) (B) (C) (D) (E) (F) (G) (H) (I) (J) (K) (L) (M) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z)	38. (A) (B) (C) (D) (E) (F) (G) (H) (I) (J) (K) (L) (M) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z)	39. (A) (B) (C) (D) (E) (F) (G) (H) (I) (J) (K) (L) (M) (N) (O) (P) (Q) (R) (S) (T) (U) (V) (W) (X) (Y) (Z)	40. SOCIAL SECURITY NO.	
41. PHYSICAL QUALITY GOVERNMENT SERVICE	42. LEARN-LAT CODE	43. REGION TAG DATA	44. STAFF TAG DATA				
45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL			DATE APPROVED			

1152

SECRET

CLASSIFIED FROM PERSONNEL INFORMATION BY [redacted]

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

13 May 1967

1. SERIAL NUMBER
017974

2. NAME (Last-First-Middle)
FOX, Jerome

3. NATURE OF PERSONNEL ACTION
Reassignment

4. EFFECTIVE DATE REQUESTED

MONTH: 05 DAY: 21 YEAR: 67

5. CATEGORY OF EMPLOYMENT

Regular

6. FUNDS

X V TO V
O TO V O TO O

7. COST CENTER NO. CHARGEABLE
7237-1385

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS
DDP/FE

10. LOCATION OF OFFICIAL STATION
Washington, D.C.

11. POSITION TITLE
Ops Officer

D-12

12. POSITION NUMBER
3877

13. CAREER SERVICE DESIGNATION
D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)
GS

15. OCCUPATIONAL SERIES
0136.01

16. GRADE AND STEP
12 5

17. SALARY OR RATE
\$ 12,443

18. REMARKS
FROM:

19A. SIGNATURE OF REQUESTING OFFICIAL

Mary T. Boulger, CPE/PER

DATE SIGNED
5/15/67

19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE SIGNED
5/18/67

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC: 43740 ALPHABETIC: E	22. STATION CODE 75012	23. INTERFERE CODE	24. HOURS CODE 1	25. DATE OF BIRTH MO: 10 DA: 09 YEAR: 28	26. DATE OF GRADE MO: DA: YEAR:	27. DATE OF LEI MO: DA: YEAR:	
28. WTE CAPABLE MO: DA: YEAR:	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 - CIV 2 - MILA 3 - NONR	31. SEPARATION DATA LOSS	32. CORRECTION CANCELLATION DATA TYPE: MO: DA: YEAR:	EOD DATA			33. SECURITY REQ. NO.	34. SER
35. VET. PREFERENCE CODE: 0 - NONE 1 - 10% 2 - 15% 3 - 20%	36. SERV. COMP. DATE MO: DA: YEAR:	37. LEAVE CODE DATE MO: DA: YEAR:	38. CAREER CATEGORY CODE: 0 - BASIC 1 - 10% 2 - 15%	39. PHYS. HEALTH INSURANCE CODE: 0 - NONE 1 - 10% 2 - 15%	40. SOCIAL SECURITY NO.				
41. FEDERAL GOVERNMENT SERVICE DATA CODE: 0 - NO FEDERAL SERVICE 1 - NO FEDERAL SERVICE 2 - 1 YEAR OR MORE (1950-1959) 3 - 2 YEARS OR MORE (1960-1969)		42. LEAVE (A) CODE	43. FEDERAL DATA FORM EXECUTED: 1 - YES, 2 - NO	44. FEDERAL DATA NO. TAB. RESOLUTIONS: 1 - YES, 2 - NO	45. STATE TAX DATA CODE: 0 - NONE 1 - 10% 2 - 15%				
46. POSITION CONTROL CERTIFICATION				47. OFF. APPROVAL H. Muller	DATE APPROVED 05/16/67				

FORM 1152 USE PREVIOUS EDITION

SECRET

SECRET
RELEASABLE FROM AUTOMATIC DECLASSIFICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED				
1 SERIAL NUMBER 017974				2 NAME (Last-First-Middle) FOX, Jerome				
3 NATURE OF PERSONNEL ACTION Reassignment and Transfer to Vouchered Funds				4 EFFECTIVE DATE REQUESTED MONTH: 11 DAY: 20 YEAR: 66		5 CATEGORY OF EMPLOYMENT Regular		
6 FUNDS V TO V C TO V		V TO C C TO C		7 FINANCIAL ANALYSIS NO. CHARGEABLE 7237-1385		8 LEGAL AUTHORITY (Complied by Off. of Personnel)		
9 ORGANIZATIONAL DESIGNATIONS DDP/FE				10 LOCATION OF OFFICIAL STATION Washington, D.C.				
11 POSITION TITLE Ops Officer		12 POSITION NUMBER D-12 4025		13 CAREER SERVICE DESIGNATION D				
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12 5		17 SALARY OR RATE \$ 12,443		
18 REMARKS FROM: [Redacted] Subject: [Redacted] cy Security cy FE/B&F								
18A SIGNATURE OF MOVER/COMPLAINEE Harry T. Boulver, CFE/PERS				DATE SIGNED 10/31/66		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]		
DATE SIGNED 11/3/66		DATE SIGNED 11/3/66						
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 EMPLOYEE CODE	24 HOURS CODE	25 DATE OF BIRTH MO. DA. YR.	26 DATE OF GRADE MO. DA. YR.	27 DATE OF LEI MO. DA. YR.
16	10	45148 FE	25013			10 10 12		
28 NET Earnings	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1-GR 2-FIB 3-BOS	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA	EOD DATA		33 SECURITY REG. NO.	34 SER.
35 VET PREFERENCE	36 VET COMP DATE	37 LOVS COMP DATE	38 CAREER CATEGORY	39 FERR HEALTH INSURANCE CODE A-W/PTP 1-MS		40 SOCIAL SECURITY NO.		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1-NO PERSON SERVICE 2-NO GOVT SERVICE 3-LEAST 18 MONTHS (1945-1955) OR 1 YEAR	42 LEAVE CAT CODE	43 FEDERAL SER. DATA CODE 1-MS 2-NO		44 STATE SER. DATA CODE 1-MS 2-NO		45 STATE SER. DATE		
46 POSITION CONTROL DESIGNATION 1103-66N				47 OFF APPROVAL H. M. [Signature]		48 DATE APPROVED 11/3/66		

SECRET

EXEMPT FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET
(When Filled In)

F23

REQUEST FOR PERSONNEL ACTION		DATE PREPARED 8 Sept 66	
1 SERIAL NUMBER 017974	2 NAME (Last-First-Middle) FOX, JEROME		
3 NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM		4 EFFECTIVE DATE REQUESTED MONTH: 09 DAY: 25 YEAR: 66	5 CATEGORY OF EMPLOYMENT REGULAR
6 PAY GRADE V TO V	V TO V	V TO U	7 FINANCIAL ANALYSIS NO. CHARGEABLE 7137-1487
8 LEGAL AUTHORITY (Completed by Office of Personnel) PL 88-643 Sect. 203		9 ORGANIZATIONAL DESIGNATIONS	
10 LOCATION OF OFFICIAL STATION DAIGON SOUTH VIET NAM		11 POSITION TITLE	
12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, LB, FE, ...)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP 12	17 SALARY OR RATE
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		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 CODING NUMERIC ALPHABETIC	22 STATION CODE
23 INT. REF. NO.	24 SPECIAL REFERENCE	25 RETIREMENT DATA 1-CR 2-1224 3-2021	26 SEPARATION DATA CODE
27 CORRECTION/AMENDMENT DATA	28 SECURITY	29 SEE	30 SECURITY
31 VET. PROBLEMS	32 SERV. COMP. DATE	33 LONG. COMP. DATE	34 CAREER CATEGORY
35 SOCIAL SECURITY NO.	36 FEEL. HEALTH INSURANCE	37 SOCIAL SECURITY NO.	38 SOCIAL SECURITY NO.
39 PREVIOUS CIVILIAN GOVERNMENT SERVICE	40 LEAVE BAL.	41 REGULAR PAY DATA	42 STATE TAX DATA
43 POSITION CONTROL CERTIFICATION	44 CF APPROVAL	45 DATE APPROVED	46 DATE APPROVED
OS-1666		See memo signed by D/Pers dated 2 1966	

FORM 1152 USE PREVIOUS EDITION
OF 8-7-66

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
3 November 1964

1. NUMBER
17974
2. NAME - Last, First, Middle
FOX, JEROME

3. NATURE OF PERSONNEL ACTION
REASSIGNMENT
4. EFFECTIVE DATE REQUESTED
MO. DA. YE. 12 64
5. CATEGORY OF EMPLOYMENT
REGULAR
6. FUNDS
V TO V
C TO V
V TO O
X C TO O

7. COST CENTER NO. CHARGE
AMT. 5137-1487
8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS
DDP/FE
FE/VBC - SAIGON STATION
OPERATIONS CENTER INTERNAL OPS BRANCH
100 CAPITAL OPS SECTION

10. LOCATION OF OFFICIAL STATION
SAIGON, VIETNAM

11. POSITION TITLE
OPS OFFICER (622)

12. POSITION NUMBER
4608
13. CAREER SERVICE DESIGNATION
D

14. CLASSIFICATION SCHEDULE (GS, EA, etc.)
GS
15. OCCUPATIONAL SERIES
0136.01

16. GRADE AND STEP
12 4
17. SALARY OR RATE
\$ 11,315

18. REMARKS
Subject to Medical Approval.
FROM: DDP/FE
FE/ESV COMP Army 27F
ONE COPY TO SECURITY
ONE COPY TO CF PAYROLL
FOR FURTHER INFORMATION CALL X5459
RECEIVED BY
CSFO
ik

19A. SIGNATURE OF REQUESTING OFFICIAL
Robert L. Staton, CPE/Pers
DATE SIGNED
11/10/64
19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER
A. Bursley
DATE SIGNED
11-10-64

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

24. ACTION CODE	25. EMPLOY CODE	26. SPECIAL CODES FUNCTIONAL ALPHABETIC	27. STATION CODE	28. INITIALS CODE	29. MOBILE CODE	30. DATE OF BIRTH MO. DA. YE.	31. DATE OF SEAS. MO. DA. YE.	32. DATE OF LES. MO. DA. YE.				
33. AFE CODES NO. DA. YE.	34. SOCIAL SECURITY NO.	35. RETIREMENT DATA CODE	36. SEPARATION DATA (CODE)	37. CORRECTION (CANCELLATION) DATA TYPE MO. DA. YE.	38. SECURITY CODE NO.	39. SIP	40. VET PREFERENCE CODE 0 - NONE 1 - 10 2 - 15 3 - 20	41. VET COMP. DATE MO. DA. YE.	42. LONG LEAVE DATE MO. DA. YE.	43. CAREER CATEGORY TAB. TITLE PROF. TIME	44. FEGLI HEALTH INSURANCE CODE CODE 0 - NONE 1 - YES	45. SOCIAL SECURITY NO.
46. PRIVILEGE GOVERNMENT SERVICE DATA CODE 0 - NO PERSONNEL SERVICE 1 - NO. FROM 10 SERVICE 2 - FROM 10 SERVICE PLUS 1000 HOURS 3 - FROM 10 SERVICE PLUS 2000 HOURS	47. LEAVE CAT CODE	48. FEDERAL TAX DATA FORM 8750 CODE	49. NO. TAX EXEMPTIONS	50. NORM. BRACKET 1 - YES 2 - NO	51. STATE TAX DATA CODE NO. TAX STATE CODE	52. POSITION CONTROL DATE APPROVED						

49. POSITION CONTROL
A. Bursley
DATE APPROVED
11-10-64

NM 1152 USE PREVIOUS EDITIONS

SECRET

11/10/64

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
1. SERIAL NUMBER 017974						2. NAME (Last-First-Middle) FOX, Jerome,
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE REQUESTED MONTH: 9 DAY: 18 YEAR: 64
5. CATEGORY OF EMPLOYMENT Regular						6. LEGAL AUTHORITY (Completed by Office of Personnel)
7. COST CENTER NO. CHARGEABLE 5137-1392						8. LOCATION OF OFFICIAL STATION Washington, D. C.
9. ORGANIZATIONAL DESIGNATIONS DDP/FE 25/CS Development Complement						10. POSITION NUMBER 9997
11. CAREER SERVICE DESIGNATION D						12. CLASSIFICATION SCHEDULE (G.S. F.P. No.) FSR GS
13. OCCUPATIONAL SERIES 0136.01						14. GRADE AND STEP 5 2 12 4
15. SALARY OR RATE \$10,290 \$11,315						16. REMARKS All sick and All hours annual leave to be transferred MARITAL STATUS: Married <i>Training</i>
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> F. E. [Name], Cover Officer, X9013		DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19. ACTION CODE 55 13	20. EMPLOY CODE 13	21. OFFICE CODING PHONETIC: 113497 ALPHABETIC: FE	22. STATION CODE 75013	23. INTEREST CODE	24. ROUTES CODE	25. DATE OF BIRTH MO: 10 DA: 09 YR: 28
26. DATE OF GRADE	27. DATE OF HI	28. WFL EMPLOY MO: DA: YR:	29. SPECIAL REFERENCE 1-CC 2-FCR 3-ACR	30. SEPARATION DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION/RECALLATION DATA MO: DA: YR:
33. VET PREFERENCE CODE	34. WFL EMPLOY DATE MO: DA: YR:	35. LONG LEAVE DATE MO: DA: YR:	36. CAREER CATEGORY	37. HEALTH INSURANCE CODE	38. SOCIAL SECURITY NO.	39. SECURITY HQ 50
40. PERIODIC EMPLOYMENT SERVICE DATA MO: DA: YR:		41. LEAVE CODE	42. PROGRAM TAX DATA MO: DA: YR:	43. HEALTH INS. CODE	44. STATE TAX DATA MO: DA: YR:	
45. POSITION CONTROL DESIGNATION		46. OFF APPROVAL <i>[Signature]</i> 09/21/64		47. DATE APPROVED		

27
F

ENCLOSURE FROM BUREAU OF PERSONNEL NO. 100-100000-100

SECRET

SECRET
(If Not Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
3 September 1964

1 SERIAL NUMBER
017974

2 NAME (Last-First-Middle)
FOX, JEANNE

3 NATURE OF PERSONNEL ACTION
REASSIGNMENT AND TRANSFER TO
CONFIDENTIAL FUNDS

4 EFFECTIVE DATE REQUESTED
MONTH: 9 DAY: 13 YEAR: 64

5 CATEGORY OF EMPLOYMENT
REGULAR

6 FUNDS
V T U V X V TO O
O TO V O TO O

7 COST CENTER NO. CHARGE-ABLE
5137-1392

8 LEGAL AUTHORITY (Completed by Office of Personnel)

9 ORGANIZATIONAL DESIGNATIONS
DDP/FE *cs/cs*
DEVELOPMENT COMPLEMENT

10 LOCATION OF OFFICIAL STATION
WASHINGTON, D.C.

11 POSITION TITLE
OPS OFFICER

12 POSITION NUMBER
9997

13 CAREER SERVICE DESIGNATION
D

14 CLASSIFICATION SCHEDULE (GS, F, N, etc.)
GS

15 OCCUPATIONAL SERIES
0136.01

16 GRADE AND STEP
12 @ 4

17 SALARY OR RATE
\$10,360 *11,315*

18 REMARKS
FROM: DDP/FE
FE/VNC - VIETNAM, CAMBODIA - *Long*
NORTH VIETNAM SECTION
Security Approval Granted by Pers. SO/OS 9/19/64
OS 9/17/64

ONE COPY TO SECURITY
ONE COPY TO VOUCHERED PAYROLL

Recorded by
COFF
SL

FOR FURTHER INFORMATION CALL 55459

18A SIGNATURE OF REQUESTING OFFICIAL
Robert L. Staten, CFS/PERS

DATE SIGNED
9/11/64

18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER
A. Busby

DATE SIGNED
9-11-64

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE
20 EMP/OP CODE
21 OFFICE CODING
NUMERIC ALPHABETIC
22 STATION CODE
23 INTEGREE CODE
24 HOURS CODE
25 DATE OF BIRTH
26 DATE OF GRADE
27 DATE OF LEI

28 MIL EXPIRES
29 SPECIAL REFERENCE
30 RETIREMENT DATA
31 SEPARATION DATA CODE
32 CORRECTION CANCELLATION DATA
33 SECURITY REG NO
34 SER

35 VET PREFERENCE
36 SERV COMP DATE
37 LONG COMP DATE
38 CAREER CATEGORY
39 LEGAL HEALTH INSURANCE
40 SOCIAL SECURITY NO

41 PREVIOUS GOVERNMENT SERVICE DATA
42 LEAVE CAT. CODE
43 FEDERAL TAX DATA
44 STATE TAX DATA
45 POSITION CONTROL CERTIFICATION
46 O/P APPROVAL
DATE APPROVED
9-11-64

21
F

SUBJECT: Letter of Commendation

TO: COLONEL FRUO DEWITT
Commander, Det #4 (PACATIC)
1125th USAF Field Activities
(ATIC) APO 94

1. The successful outcome of the Aerospace Technical Intelligence Course conducted at Nichols Air Base, Pasay City, has been due to the indefatigable efforts exerted by the training team of your unit from 12 to 23 June 1961.

2. During that brief period your team displayed professional competence and mastery of the subject. They successfully imparted to the students vital data on the procedural aspects of gathering aerospace technical intelligence. Their extensive use of training films further enhanced the student's learning process and the practical training they gave in intelligence photography will go a long way in helping PAC personnel assimilate important technical aspects. They are, indeed, a credit to your organization.

3. It is, therefore, with great pleasure that I commend the following members of your team for the valuable services they rendered to the Philippine Air Force:

1LT COL ROBERT O. TACKERMAN 32042A
MAJOR ROBERT A. TOLBERT 28160A
MAJOR JONATHAN R. CRANE 16710A
CAPT RICHARD L. HAYES 40-2212014
DR. JAMES R. JOY
1701st CHARLES R. MILLER AF-103769X0

4. It is requested that a copy of this commendation form part of each individual's military personnel record.

JAMES A. VICTORIA
Colonel, USAF
Commanding Officer

20 JUN 1961
AF 103769X0

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED
9 MARCH 1963

1. SERIAL NUMBER: 017974 ✓ 2. NAME (Last-First-Middle): FOX, JEROME ✓

3. NATURE OF PERSONNEL ACTION: REASSIGNMENT And change of service Designation
4. EFFECTIVE DATE REQUESTED: 04 MAY 1963
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: V TO V V TO CP CP TO V CP TO CP
7. COST CENTER NO. CHARGEABLE: 3237-1250-1000
8. LOCAL AUTHORITY (Completed by Office of Personnel):

9. ORGANIZATIONAL DESIGNATIONS: 7
DDP/FE
FE/VCL - VIETNAM - CAMBODIA - LAOS
VIETNAM OPERATIONS SECTION
VI/CI OPERATIONS UNIT
10. LOCATION OF OFFICIAL STATION: WASHINGTON, D. C.

11. POSITION TITLE: OPS OFFICER
12. POSITION NUMBER: 2608
13. CAREER SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS
15. OCCUPATIONAL SERIES: 0136.01
16. GRADE AND STEP: 12 Re
17. SALARY OR RATE: \$9790 ✓

18. REMARKS:
FROM: DDI/OMR
OFFICE OF THE ASSISTANT DIRECTOR
ADJUTANT GENERAL/1504
ONE COPY TO SECURITY
Recorded by CSPD
CONCUR: [Signature] 15 Apr 63
DDI/OMR Date
CONCUR: [Signature] 15 Apr 63
Mr. Jerome Fox Date
FOR FURTHER INFORMATION CALL PAT X5459

10A. SIGNATURE OF REQUESTING OFFICIAL: [Signature]
LEE AUSTIN, CHIEF, FE/PERSONNEL
DATE SIGNED: 2 Mar 63
10B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [Signature]
Paul R. Wilson
DATE SIGNED: 18 Apr 63

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE	22. STATION CODE	23. INITIALS	24. MONTHS	25. DATE OF ENTRY	26. DATE OF LEI
37	10	50160	FE	10013	1	10/07/29	
27. SPECIAL REFERENCE	28. REQUIREMENT DATA	29. SEPARATION DATA	30. CORRECTION/CANCELLATION DATA	31. SECURITY	32. SEE	33. SOCIAL SECURITY NO.	
						34. SOCIAL SECURITY NO.	
35. NET DIFFERENCE	36. SENR. COMP. DATE	37. LMS. COMP. DATE	38. LAWYER CATEGORY	39. HEALTH AND CODE	40. SOCIAL SECURITY NO.		
41. PREVIOUS EMPLOYMENT SERVICE DATA	42. MILITARY CAP. CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA				

45. POSITION CONTROL CERTIFICATION: [Signature]
46. O.P. APPROVAL: [Signature]
DATE APPROVED:

FORM 1152 (Rev. 1-1962)

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

143

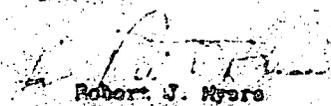
8 Mar 1963

MEMORANDUM FOR: CINFO/branch C

**SUBJECT: Mr. Jerome Fox, Request for Reassignment from
DDI/GER to FE/VCL**

1. The FE Division requests that arrangements be made with the DDI/GER for the reassignment of Mr. Jerome Fox, GS-12, to the VCL Branch to work on the recently approved North Vietnam program. The Vietnam Desk of VCL has a requirement for an officer to devote full time to the collection, collation and evaluation of material available on North Vietnam. This material, once assembled, will be used as a basis for both paramilitary and psychological warfare operations to be mounted against North Vietnam. It is felt that Mr. Fox is particularly qualified for this assignment with his excellent background as a research officer and the experience gained on his Far East assignment in 1959-62. The knowledge he gained at that time of covert operations in relation to his DDI responsibilities will be helpful to him in the work envisioned for him in FE/VCL. Mr. Fox has traveled in Southeast Asia and also dealt with North Vietnam as an operational target during his military service 1952-54.

2. It is our understanding that Mr. Fox is available for reassignment. He has been interviewed by Division officers who feel his assignment would satisfy an important requirement on this priority program. It is requested that his assignment to FE/VCL, without a change in Service Designation, be arranged with DDI for approximately one year. At the end of that time, based on a review of Mr. Fox's capabilities and interest in relation to a permanent DEP assignment, the possibilities of a change of service assignment would be explored.

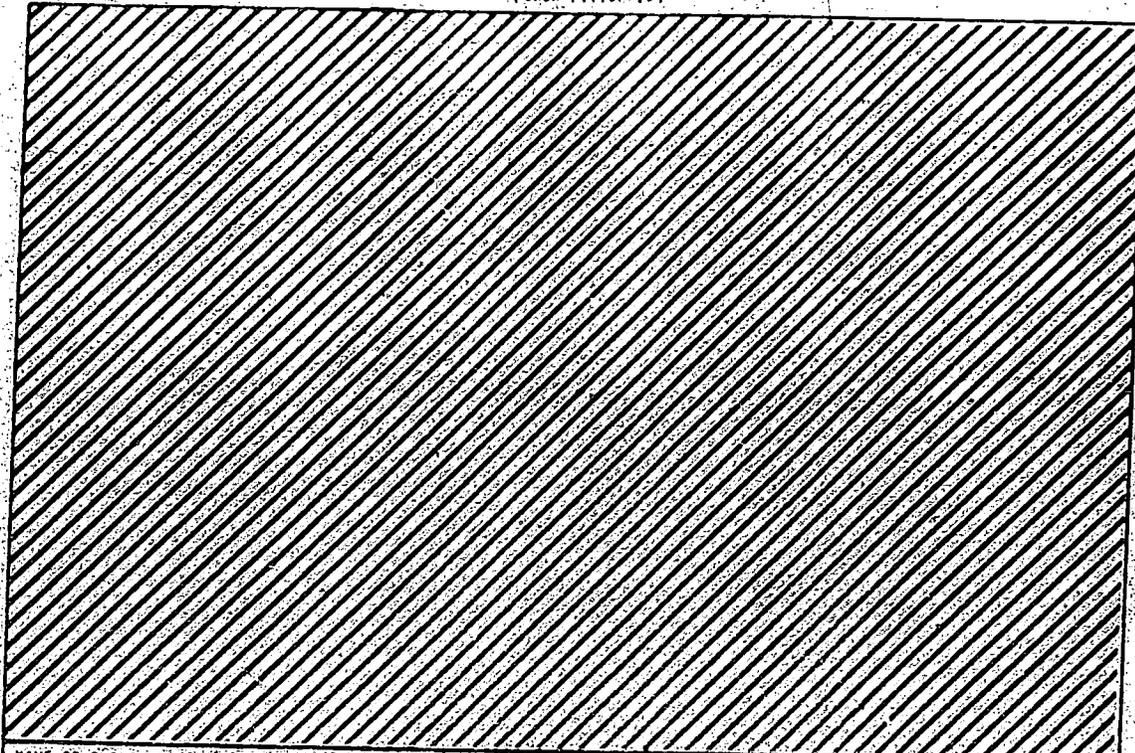

Robert J. Myers
Acting Chief, Far East Division

Approved by C/PNC
R. S. Shroy, Secy/PNC
15 MAR 1963

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED	
1. SERIAL NUMBER 017974		2. NAME (Last-First-Middle) FOX, Jerome ✓			23 November 1962	
3. NATURE OF PERSONNEL ACTION Reassignment and Transfer to Vouchered Funds				4. EFFECTIVE DATE REQUESTED MONTH: 11 DAY: 23 YEAR: 1962		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS V. TO V. <input checked="" type="checkbox"/> V. TO CF <input type="checkbox"/> CF TO V. <input type="checkbox"/> CF TO CF <input type="checkbox"/>		7. COST CENTER NO. CHARGEABLE 3257-1019-6000		8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDI/RR Office of the Assistant Director ANALYSIS BRANCH				10. LOCATION OF OFFICIAL STATION Washington, D. C.		
11. POSITION TITLE I.O. (Factory Mark)			12. POSITION NUMBER 1564	13. CAREER SERVICE DESIGNATION IR		
14. CLASSIFICATION SCHEDULE (GS, LD, etc.) GS		15. OCCUPATIONAL SERIES 1390-08 0132-00	16. GRADE AND STEP 12 2		17. SALARY OR RATE 9,700	
18. REMARKS Attached are: Form W-4, Employee's Withholding Exemption Certificate Form D-4-A, Certificate of Non-Residence in the District of Columbia Form Va.-4, Virginia Employee's Withholding Exemption Certificate. Copies to: Payroll Security						
19. SIGNATURE OF REQUESTING OFFICIAL JAMES C. WY, Chief, SI/EM/RR		DATE SIGNED 23 Nov. 62		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER MORTO E. GUTER, AD/RR		DATE SIGNED 17 DEC 1962
SPACES BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
21. PAY CODE 10	22. STATION CODE 750-13	23. EMPLOYEE CODE 1	24. MOBILE CODE	25. DATE OF BIRTH 10/09/28	26. DATE OF BIRTH	27. DATE OF BIRTH
28. MIL. EMPLOYER	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SOCIAL SECURITY NO.	34. SER.
35. RET. PREFERENCE	36. SER. COMP. DATE	37. LONG. COMP. DATE	38. EXEMPT. CATEGORY	39. FEEDBACK INSURANCE	40. SOCIAL SECURITY NO.	41. SER.
42. FEDERAL GOVERNMENT SERVICE DATA	43. FEDERAL TAX DATA	44. STATE TAX DATA	45. STATE TAX DATA	46. STATE TAX DATA	47. STATE TAX DATA	48. STATE TAX DATA
49. POSITION CONTROL CERTIFICATION 18 NOV 62			50. G.P. APPROVAL		DATE APPROVED 18 DEC 62	

SECRET
(When Filled In)



NAME OF EMPLOYEE (Last-First-Middle) <i>Rich. J. ...</i>	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER <i>1-2-503</i>
---	------------------------------------	--------------------------------

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 1-1-62.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE <i>2 JUL 1962</i>	SIGNATURE OF AGO REPRESENTATIVE <i>B. De Felice</i>
-------------------------------------	--

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

23 FEB 1961

MEMORANDUM FOR: Director of Personnel

THROUGH: Chief, FS, DD/P

THROUGH: Assistant to the DD/I (Administration) *W.S.*

SUBJECT: FOX, Jerome -- Promotion

1. It is requested that Mr. Jerome Fox be promoted from GS-11 to GS-12. Mr. Fox is currently assigned to Tokyo on the DD/I Foreign Field Annex. He entered the zone of consideration for promotion in October of 1958.

2. Mr. Fox was assigned to Tokyo in July of 1959 to serve as the [redacted] Officer. He has displayed expertise and professional competence in the markings field, functioning in an outstanding manner as the authoritative focal point for the program in the North Asian area. This request for promotion was initiated by the Chief, SIS, Tokyo, and favorably endorsed by the COG, Tokyo. The Chief of the [redacted] Staff, ORR, who recently returned from a visit to the Tokyo Station, personally observed Mr. Fox's effective working relationships with U S. officials and Foreign Liaison in Tokyo [redacted] and Hong Kong. Mr. Fox has demonstrated high devotion to duty and displayed a high degree of initiative and self-reliance.

3. Upon completion of Mr. Fox's overseas assignment, he will return to the ORR Departmental Staffing Complement in a position commensurate with the grade to which promotion is recommended.

SECRET

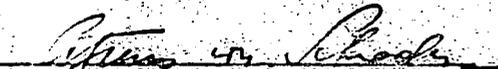
SUBJECT: FOX, Jerome -- Promotion

4. It is requested that FE/DD/P initiate the appropriate request for personnel action and that processing of this promotion action be accomplished as soon as possible. It is also requested that a copy of the 1150 be forwarded to this Office.

FOR THE ASSISTANT DIRECTOR, GPR:


PAUL H. HILDEBRAND
Chief, Administrative Staff

CONCURRENCES:


Assistant to the DD/I (Administration)

3/1/61
Date


Chief, FE Division

3/10/61
Date

SECRET

(When Filled In)

DATE PREPARED		REQUEST FOR PERSONNEL ACTION				V to V		V to UV							
Mo	Da					Yr	UV to V		UV to UV						
1. Serial No.		2. Name (Last-First-Middle)			3. Date of Birth		4. Ver. Prof.		5. See		6. CS - LOD				
		FOX, JEROME			Mo	Da	Yr	None-0	Code			Mo	Da	Yr	
					10	05	28	10	P-1	1	M 1				
7. SCD		8. CSC Reinst.			9. CSC Or Other Legal Authority			10. Appn. Method		11. REGU		12. LCD		13. MIL. SERV. CREDIT - LCD	
Mo	Da	Yr	Yes-1	Code				Mo	Da	Yr	Yes-1	Code	Mo	Da	Yr
			No-2								No-2				

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DMT ODD						Wash., D.C.					
16. Dept. Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. Field	Code	Identification Spec.				923-01		CS		1390-06	
	2										
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appraisal Number	
11	2	7,270		TR		Mo	Da	Yr	Mo	Da	Yr
						10	20	57	10	16	60
										9 5700 20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Reassignment to Capital		06		07 26 59		Regular		01			
+ Transfer											

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
OFFICE OF DDI (TOKYO) ENR STAFF Strategic Intelligence Staff				1825		Tokyo, Japan				37587	
33. Dept. Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. Field	Code	I.O. Factory Mark				E-96					
	5										
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appraisal	
11	2	7,270				Mo	Da	Yr	Mo	Da	Yr
						10	20	57	10	16	60

SOURCE OF REQUEST

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
Walter L. Little, OIC/ENR		Robert D. Canham, OIC/Personnel	
B. For Additional Information Call to name & telephone area			
Beaule Little, 72257			

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			B. Personnel		
B. The Captain		1 1955	Approved By		
C. Classification					
Remarks	2 copies Security				
Please transfer from (numbered to unvouchers) Unit on 26 July 1955.					
Subject to replace Walter Little, who is returning to 31 Dec. 1955.					

SECRET

SECRET

Classify According To Control.

REQUEST FOR PERSONNEL ACTION												VOUCHERED			
1. Serial No.		2. Name (Last-First-Middle) Fox Jerome				3. Date Of Birth Mo Do Yr Oct 9 28			4. Vac. Pref. None-0 Pr-1 QR-2 1		5. Sex M		6. CS - LOD Mo Do Yr		
7. SCD Mo Da Yr		8. CSC Retire Yes-1 No-2		9. CSC Or Other Legal Authority		10. Appt. Affidav Mo Do Yr			11. FEGLI Yes-1 No-2		12. LCD Mo Do Yr		13. Yes-1 No-2		

PREVIOUS ASSIGNMENT

14. Organizational Designations DDI/Office of Research & Reports				Code		15. Location Of Official Station Washington, D.C.				Section Code		
16. Dept. Field Dept. X Valid Prn		17. Position Title Identification Specialist				18. Position No. 923.01		19. Serv. OS		20. Occup. Series 1370.06		
21. Grade & Step 9-2		22. Salary Or Rate \$ 5575.		23. SD IR		24. Date Of Grtg Mo Do Yr		25. PSI Due Mo Do Yr		26. Appropriation Number 8-5709-20		

ACTION

27. Nature Of Action Promotion		Code		28. Eff. Date Mo Do Yr ACAP		29. Type Of Employee Regular		Code		30. Separation Date	
-----------------------------------	--	------	--	-----------------------------------	--	---------------------------------	--	------	--	---------------------	--

PRESENT ASSIGNMENT

31. Organizational Designations DDI/Office of Research & Reports				Code		32. Location Of Official Station Washington, D.C.				Section Code		
33. Dept. Field Dept. X Valid Prn		34. Position Title Identification Specialist				35. Position No. 923.01		36. Serv. OS		37. Occup. Series 1370.06		
38. Grade & Step 11-1		39. Salary Or Rate \$ 6390.		40. SD IR		41. Date Of Grtg Mo Do Yr		42. PSI Due Mo Do Yr		43. Appropriation Number 8-5709-20		
SOURCE OF REQUEST												
A. Requested By (Name And Title) WILLIAM C. CROFT - 2165 HR						C. Request Approved By (Signature And Title) PAUL H. HILGENDORF Asst. Chief, Administrative Staff, OER						
CLEARANCES												
A. Career Board		Signature		Date		D. Placement		Signature		Date		
B. Pers. Control		Signature		Date		E.		Signature		Date		
C. Classification		Signature		Date		F. Assured By		Signature		Date		

11329

SECRET

CONFIDENTIAL

STANDARD FORM 52 REQUEST FOR PERSONNEL ACTION	21 JUN 1956 VOUCHERED
--	--------------------------

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., XXXXXX One given name, initials, and surname) JEROME FOX	2. DATE OF BIRTH 9 Oct 1928	3. REQUEST NO.	4. DATE OF REQUEST 12 June 56
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion		6. EFFECTIVE DATE A. PROPOSED ASAP	7. C. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)			

FROM— Identification Specialist F-925.09 GS-1390.06-07 \$4660 per annum DDI/Office of Research and Reports Office of Chief, Coordination Techniques and Methods Division Analysis and Reports Branch Washington, D.C.	9. POSITION TITLE AND NUMBER	TO— Identification Specialist F-924.09 GS-1390.06-09 \$5440.00 per annum DDI/Office of Research and Reports Office of Chief, Coordination Techniques and Methods Division Analysis and Reports Branch Washington, D.C.
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	10. SERVICE GRADE AND SALARY	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
11. ORGANIZATIONAL DESCRIPTIONS		
12. FIELD OR DEPARTMENTAL		

9. REMARKS (Use reverse if necessary)
Complies with CIA Regulation 20-539

13. REQUESTED BY (Name and title) JAMES G. MAY, Chief, D/T	14. REQUEST APPROVED BY <i>Paul H. Hildebrand</i> Signature: PAUL H. HILDEBRAND
15. FOR ADDITIONAL INFORMATION (Name and telephone extension) WILLIAM C. COOLEY x 2485	16. TITLE: Chief, Administrative Staff, GS8

17. VETERAN PREFERENCE	18. POSITION CLASSIFICATION ACTION NEW VICE I A REAL 3D/IR
------------------------	---

19. SEX: M	20. DATE OF APPOINTMENT: 17 Jun 56	21. LEGAL RESIDENCE: MD
22. APPOINTMENT AUTHORITY: 5-5709-20	23. DATE OF APPOINTMENT: 17 Jun 56	24. STATE: MD

PERIODIC STEP INCREASE 1957 **17 Jun 56**
TO SALARY B **\$4660**

25. CLEARANCE	INITIAL OR SIGNATURE	DATE	REMARKS
26. DATE OF LAST PROMOTION			
27. CLASSIFICATION			
28. PAY GRADE			

29. APPROVED BY
Robert H. Smith
CONFIDENTIAL

SECRET
SECURITY INFORMATION

ENTRANCE ON DUTY NOTICE		1. DATE
2. TO: Mr. Cooley		22 June 1955
3. OFFICE (Division, Branch, Etc.) DDI/CBR		
4. THE PERSON NAMED BELOW MEETS THE STANDARDS FOR EMPLOYMENT WITH THIS AGENCY SUBJECT TO THE TYPE OF CLEARANCE INDICATED IN ITEM NO. 9. THE SIGNED CLEARANCE FROM IAS FOR ENTRANCE ON DUTY HAS BEEN MADE A PART OF THE PERSONNEL FILE OF THIS INDIVIDUAL. HE/SHE IS REPORTING FOR DUTY THIS DATE.		
5. NAME (LAST) Fox	(FIRST) Jerome	6. JOB TITLE AND GRADE Ident. Spec. GS-7
7. EFFECTIVE DATE OF ACTION 15 June 1955	8. <input checked="" type="checkbox"/> E.O.O. <input type="checkbox"/> REASSIGNMENT OTHER:	9. TYPE CLEARANCE Provisional
10. REMARKS: (Include Medical or Other Limitations) Subject to BOD, testing, 21 June 1955.		
H. J. Reynolds PERSONNEL OFFICE		

FORM NO. 37-110 PREVIOUS EDITIONS NOT TO BE USED
20V 1952

SECRET

141

STANDARD FORM 52
PREPARED BY THE
U. S. GOVERNMENT PRINTING OFFICE
WASHINGTON, D. C. 20540

REQUEST FOR PERSONNEL ACTION

VOUCHERED 16 FEB 1955

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. DOCK - One given name, initial(s), and surname) JEROME FOX	2. DATE OF BIRTH 9 Oct 1928	3. REGISTRY NO.	4. DATE OF REQUEST 2 Feb 55
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Appointment		6. EFFECTIVE DATE A. PROPOSED: ASBP	7. C. S. OR OTHER LEGAL AUTHORITY
B. POLICY (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

Exempt

8. POSITION TITLE AND NUMBER	10. TO - Identification Specialist P-925.00-99
9. SERVICE GRADE AND SALARY	GS-1390.06-07 \$4205.00 per annum
11. ORGANIZATIONAL DESIGNATION	DDI/Office of Research and Reports Office of Chief, Coordination Techniques and Methods Division Analysis and Reports Branch Washington, D. D.
12. HEADQUARTERS	
13. FIELD OR DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Attachments:
 1. Interview Sheet
 2. cys. Report of Medical History
 3. cys. PHS (Appendix I)
 4. cys. of Letter of Commendation
 5. Pictures

14. REQUEST APPROVED BY
 Signature: *L. S. Hitchcock*
L. S. HITCHCOCK
 Title: **Executive, OPR**

15. FOR ADDITIONAL INFORMATION (Name and telephone extension)
WILLIAM G. COOLEY x 2485 108

16. VETERAN PREFERENCE	17. POSITION CLASSIFICATION ACTION																
<table border="1"> <tr> <td>None</td> <td>50%</td> <td>75%</td> <td>100%</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	None	50%	75%	100%					<table border="1"> <tr> <td>NEW</td> <td>VOY</td> <td>1-A</td> <td>REAL</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p style="text-align: center;">SD/IP</p>	NEW	VOY	1-A	REAL				
None	50%	75%	100%														
NEW	VOY	1-A	REAL														
18. DATE OF APPOINTMENT (Include agency)	19. LEGAL RESIDENCE																
	<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED (STATE)																

11. STANDARD FORM NO. 52

20. CLASSIFICATION	21. DATE OF SIGNATURE	22. DATE	23. BY (NAME)
24. NAME OF AGENT	25. NAME OF AGENT	26. NAME OF AGENT	27. NAME OF AGENT
28. NAME OF AGENT	29. NAME OF AGENT	30. NAME OF AGENT	31. NAME OF AGENT

1955 2-4-55

CONFIDENTIAL

DATE: JUN 9 1955

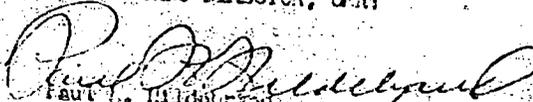
TO : Placement and Utilization Division, Personnel Office

FROM : Assistant Director, ORR

SUBJECT: JEROME FOX

The case of Jerome Fox, ~~has been~~ a
(provisionally) cleared applicant has been thoroughly reviewed
and this Office does guarantee that the position to which he
is to be assigned does fall within the personnel ceiling of
ORR. Therefore, it is requested that the above-named indi-
vidual be brought on duty as soon as possible.

FOR THE ASSISTANT DIRECTOR, ORR:


Paul T. Hildbrand
Chief, Administrative Staff, ORR

CONFIDENTIAL

CONFIDENTIAL

Office Memorandum • UNITED STATES GOVERNMENT

TO : Placement and Utilization Division, O/P
ATTN : Miss Kennedy

DATE: 21 April 1955

FROM : Personnel Officer, OPR

SUBJECT: FOX, Jerome - Request for Provisional Clearance

1. It is requested that a Provisional Clearance be granted for Mr. Jerome Fox to allow his entrance on duty at the earliest opportunity.

2. This Office is prepared to assign Mr. Fox to an unclassified project in the Library of Congress for the Techniques and Methods Division. It is the opinion of the Techniques and Methods Division that the material produced by this project will be advantageous to the Division.

William C. Cooley
WILLIAM C. COOLEY

St/A/RR
WCCooley:lp

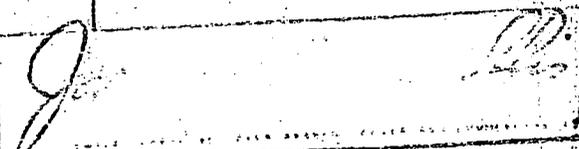
Distribution:
0 & 1 - Addressee
2 - St/A/RR
2 - AD/RR

CONFIDENTIAL

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE	6 Sept. 1974	FILE NO.	6215
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP				
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, CP	EMPLOYEE NUMBER	017974		
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) EA	ID CARD NUMBER			
ATTN:	CHIEF SUPPORT STAFF	OFFICIAL COVER	<input type="checkbox"/> ESTABLISHED		
REF:	RETIREMENT		<input checked="" type="checkbox"/> DISCONTINUED		
SUBJECT:	FOX, Jerome	UNIT			

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

ESTABLISHMENT OF OFFICIAL COVER-BLOCK RECORDS	<input checked="" type="checkbox"/>	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	<input checked="" type="checkbox"/>
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE		EFFECTIVE DATE: EOD	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR TOY OTHER (Specify)		SUBMIT FORM 3254 TO BE ISSUED. (HR 20-11)	<input checked="" type="checkbox"/>
SUBMIT FORM 642 TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY	<input checked="" type="checkbox"/>	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY	<input checked="" type="checkbox"/>
SUBMIT FORM 642 TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY	<input checked="" type="checkbox"/>	EA: CATEGORY I	<input type="checkbox"/>
SUBMIT FORM 3254 TO BE ISSUED. (HR 20-11)	<input checked="" type="checkbox"/>	RETURN ALL DESIGN AND DOCUMENTATION TO CCS	<input checked="" type="checkbox"/>
SUBMIT FORM 2888 FOR HOSPITALIZATION CARD.	<input checked="" type="checkbox"/>	SUBMIT FORM 2888 FOR HOSPITALIZATION CARD.	<input checked="" type="checkbox"/>
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 24B-20)		DO NOT WRITE IN THIS BLOCK	
EA: CATEGORY I	<input type="checkbox"/>	CATEGORY II	<input type="checkbox"/>
SUBMIT FORM 2888 FOR HOSPITALIZATION CARD	<input checked="" type="checkbox"/>		
HELD AND BY COVER HISTORY Subject will be acknowledged as CIA for entire period of employment and is not to reveal specific places or locations of cover assignments.			
DISTRIBUTION: COPY 1 - TO HQ COPY 2 - OPERATING COMPONENT COPY 3 - OI COPY 4 - DE AS COPY 5 - IS			

SECRET

FORM 1051

SECRET

NOTIFICATION OF ESTABLISHMENT OF OFFICIAL COVER BACKSTOP		DATE 26 August 1966
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	ESTABLISHED FOR FOX, Jerome (NMI)
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) FE	
ATTN: FE/Security	FILE NO. 6415	
REF: Form 1322 dated 24 August 1966	ID. CARD NO. 8575	
OFFICIAL COVER BACKSTOP ESTABLISHED UBAP Technical Services Group (Prov)	EMPLOYEE NO.	

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

Block Record:
(OPMEMO 20-800-11)

a. Temporarily for _____ days, effective _____

b. Continuing, effective _____ as of August 1959

Submit Form 642 to change limitation category.
(NHB 20-77)

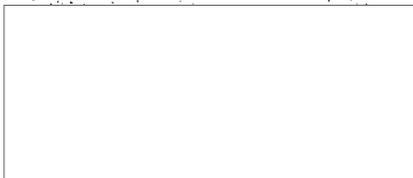
Ascertain if _____ W-2 being issued.
(NHB 20-661.7)

Submit Form 1322 for any change affecting this cover.
(R 240-250)

Submit Form 1323 for transferring cover responsibility.
(R 240-250)

Remarks:

Cover History



RCB/ucg

James H. Franklin

DISTRIBUTION: Copy 1-PD; Copy 2-Operating Component; Copy 3-OS D'01; Copy 4-TELSAC; Copy 5-PAD/OS; Copy 6-...; Copy 7-...

SECRET

NOTIFICATION OF ESTABLISHMENT OF _____		DATE 8 November 1962
TO: <input checked="" type="checkbox"/> (Check)	CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
	CHIEF, OPERATING COMPONENT - ORR	FOX, Jerome
ATTN:	Administrative Staff	FILE NO. K-2303
REF:	Verbal request for cover	ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED		
Technical Services Group, Provisional		

BLOCK RECORDS:
(OPMEMO 30-800-11)

- a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____
- b. CONTINUING, EFFECTIVE _____ EOD _____

SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3.
(HD 30-800-7)

ASCERTAIN THAT W-2 BEING ISSUED.
(HD 30-861-1)

SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER.
(R 340-250)

SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY.
(R 340-250)

REMARKS:

THIS COVER MUST REMAIN

ON TOP OF THE

COPY TO CPO/DA

CGS/DI

James H. Franklin

DISTRIBUTION: 1 copy to CPO/DA, 1 copy to CPO/DA, 1 copy to CPO/DA

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11611 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE LATEL 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FOX JEROME	017974	45	997	V GS 13 6	\$29,451

SECRET

1 July 1959

File: K - 2303

MEMORANDUM FOR: Chief, Records and Services Division
Office of Personnel

SUBJECT: Jerome FOX

1. Cover arrangements ~~XXXXXXXXXXXX~~ have been completed for the above-named Subject.
2. Effective 15 June 59, it is requested that your records be properly blocked ~~XXXXXXXX~~ to deny ~~XXXXXXXX~~ Subject's current Agency employment to an external inquirer.
3. This memorandum confirms an oral request of 1 July 1959 by Mr. E. C. Davics, Room 1608, "L" Building, Extension 2420.

Harry W. Little, Jr.
HARRY W. LITTLE, JR.
Chief, Central Cover Division

cc: SSB/OS

SECRET

FORM 1580a

14-00001

14-00000

FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 01 MAY 1974.

FOX JEROME

017974

42371374

DLR: 28 MAY 75

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION							
1. SERIAL NUMBER 17774		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME					
3. NATURE OF PERSONNEL ACTION - RETIREMENT (DISABILITY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM FROM RSI.				4. EFFECTIVE DATE MO DA YR 15 14 75		5. CATEGORY OF EMPLOYMENT REGULAR	
A. FUNDS		V TO V		V TO CF		7. FAN AND NSCA	
		CF TO V		CF TO CF		8. CSC OR OTHER LEGAL AUTHORITY PI. 85-643 SECT 231	
9. ORGANIZATIONAL DESIGNATIONS DDO/EA DIVISION DEVELOPMENT COMPLEMENT				10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER DCOF		13. SERVICE DESIGNATION DUG	
14. CLASSIFICATION SCHEDULE (GS, 1B, etc.) GS		15. OCCUPATIONAL SERIES 3136.01		16. GRADE AND STEP 13 6		17. SALARY OR RATE 25051	
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. INTEGRAL CODE		24. HEIGHT CODE		25. DATE OF BIRTH MO DA YR 10 11 23		26. DATE OF GRADE MO DA YR	
27. DATE OF LEI MO DA YR		28. NFE EXPIRES MO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. CSC 2. CIA 3. NONE	
31. SEPARATION DATA CODE		32. CONDUCT/CONCERN CODE		33. SECURITY		34. SEL	
35. VET PREFERENCE CODE 0: NONE 1: 5 YR 2: 10 YR		36. SERV. COMP. DATE MO DA YR		37. LEAVE COMP. DATE MO DA YR		38. CAREER CATEGORY SAB SSOV ESOV IISOP	
39. FEEDBACK HEALTH INSUR		40. FEDERAL TAX DATA		41. LEAVE CAT		42. FEDERAL TAX DATA	
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0: NO PREVIOUS SERVICE 1: 600 REAR/IN SERVICE 2: 600 IN SERVICE LESS THAN 3 YRS 3: 600 IN SERVICE UNDER 3 YRS		44. LEAVE CAT		45. FEDERAL TAX DATA		46. FEDERAL TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION							

PL 86-361
3 76 MAY 1976

SECRET

86G: 25 SEPT 74

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER 017974		2. NAME (LAST-FIRST MIDDLE) FOX JEROME							
3. NATURE OF PERSONNEL ACTION EXTENDED SICK LEAVE - DISABILITY RETIREMENT NTE: 14 MAY 1975				6. EFFECTIVE DATE MO DA YR 09 06 74		5. CATEGORY OF EMPLOYMENT REGULAR			
4. FUNDS <input checked="" type="checkbox"/> X		V TO V		V TO CF		7. PAN AND NSCA 5237 1392 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
CF TO V		CF TO CF		9. ORGANIZATIONAL DESIGNATION DDO/EA DIVISION DEVELOPMENT COMPLEMENT					
10. LOCATION OF OFFICIAL STATION WASH., D.C.						11. POSITION TITLE OPS OFFICER			
12. POSITION NUMBER 9997		13. SERVICE DESIGNATION DMG				14. CLASSIFICATION SCHEDULE (GS, LE, OR)		15. OCCUPATIONAL SERIES 0136.01	
16. GRADE AND STEP 13 6		17. SALARY OR RATE 24122				18. DATES LWD: 06 SEPTEMBER 1974 OTHER:			
HOME BASE: EA									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 31	20. EMPLOY CODE 40	21. OFFICE CODING OFFICE SYMBOLIC 45997 EA		22. STATION CODE 75013	23. INTEROFF. CODE	24. MONTHS CODE 1	25. DATE OF BIRTH MO DA YR 10 09 28		26. DATE OF OFFICE MO DA YR
27. DATE OF LEI MO DA YR		28. SPECIAL REFERENCE MO DA YR 05 14 75		29. EMPLOYMENT DATA CSC OFFICE SYMBOLIC STATION CODE		30. SEPARATION DATA CODE		31. Correction/Contingency Data MO DA YR EOD DATA	
32. SECURITY REG. NO.		33. SECURITY REG. NO.		34. SOCIAL SECURITY NO.		35. VET REFERENCE CODE		36. SEV. COMP. DATE MO DA YR	
37. LOYALTY COMP. DATE MO DA YR		38. CAREER CATEGORY C-# E-# M-# N-#		39. FEDERAL HEALTH INSURANCE CODE		40. STATE TAX DATA FEDERAL TAX DATA		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE	
42. LEAVE CAT. CODE		43. FEDERAL TAX DATA FEDERAL TAX DATA		44. STATE TAX DATA STATE TAX DATA		45. SOCIAL SECURITY NO.		46. SOCIAL SECURITY NO.	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>POSTED</p> <p><i>9/20/74</i></p> </div>									

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(When Filled In)

DMS: 10 SEPT 74

NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER 17074		2 NAME (LAST FIRST MIDDLE) FOX JEROME	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE 15 74
			5 CATEGORY OF EMPLOYMENT REGULAR
6 FUNDS	V TO V CF TO V	V TO CF CF TO CF	8 CEC OR OTHER LEGAL AUTHORITY 5 USC 433 J
9 ORGANIZATIONAL DESIGNATIONS DDO/EA DIVISION DEVELOPMENT COMPLEMENT		10 LOCATION OF OFFICIAL STATION ASH., D.C.	
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 3097	13 SERVICE DESIGNATION DNC
14 CLASSIFICATION SCHEDULE (GS, LS, etc.) GS	15 OCCUPATIONAL SERIES 156.01	16 GRADE AND STEP 13 6	17 SALARY OR RATE 29122
18 REMARKS OTHER HOME BASE: EA			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE 37	20 (Agency Code) 10	21 OFFICE CODE (NO) 49007 EA	22 STATION CODE 75013
23 DATE OF BIRTH 11 14 25	24 DATE OF GRADE 11 14 25	25 DATE OF LEAVE 11 14 25	26 SECURITY INFO NO 18-558
27 VET PREFERENCE COA	28 SERV COMP DATE NO	29 LONG COMP DATE NO	30 CARRIER STATUS EDU EMP
31 PREVIOUS CIVILIAN GOVERNMENT SERVICE NO	32 LEAVE CAT CODE NO	33 FEDERAL TAX DATA NO	34 STATE TAX DATA NO
SIGNATURE OR OTHER AUTHENTICATION			
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;"><i>[Signature]</i></p> </div>			

SECRET
(When Filled In)

REF: 22 JAN 74

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017574		2. NAME (LAST FIRST MIDDLE) FOX, JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE MO DA '74 01 20 74
5. FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> CI TO V		<input type="checkbox"/> V TO CI <input type="checkbox"/> CI TO CI	6. CATEGORY OF EMPLOYMENT REGULAR
7. FAN AND NDCA 4227 1374 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403	
9. OCCUPATIONAL DESIGNATIONS DDG/EA DIVISION			10. LOCATION OF OFFICIAL STATION WASH. D.C.
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 11408	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, IS, OS, 1)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	13 6	24122
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. AGENCY CODE	20. EMPLOY CODE	21. CHARGE CODE FUNCTIONAL ELEMENT 45020 EA	22. STATION CODE 75013
23. RECEIPT DATE	24. SPECIAL REFERENCE	25. RETIREMENT DATA	26. SEPARATION DATA CODE
27. DATE OF BIRTH MO DA '74 10 09 28	28. DATE OF GRADE MO DA '74	29. DATE OF LEAVE MO DA '74	30. SOCIAL SECURITY NO.
31. (1) PREFERENCE	32. SERV LEAVE DATE	33. LEAVE COMP DATE	34. CARRIER CATEGORY
35. (2) PREFERENCE	36. SERV LEAVE DATE	37. LEAVE COMP DATE	38. HEIGHT / WEIGHT / HAIR / EYES
39. (3) PREFERENCE	40. SERV LEAVE DATE	41. LEAVE COMP DATE	42. SOCIAL SECURITY NO.
43. FEDERAL GOVERNMENT SERVICE		44. LEAVE DATA	45. STATE DATA
46. FEDERAL GOVERNMENT SERVICE		47. LEAVE DATA	48. STATE DATA
SIGNATURE OR OTHER AUTHENTICATION			49. SIGNATURE
			FOX JEROME

SECRET

FOI
01/25/74

155

F. 2108

1. SERIAL NO		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP MONTHS	
C17974		FGX JEROME		45 443		CP			
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION					
Grade	Step	Salary	Low III Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ARI
GS	13	23433	10/17/73	GS	13	24122	10/14/73		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>[Signature]</i>						10 OCT 1973			
<input type="checkbox"/> NO EXCESS DWP <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						ACCREDITED BY			
151						<i>[Signature]</i>			
FORM 560 E Use previous editions PAY CHANGE NOTIFICATION (4-51)									

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FGX JEROME	C17974	45	140	V GS 13 5	241,913

14-00000

*PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER
11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962.*

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FOX JEROME	017974	45	440	CF GS 13 5	\$22,328

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

USS 04750/73

1. SERIAL NUMBER 017514		2. NAME (LAST, FIRST, MIDDLE) JCA JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE MO DA YR 05 24 73
5. FUNDS		6. CATEGORY OF EMPLOYMENT	
V TO V	V TO O	7. FAR AND NSCA 5137 1034 0000	
O TO V	A O TO O	8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS JCS/FA		10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 4335	13. CAREER SERVICE DESIGNATION
14. CLASSIFICATION SCHEDULE (SA, SB, etc.) US	15. OCCUPATIONAL SERIES 0136001	16. GRADE AND STEP 13	17. SALARY OR RATE
18. REMARKS			
SIGNATURE OF OTHER AUTHORITY			

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FOX JEROME	017974	45 440	CF	GS 13 5	\$21,237

F-22

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
017974		FOX JEROME		45 440		CF			
6. OLD SALARY RATE					7. NEW SALARY RATE				
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	8. TYPE ACTION	
GS 13	4	\$19,537	10/19/69	GS 13	5	\$20,125	10/17/71	ST	ADJ
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE						DATE			
<i>Kelley W. ...</i>						<i>7/16/37</i>			
<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									
CLASS INITIALS					AUTHORITARY				
FORM 360 E					PAY CHANGE NOTIFICATION				

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11976 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: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FOX JEROME	017974	49	440	CF GS 13 4	\$19,537

SEP 1 1970

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017274		2. NAME (LAST, FIRST, MIDDLE) FOX, JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE MO DA YR 09 21 70	
5. FUNDS V TO V CF TO V: X		6. CATEGORY OF EMPLOYMENT REGULAR	
7. Financial Analysis Fee Chargeable		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP/FE FOREIGN FIELD FE/PNT-MANILA STATION DI LATERAL BRANCH		10. LOCATION OF SPECIAL STATION MANILA, PHILIPPINE IS	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 1915	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, FE, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13-4	17. SALARY OR RATE 13437
18. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING 45340 FE	22. REPORT CODE 57507
23. DATE OF BIRTH MO DA YR 10 10 28	24. DATE OF GRADE MO DA YR	25. DATE OF SER. MO DA YR	26. SECURITY (S, C, R, etc.) S
27. SPECIAL REFERENCE	28. RETIREMENT DATA	29. SPECIAL DATA CODE	30. COMMUNICATIONS DATA
31. FEDERAL EMPLOYMENT	32. STATE EMPLOYMENT	33. FEDERAL TAX DATA	34. STATE TAX DATA
35. SIGNATURE OR OTHER AUTHENTICATION			

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9 21 70

FORM 1120
1-68

SECRET FVD

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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11828 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: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FOX JEROME	017976	45	440	CF GS 13 4	\$18,497

F22

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
017976		FOX JEROME		45 440		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	M	ADJ.
GS 13	3	\$16,065	10/20/68	GS 13	4	\$17,393	10/19/69		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>R. H. [unclear]</i>							DATE 6 OCT 69		
<input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> EXCESS DEDUCTED AT END OF WAITING PERIOD									
SUPERVISOR INITIALS <i>[unclear]</i>									
PAY CHANGE NOTIFICATION									

NO LINES

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PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNCS	GR-STEP	NEW SALARY
FCX JEROME	017974	45	440	CF GS 13 3	\$16,866

SECRET
(When Filled In)

FVD: 2 MAY 69

NOTIFICATION OF PERSONNEL ACTION

OCI

1. SERIAL NUMBER: 017974
2. NAME (LAST FIRST MIDDLE): FOX, JEROME

3. NATURE OF PERSONNEL ACTION: REASSIGNMENT
4. EFFECTIVE DATE: 05 02 69
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: V TO V, V TO CF, CF TO V, X, CF TO CF
7. Financial Analysis No. Chargeable: 9137 1039 0000
8. CSC OR OTHER LEGAL AUTHORITY: 50 USC 403 J

9. OPERATIONAL DEMONSTRATIONS: DDP/FE FOREIGN FIELD FE/PMI-MANTILA STATION LIAISON BRANCH
10. LOCATION OF OFFICIAL STATION: MANILA, PHILIPPINE IS

11. POSITION TITLE: OPS OFFICER
12. POSITION NUMBER: 4947
13. SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (GS, FS, etc.): GS
15. OCCUPATIONAL SERIES: 0135.01
16. GRADE AND STEP: 13 3
17. SALARY OR RATE: 15369

18. REMARKS: HOME BASE: FE

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE		22. STATION CODE	23. INTERIOR CODE	24. MAINT CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEL
37	10	45440	FE	57007		3	10 09 26		
28. NET LEAVES		29. SPECIAL PERFORM	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CLASSIFICATION DATA		33. SECURITY RTO NO	34. SER
						EOD DATA			
35. VET PREFERENCE		36. SERV COMP DATE		37. IOWD COMP DATE		38. CAREER CATEGORY		39. LEGAL/HEALTH DISBURSE	
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE				41. LEAVE CAT CODE		42. FEDERAL TAX DATA		43. STATE TAX DATA	

SIGNATURE OF OTHER AUTHENTICATION

POSTED
150209
[Signature]

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1100
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SECRET
(When Filled In)

JLB: 14 APR 69

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 017974		2. NAME (LAST, FIRST, MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION CONVERSION		4. EFFECTIVE DATE 04 16 69	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	V TO V C TO V	V TO C C TO C	7. PAY GRADE AND PAY RANGE 9137 1375 0000
8. ORGANIZATIONAL DESIGNATIONS DDP/FE FE/PMI - PHILIPPINES, MALAYSIA, INDONESIA PHILIPPINE SECTION		9. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 4024	13. SERVICE INDICATOR D
14. CLASSIFICATION SCHEDULE (DA, IS, PE, J)	15. OCCUPATIONAL SERIES GS	16. GRADE AND STEP 0136, 01 13 3	17. SALARY OF RATE 15363
18. REMARKS WASH., D.C. HOME BASE: FE			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 56	20. EMPLOY CODE 10	21. OFFICE CODE 45140	22. CLASS CODE FE	23. BRIGADE CODE 75013	24. POSITION CODE 1	25. GRADE AND STEP 13 3	26. DATE OF ACTION 04 16 69	27. DATE OF BIRTH	28. DATE OF DEATH	29. DATE OF ENTRY
30. TIME PERIOD	31. SPECIAL REFERENCE	32. RETIREMENT DATA	33. SEPARATION DATA CODE	34. CURRENT EDUCATIONAL LEVEL	35. DATA		36. SECURITY	37. SEX	38. RACE	39. RELIGION
40. VET PREFERENCE	41. VET COMP DATE	42. LONG COMP DATE	43. CAREER CATEGORY	44. HEALTH INSURANCE		45. SOCIAL SECURITY NO.		46. STATE TAX DATA		
47. PREVIOUS CIVILIAN GOVERNMENT SERVICE				48. LEAVE CAT CODE	49. PRELIMINARY DATA		50. STATE TAX DATA			

SIGNATURE OR OTHER AUTHENTICATION

POSTED

14 APR 69

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FORM 1150
1-69

Use Previous Edition

SECRET

PLW

SDF: 7 NOV 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

(SDF)

1. SERIAL NUMBER 012974		2. NAME (LAST, FIRST, MIDDLE) FOX, JEROME	
3. NATURE OF PERSONNEL ACTION PROMOTION			4. EFFECTIVE DATE 10 20 62
5. FUNDS V TO V CF TO V X CF TO CF			6. CATEGORY OF EMPLOYMENT REGULAR
7. ORGANIZATIONAL DESIGNATIONS DDP/FE FE/FMI-PHILIPPINES, MALAYSIA, INDONESIA PHILIPPINE SECTION			8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. POSITION TITLE OPS OFFICER			10. LOCATION OF OFFICIAL STATION WASH., D.C.
11. POSITION NUMBER 4024		12. SERVICE DESIGNATION D	
13. CLASSIFICATION SCHEDULE (OS, IS, etc.) FSR GS	14. OCCASIONAL RATE 0136.01	15. GRADE AND STEP 05 5 13 3	16. SALARY OR RATE 13330 15369
17. REMARKS WASH., D.C.			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODING ALPHABETIC 55140 FE	22. STATION CODE 75013	23. INTEGRAL CODE S	24. GRADE CODE 1	25. DATE OF BIRTH 10 09 25	26. DATE OF GRADE 10 20 62	27. DATE OF LET 10 20 62
28. VET. PREFERENCE NO DA 19	29. SPECIAL REFERENCE	30. RETIREMENT DATA CIC CA P A P P P	31. SEPARATION DATA CODE	32. Correction/Correction Date TYPE NO DA 19	33. SECURITY NO. NO.		34. SER	
35. VET. PREFERENCE CODE	35. SERV. COMP. DATE NO DA 19	37. LONG. COMP. DATE NO DA 19	38. CAREER CATEGORY CAR SERV CODE PROM TEMP	39. FEGLI - HEALTH INSURANCE CODE 5 - MAINT 11 195	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE 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 1 - YES 2 - NO		44. STATE TAX DATA FORM EXECUTED 1 - YES 2 - NO			

SIGNATURE OR OTHER AUTHENTICATION

POSTED
11-9-62
JLB

FORM 1150
1-62

Use Previous Edition

SECRET

JLB

Included from automatic downgrading and declassification

(When Filled In)

58

COMPENSATION
BY DIVISION

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
017974		FOX JEROME		45 140		CF			
A. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last EM. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 12	5	13798	09/11/66	GS 12	6	14206	09/08/68		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE: <i>[Signature]</i>						DATE			
<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									
CLERK'S INITIALS		FOX JEROME						SIGNED BY	
FORM 560 E Use previous editions		PAY CHANGE NOTIFICATION						(4-51)	

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 215 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
FOX JEROME	017974	45	140	CF GS 12 5	\$12,469	\$13,798

JLB: 17N MAY 68

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
017974		FOX JEROME									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				05 19 68		REGULAR					
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
		CF TO V		X CF TO CF		8137 1375 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DDP/FE FE/PMI-PHILIPPINES, MAYASIA, INDONESIA PHILIPPINE SECTION					WASH., D.C.						
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER					4025		D				
14. CLASSIFICATION SCHEDULE (GS, 1B, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OF RATE				
FSR GS			0136.01		05 5 12 5		12604 12989				
18. REMARKS											
WASH., D.C.											
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	45140 FE		75013	S	1	10 09 28				
28. PTE EMPRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION / CANCELLATION DATA		33. SECURITY REG NO	34. SER
										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	
CODE: 1. NO PREVIOUS SERVICE 2. 1 YEAR OR MORE SERVICE 3. 2 YEARS OR MORE SERVICE (LESS THAN 3 YEARS) 4. 3 YEARS OR MORE SERVICE (LESS THAN 5 YEARS)						NO EXEMPTIONS CODE NO EXEMPTIONS CODE NO EXEMPTIONS CODE NO EXEMPTIONS				STATE TAX DATA CODE NO TAX STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;"><i>[Signature]</i></p> </div>											

FORM 1150
May 1967

Use Previous Edition

SECRET

EXAMINED AND SIGNATURES
BEING MADE
BY PERSONNEL

(When Filled in)

14-00000

"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
FOX JEROME	017974	45	997	CF GS 12 5	\$12,443	\$12,989

FVU: 1 APR 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017974		2. NAME (LAST FIRST MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION SUSPENSION FOR THREE WORKING DAYS			4. EFFECTIVE DATE 04 01 68
5. CATEGORY OF EMPLOYMENT REGULAR			
A. FUNDS		6. Financial Analysis No. Chargeable 6137 1375 0000	7. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATION ODP/FE DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE GPS OFFICER		12. POSITION NUMBER 9997	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, IS, etc.) FSR GS		15. OCCUPATIONAL SERIES 0136.01	17. SALARY OR RATE 05 5 12 5 12604 12959

18. REMARKS:
SUSPENDED FOR THREE WORKING DAYS FOR INFRACTION OF AGENCY PHYSICAL SECURITY REGULATIONS. TO RETURN TO DUTY EOS 4 APRIL 1965. EMPLOYEE IS WARNED THAT FURTHER VIOLATIONS WILL BE VIEWED WITH EXTREME SERIOUSNESS.
OTHER

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES NUMBER ALPHABETIC	22. STATION CODE	23. INTEGRAL CODE	24. MERIT CODE	25. DATE OF BIRTH MO DA YR 10 09 28	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. NTE EXPIRES NO. DA YR	29. SPECIAL REFERENCE CSC FEA MRA	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. Correction / Cancellation Data YR MS 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. LOYALTY COMP. DATE MO DA YR	38. CAREER CATEGORY CAS MOS PROV EEMP	39. FEGLI / HEALTH INSURANCE CODE 0 - MEMBER 1 - YES	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 1 - NO PREVIOUS SERVICE 2 - NO BREAK IN SERVICE 3 - BREAK IN SERVICE (LESS THAN 3 YRS) 4 - BREAK IN SERVICE (MORE THAN 3 YRS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXEMPTED 1 - YES 2 - NO		44. STATE TAX DATA CODE 1 - YES 2 - NO			

SIGNATURE OR OTHER AUTHENTICATION

POSTED
APR 11 1968

SECRET
(When Filled In)

NOV 27 1967

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017974		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE NO. DA. YR. 11 21 67
5. CATEGORY OF EMPLOYMENT REGULAR			6. FINANCIAL ANALYSIS NO. CHARGEABLE 8137 1375 0000
7. FUNDS V TO V CF TO V X CF TO CF			8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS DOP/FE DEVELOPMENT COMPLEMENT			10. LOCATION OF OFFICIAL STATION WASH., D.C.
11. POSITION NUMBER 9997			12. SERVICE DESIGNATION D
13. CLASSIFICATION SCHEDULE (GS, LB, etc.) F SR GS		14. OCCUPATIONAL SERIES 0136.01	15. GRADE AND STEP GS 5 12 5
16. SALARY OR RATE 12074 12443			

MARITAL STATUS - MARRIED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 55	20. EMPLOY CODE 13	21. OFFICE CODES NUMERIC ALPHABETIC 45997 FE	22. STATION CODE 75013	23. INTEGRATE CODE S	24. HOURS CODE 1	25. DATE OF BIRTH MO. DA. YR. 10 09 23	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. CIA 3. IFA 4. OTHER	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA EPA. MO. DA. YR.	33. SECURITY REG. NO. EOD DATA		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 VAR DIV. PRN. TEMP.	39. FEELTY/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 - 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. FOR ALTERNATIVE	44. STATE TAX DATA FORM EXECUTED CODE NO. FOR STATE OVERLAP			

SIGNATURE OR OTHER AUTHENTICATION

POSTED

RS

11-23-67

PLW

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET
(When Filled In)

68

AMAR 17 1957

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017374		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE 11 11 57
5. CATEGORY OF EMPLOYMENT REGULAR			6. FUNDS V TO V X V TO CF CF TO V CF TO CF
7. Financial Analysts No. Chargeable 0137 1292 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 402 J	
9. ORGANIZATIONAL DESIGNATIONS DDP/FE FE DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH D.C.	
11. POSITION TITLE CPS OFFICER		12. POSITION NUMBER 197	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, WY) GS	15. OCCUPATIONAL SERIES 136-01	16. GRADE AND STEP 12-5	17. SALARY OR RATE 12445
18. REMARKS TRAINING			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION TO EMPLOY CODE 26	20. OFFICE (OSINE) CODE 13	21. OFFICE SYMBOLIC 45597	22. STATION CODE 7-112
23. DATE OF BIRTH 10 10 12	24. DATE OF GRADE 11 11 57	25. DATE OF LEI 11 11 57	26. DATE OF BIRTH 10 10 12
27. NIE EXPIRES NO DATE	28. SPECIAL REFERENCE 1. CEN 2. CIA 3. NSA	29. RETIREMENT DATA COUB	30. SEPARATION DATA DATA CODE
31. CORRECTION/CANCELLATION DATA FILE	32. SECURITY REG NO R0D DATA	33. SECURITY SER NO	34. SER NO
35. VET PREFERENCE CODE 0	36. SERV COMP DATE NO DA	37. LOAN COMP DATE NO DA	38. CARRIER CATEGORY LAW
39. FULL/HEALTH INSURANCE CODE 0	40. SOCIAL SECURITY NO	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0	42. LEAVE (AL) CODE
43. FEDERAL TAX DATA NO TAX EXEMPTIONS	44. STATE TAX DATA NO STATE TAX	45. FEDERAL TAX DATA NO TAX EXEMPTIONS	46. STATE TAX DATA NO STATE TAX
SIGNATURE OR OTHER AUTHENTICATION			

FOOTNOTED
11/11/57

FORM 1150

Use Previous Edition

SECRET FVO

FORM 1150

When Filled In

SECRET
(When Filled In)

BJT: 25 MAY 67

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 017974		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE 05 21 67	
5. CATEGORY OF EMPLOYMENT REGULAR		6. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
7. FUNDS X	8. V TO V <input type="checkbox"/>	9. V TO CF <input type="checkbox"/>	10. CF TO V <input type="checkbox"/>
11. ORGANIZATIONAL DESIGNATIONS DDP/FE FE/PMI - PHILIPPINES, MALAYSIA, INDONESIA INDONESIA SECTION		12. LOCATION OF OFFICIAL STATION WASH., D.C.	
13. POSITION TITLE OPS OFFICER		14. POSITION NUMBER 3877	
15. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS		16. OCCUPATIONAL SERIES 0136.01	
17. GRADE AND STEP 12 5		18. SALARY OR RATE 12443	
19. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC 45140	22. STATION CODE ALPHABETIC FE	23. INTEGREE CODE 75013	24. MONTH CODE 1	25. DATE OF BIRTH MO DA YR 10 09 28	26. DATE OF GRADE MO DA YR	27. DATE OF LET MO DA YR
28. DATE EXPIRES MO DA YR	29. SPECIAL REFERENCE 1. CSC 2. CIP 3. PFC 4. NONE	30. RETIREMENT DATA CCOP	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SECURITY REG NO.		34. SER	
35. VET. PREFERENCE CODE A. NONE B. 5-YR C. 10-YR	36. SERV. COMP. DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. CAREER CATEGORY CODE A. 1 B. 2 C. 3	39. FEGLI HEALTH INSURANCE CODE A. 1 B. 2 C. 3	40. SOCIAL SECURITY NO.			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE A. NO PREVIOUS SERVICE B. NO SERVICE IN 5 YEARS C. SERVICE IN SERVICE MORE THAN 5 YEARS D. SERVICE IN SERVICE MORE THAN 10 YEARS		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORMER EMPLOYER CODE NO. TAX EXEMPTIONS		44. STATE TAX DATA FORMER EMPLOYER CODE NO. TAX EXEMPTIONS			

EOD DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED
15250

MRT: 17 NOV 66

SECRET
(When Filled In)

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)
017974	FOX JEROME

3. NATURE OF PERSONNEL ACTION	4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS	11 20 66	REGULAR

6. FUNDS	7. GDS CENTER NO. CHARGEABLE	8. CXC OR OTHER LEGAL AUTHORITY				
<table border="1"> <tr> <td>V TO V</td> <td>V TO CP</td> </tr> <tr> <td>CP TO V</td> <td>CP TO CP</td> </tr> </table>	V TO V	V TO CP	CP TO V	CP TO CP	7237 1385 0000	50 USC 403 J
V TO V	V TO CP					
CP TO V	CP TO CP					

9. ORGANIZATIONAL DESIGNATIONS	10. LOCATION OF OFFICIAL STATION
DOP/FE FE/PMI - PHILIPPINE, MALAYSIA, INDONESIA PHILIPPINE SECTION UNILATERAL - FI AND CA UNIT	WASH., D.C.

11. POSITION TITLE	12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER	4025	D

14. CLASSIFICATION SCHEDULE (GS-18, etc.)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 5	12443

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. INTELLIGENCE CODE	24. EMPLOY CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
16	10	45140 FE	75013			10 09 28		
28. DATE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CLASSIFICATION/EXEMPTION DATA	33. SECURITY REG. NO.	34. SER.	EOD DATA	
35. VET. PREFERENCE	36. LEAV. COMP. DATE	37. LCA. COMP. DATE	38. CAREER CATEGORY	39. FEGLI/HEALTH/INSURANCE	40. SOCIAL SECURITY NO.			
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT.	43. FEDERAL LAB DATA		44. STATE TAX DATA			

45. SIGNATURE OR OTHER AUTHENTICATION

[Signature]

RZF: 26 SEPT 66

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017374		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM			4. EFFECTIVE DATE MO: DA: YR: 09 25 66
5. CATEGORY OF EMPLOYMENT REGULAR			6. COST CENTER NO. CHARGEABLE 7137 1487 0000
7. FUND		8. CMC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203	
9. ORGANIZATIONAL DESIGNATIONS DGP/FE		10. LOCATION OF OFFICIAL STATION SAIGON, SOUTH VIET NAM	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)		15. OCCUPATIONAL SERIES 12	17. SALARY OR RATE
16. GRADE AND STEP			
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.			
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. INTEGREE CODE	24. JMW/JR CODE	25. DATE OF BIRTH MO: DA: YR:	26. DATE OF GRADE MO: DA: YR:
27. DATE OF LEI MO: DA: YR:	28. WFE EXPIRES MO: DA: YR:	29. SPECIAL REFERENCE 1. CMC 2. PICE 3. NONE	30. RETIREMENT DATA CODE 2
31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO: DA: YR:	33. SECURITY REQ. NO.	34. SECURITY
35. NET PREFERENCE 1. NONE 2. 1 3. 2	36. SERV. COMP. DATE MO: DA: YR:	37. LONG. COMP. DATE MO: DA: YR:	38. CURRENT CATEGORY CODE
39. PEST / HEALTH INSURANCE CODE 0: WRITER 1: YES 2: NO	40. SOCIAL SECURITY NO.	41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 1 YEAR 4. BREAK IN SERVICE MORE THAN 1 YEAR	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA NO. TAX DEFERRED CODE 1: YES 2: NO	44. STATE TAX DATA FORM EXECUTED 1: YES 2: NO	45. FEDERAL TAX DATA NO. TAX DEFERRED CODE 1: YES 2: NO	46. STATE TAX DATA CODE 1: YES 2: NO

POSTED
9-27-66/h

SECRET

FORM 100-100-100
1-66
(When Filled In)

123

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Status	
017974		FOX JEROME		45 500 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last PM Date	Grade	Step	Salary	Effective Date
GS 12	4	12064	09/13/64	GS 12	5	12093	09/11/66
		111,723				12,091	
7. TYPE ACTION							
8. Remarks and Authorization							
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> 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: <i>8/24/66</i>							
PAY CHANGE NOTIFICATION							

FORM 507E-119, 3-63

"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	CHG.	OLD SALARY	NEW SALARY
FOX JEROME	017974	45	500	CF	GS 12 4 111,723	312,000

DLR: 30 SEPT 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017974		2. NAME (LAST, FIRST, MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION (CANCELLATION)			
4. EFFECTIVE DATE MO. DA. YR. 09 11 64		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V C TO V X C TO C		7. COST CENTER NO. (CHARGEABLE) 5137 1392 0000	8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J
9. ORGANIZATIONAL DESIGNATIONS DOP FE CS/GS DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 9997	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) FSR GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 05 2 12 4	17. SALARY OR RATE 10290 11315
18. REMARKS ADMIN ERROR			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. OFFICE CODE	21. STATION CODE	22. PAY GRADE	23. DATE OF BIRTH	24. DATE OF GRADE	25. DATE OF LEI
11	13	45927	FE	75013	10 09 60	
26. SPECIAL REFERENCE	27. PAYMENT DATA	28. PENSION DATA	29. CONNECTION/CANCELLATION DATA	30. SECURITY REG NO.	31. SEN	
			55 09 10 64			
32. PAY PREFERENCE	33. LEAVY (EMP. 95%)	34. LEAVY (EMP. 95%)	35. CAREER CATEGORY	36. FEELT/DEATH INSURANCE	37. SOCIAL SECURITY NO.	
38. PREVIOUS EMPLOYMENT SERVICE DATA	39. LEAVY (EMP. 95%)	40. LEAVY (EMP. 95%)	41. FEDERAL TAX DATA	42. STATE TAX DATA	43. STATE TAX DATA	

FOOD DATA

POSTED
10/22/64 215

DLB: 23 SEPT 64

SECRET
(When Filled In)

ODF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 017974		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME					
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE 09 13 64	5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS <table border="1"> <tr> <td>V TO V</td> <td>V TO C</td> </tr> <tr> <td>C TO V</td> <td>C TO C</td> </tr> </table>		V TO V	V TO C	C TO V	C TO C	7. COST CENTER NO. (CHANGEABLE) 5137 1392 (K00)	8. CSA OR OTHER LEGAL AUTHORITY 50 USC 403 J
V TO V	V TO C						
C TO V	C TO C						
9. ORGANIZATIONAL DESIGNATION DDP FE GS/CS DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH., D. C.					
11. POSITION TITLE OPS OFF		12. POSITION NUMBER 9997	13. SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS 18, etc.) FSR GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP GS-2 12 4	17. SALARY OR RATE 10230 11315				

FINAL LISTING

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 55	20. EMPLOY CODE 13	21. OFFICE CODING 45397FE	22. STATION CODE 25013	23. INTEGRAL CODE 1	24. POINTS 1	25. DATE OF BIRTH 10 03 23	26. DATE OF GRADE 10 03 64	27. DATE OF LEI
28. BTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CANCELLATION CANCELLATION DATE	EOD DATA		33. SECURITY REG NO	34. SER.
35. PER PREFERENCE	36. SIBP (COP) DATE	37. LEAVS (DWP) DATE	38. CAREER CATEGORY	39. FEEL / HEALTH INSURANCE		40. SOCIAL SECURITY NO.		
41. PREVIOUS EMPLOYMENT SERVICE DATA		42. LEAVE CAT (COP)	43. FEDERAL TAX DATA		44. STATE TAX DATA			

SIGNATURE ON OTHER AUTHORIZATION

101ED
Jerome Fox

JGD: 11 SEPT 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 017974		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE MO DA YR 09 13 64
5. FUNDS V TO V U TO V			6. CATEGORY OF EMPLOYMENT REGULAR
7. COST CENTER NO. CHARGEABLE 5137 1392 mmm		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP/FE CS/CS DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 9997	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, EB, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 12 4	17. SALARY OR RATE 11315
18. REMARKS TRAINING. SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 20	20. TIME CODE 13	21. STATION CODE 45997 FE	22. INTEGRAL CODE 75013	23. DATE OF BIRTH MO DA YR 10 09 28	24. DATE OF GRAD MO DA YR	25. DATE OF LEE MO DA YR
26. DATE EXPIRES MO DA YR	27. SPECIAL REFERENCE A. NONE B. 5-FI C. 10-FI	28. RETIREMENT DATA A. NONE B. FICA C. NONE	29. SEPARATION DATA CODE TYPE	30. CORRECTION/ANCELLATION DATA EOD DATA	31. SECURITY REG. NO.	32. SEC. NO.
33. PFT. PREFERENCE CODE	34. 5YR COMP. DATE MO DA YR	35. LONG COMP. DATE MO DA YR	36. CAREER CATEGOR. CODE	37. FEELT. HEALTH INSURANCE CODE	38. SOCIAL SECURITY NO.	
39. PREVIOUS GOVERNMENT SERVICE DATA CODE		40. LEAVE CAT. CODE		41. FEDERAL TEL. DATA CODE		42. STATE TEL. DATA CODE

SIGNATURE OR OTHER AUTHENTICATION

FROM: FE

FO TLD

FORM 1150

Use Previous Edition

13 SEP 64 SECRET

FORM 1150

(When Filled In)

PAYMENT GRAPH
SEP 14 10 36 AM '66

1. Serial No.		2. Name		3. Cost Code Number		4. LWOP Hours				
017974		FOX JEROME		45 160 <i>RF</i>						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PL	LS	AD
GS 12	3	10,960	09/19/63	GS 12	4	11,315	09/13/64			
8. Remarks and Authorizations										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>[Signature]</i> AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>[Signature]</i>						DATE <i>10/14/66</i>				
PAY CHANGE NOTIFICATION <i>[Signature]</i>										

Form 560

Obsolete Previous Edition

(4-61)

DEC 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. NUMBER 017974		2. NAME (LAST-FIRST MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE 12 1 02 64	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS	7. COST CENTER NO. CHARGEABLE 5137 1487 0000	8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS DDP FE FE/VNC - SAIGON STATION INTERNAL OPS BRANCH JOB CAPITAL OPS SECTION		10. LOCATION OF OFFICIAL STATION SAIGON, SOUTH VIET NAM	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 4608	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, 18, etc.) GS	15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 12 4	17. SALARY GS RATE 11315
18. REMARKS			

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 37	20. EMPLOY CODE 10	21. OFFICE CODE 45300 FE	22. STATION CODE 77205	23. GRADE CODE 3	24. DATE OF BIRTH 10 1 09 29	25. DATE OF SERGE	26. DATE OF LEAVE
27. VET. PREFERENCE	28. SERGE CODE	29. LEAVE CODE	30. LEAVE CATEGORY	31. SOCIAL SECURITY NUMBER	32. SECURITY ID NO.	33. SER	34. SER
35. PREVIOUS EMPLOYMENT SERVICE DATA				36. STATE EMP DATA			

EOD DATA

3149

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPO 09/01/64

1. SERIAL NUMBER 017974		2. NAME (LAST FIRST MIDDLE) FOX JEROME			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE MO DA YR 08 31 64	5. CATEGORY OF EMPLOYMENT	
6. FUNDS	<input checked="" type="checkbox"/> R	<input type="checkbox"/> V TO V	<input type="checkbox"/> V TO O	7. COST CENTER NO. (CHARGABLE)	8. CYC OR OTHER LEGAL AUTHORITY
	<input type="checkbox"/> O TO V	<input type="checkbox"/> O TO O	9237 1352 0000		
9. ORGANIZATIONAL DESIGNATION DDP/P6 DIVISION P6 VNC NORTH VIETNAM 860			10. LOCATION OF OFFICIAL STATION WASH., D. C.		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 4429	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS-10-04) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 12	17. SALARY OR RATE	

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION

FOI ID

9/1/64 me

Form 1-64 1-64

Use Previous 1-64

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

14-574

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

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
FOX JEROME	017974	45	160	V GS 12 3	\$10,105	\$10,640

107 1256

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP (Hours)	
017974		FOX JEROME		56-160 V 7			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Left In Date	Grade	Step	Salary	Effective Date
GS 12	2	9,790	09/16/62	GS 12	3	10,105	09/15/63
7. TYPE ACTION							
PSI							
LSI							
ADJ.							
8. Remarks and Authorization							
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>JH</i> AUDITED BY:							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>JH</i>				DATE: <i>1/5/64</i>			
PAY CHANGE NOTIFICATION							

107 1256
 107 1256

SECRET
(When Filled In)

RZR: 29 APR 63

OCF NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER: 017974
2. NAME (LAST FIRST MIDDLE): FOY, JEROME

3. NATURE OF PERSONNEL ACTION: REASSIGNMENT AND CHANGE OF SERVICE DESIGNATION
4. EFFECTIVE DATE: 04 29 63
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: X
7. COST CENTER NO. CHARGEABLE: 3237 1250 1000
8. CSC OR OTHER LEGAL AUTHORITY: 50 USC 403 J

9. ORGANIZATIONAL DESIGNATIONS: DDP/FE, FE/VCL - VIETNAM - CAMBODIA - LAOS, VIETNAM OPERATIONS SECTION, FI/CI OPERATIONS UNIT
10. LOCATION OF OFFICIAL STATION: WASH., D.C.

11. POSITION TITLE: OPS OFFICER
12. POSITION NUMBER: 2503
13. SERVICE DESIGNATION: 0

14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS
15. OCCUPATIONAL SERIES: 0135.01
16. GRADE AND STEP: 12 2
17. SALARY OR RATE: 9790

18. REMARKS:

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE: 37
20. EMPLOY CODE: 10
21. OFFICE SYMBOL: 56100 FE
22. STATION CODE: 75013
23. INTERIOR CODE:
24. HOURS CODE:
25. DATE OF BIRTH: 07 28
26. DATE OF GRADE:
27. DATE APPOINTED:
28. RET. PREFERENCE:
29. SPECIAL REFERENCE:
30. RETIREMENT DATA:
31. SEPARATION DATA CODE:
32. EXCEPTION/CANCELLATION DATA:
33. SECURITY:
34. SER. PREFERENCE:
35. SERV. COMP. DATE:
36. LONG. COMP. DATE:
37. CAREER CATEGORY:
38. FEGLI/HEALTH INSURANCE:
39. PREVIOUS GOVERNMENT SERVICE DATA:
40. LEAVE/CAF CODE:
41. FEDERAL TAX DATA:
42. STATE TAX DATA:

LOD DATA

SIGNATURE OR OTHER AUTHENTICATION

POSTED
astales/K

ABM: 20 DEC 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER 017974		2. NAME (LAST-FIRST-MIDDLE) FOX JEROME	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS			4. EFFECTIVE DATE MO. DA. YR. 12 23 62
5. CATEGORY OF EMPLOYMENT REGULAR			6. COST CENTER NO. CHARGEABLE 3257 1019 6000
7. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			8. FUNDS V TO V CF TO CF X G TO V CF TO G
9. ORGANIZATIONAL DESIGNATIONS DDI ORR OFFICE OF THE ASSISTANT DIRECTOR		10. LOCATION OF OFFICIAL STATION WASH., D. C.	
11. POSITION TITLE		12. POSITION NUMBER 1564	13. CAREER-SERVICE DESIGNATION IR
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15. OCCUPATIONAL SERIES 1390.08	16. GRADE AND STEP 12 2	17. SALARY OR RATE 9790

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 16	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC: 88100 ALPHABETIC: ORR	22. STATION CODE 75013	23. INTEGREE CODE	24. REQTS. CODE 1	25. DATE OF BIRTH MO. DA. YR. 10 09 28	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.
28. INTX EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE	30. RETIREMENT DATA A - CODE B - PICA C - ACSP	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE MO. DA. YR.	33. SECURITY REQ. NO.		34. SEN.	
35. VET. PREFERENCE CODE 0 - NONE 1 - 5 YR 2 - 10 YR	36. SERV. COMP. DATE MO. DA. YR.	37. LONG. COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CAR. CODE PROF. TEMP.	39. FECLT / HEALTH INSURANCE CODE 0 - NONE 1 - YES	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 RECEIVED CODE NO. TAX ADJUSTMENTS 1 - YES 2 - NO		44. STATE TAX DATA FORM RECEIVED CODE NO. TAX ADJUSTMENTS 1 - YES 2 - NO			

SIGNATURE OR OTHER AUTHENTICATION

POSTED
20 DEC 1962

FORM 1150

Use Previous Edition

BR

SECRET

FORM 1150-1 (When Filled In)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
 EFFECTIVE 14 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST SALARY	OLD SALARY	NEW GR-ST SALARY	NEW SALARY
FOX, JEROME	017974	70530	CF	12 2	\$ 9215	12 2	\$ 9700

1. Serial No.		2. Name		3. Civil Control Number		4. LWOP Hours	
017974		FOX JEROME		70 530 CF 3			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Eff. Date	Grade	Step	Salary	Eff. Date
GS 12 1	3	8,955	03/19/61	GS 12 2	3	9,215	09/16/62
7. TYPE ACTION							
8. Remarks and Authentication							
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY PAY CHANGE NOTIFICATION							

PSC: 17 MARCH 1961

SECRET
(When Filled In)

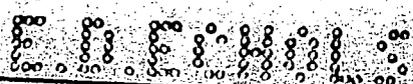
NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST-FIRST-INITIALS)							
017974		FOX JEROME							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
PROMOTION				03 19 61		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
<input type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input checked="" type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		1137 7000 6135		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION					
OFFICE OF DDI (TOKYO) STRATEGIC INTELLIGENCE STAFF				TOKYO, JAPAN					
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
IC [REDACTED]				0096		1R			
14. CLASSIFICATION SCHEDULE (GS, WD, HW)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		1390.08		12 1		8955			
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. INTELLIGENCE CODE	24. MEDICAL CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
22	10	70530	DDI	37587		3	10 09 28	03 19 61	03 19 61
28. NTE. EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REL. NO.	34. SER.
						EOD DATA			
35. VET. PREFERENCE		36. SEAV. COMP. DATE	37. LONG COMP. DATE	38. MIL. SERV. CREDIT/LED		39. HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT.		43. FEDERAL TAX DATA		44. STATE TAX DATA	
0 - NO PREVIOUS SERVICE 1 - NO DUBIOUS SERVICE 2 - BREAK IN SERVICE (LESS THAN 18 MONTHS) 3 - BREAK IN SERVICE (MORE THAN 18 MONTHS)									
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED <i>M. J. [Signature]</i> 28-61 </div>									

Form 1150
6-63

Obsolete Previous Editions

SECRET

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 517974		2. NAME FOX JEROME			3. ASSIGNED ORGAN DDI 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
GS 11	2	\$ 7,820	04	19	59	GS 11	3	\$ 8,090	10	16	60
TO BE COMPLETED BY THE OFFICE OF 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: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK			11. AUDIT		
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. TYPE OF ACTION <input type="checkbox"/> P.S.S. <input type="checkbox"/> L.A.I. <input type="checkbox"/> PAY ADJUSTMENT						13. REMARKS WR					
14. AUTHENTICATION											
 PAY CHANGE NOTIFICATION											

FORM 5-58

560 - OBSOLETE PREVIOUS EDITION REPLACES FORM 560A AND 560B

SECRET

OFFICIAL PERSONNEL FOLDER (4)

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.

GD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
IR	FOX JEROME	517974	18 25	GS-11 2	\$ 7,270	\$ 7,820

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

IN LIEU OF FORM 1150 THIS NOTIFICATION EFFECTS A CHANGE IN OCCUPATIONAL
SERIES RESULTING FROM APPLICATION OF STAFFING COMPLEMENT CHANGE

AUTHORIZATION NUMBER 22 DATED 1 JULY 1960.

SD	NAME	SERIAL	ORGN	OLD OCC SERIES	NEW OCC SERIES
IR	FOX JEROME	517974	18 25	1390.06	1390.08

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET

(When Filled In)

JEC:7 JULY 59

NOTIFICATION OF PERSONNEL ACTION

1. Serial No. 51797*		2. Name (Last-First-Middle) FOX JEROME			3. Date Of Birth Mo. Da. Yr. 10 09 28			4. Vet. Pref. None-0 5 Pt-1 10 Pt-2 Code 1		5. Sex M 1		6. CS-EOD Mo. Da. Yr. 06 15 55			
7. SCD		8. CSC Rmtt. Yes-1 No-2 Code 1		9. CSC Or Other Legal Authority 50 USCA 403 J			10. Apm. All. Adv. Mo. Da. Yr. 10 16 54			11. FEGLI Yes-1 No-2 Code 1		12. LCD Mo. Da. Yr. 06 15 55		13. Pres. Ltr. Yes-1 No-2 Code 2	

PREVIOUS ASSIGNMENT

14. Organizational Designations DDI ORR				Code 1323		15. Location Of Official Station WASH., D.C.				Station Code 75013		
16. Dept. - Field Dept. - 1 USIld. - 3 Frqn. - 5 Code 2		17. Position Title IDENTIFICATION SPEC				18. Position No. 92301		19. Serv. GS		20. Occup. Series 1390.06		
21. Grade & Step 11 2		22. Salary Or Rate \$ 7270		23. SD 1R		24. Date Of Grade Mo. Da. Yr. 10 20 57		25. PSD Date Mo. Da. Yr. 10 19 59		26. Appropriation Number 8 5709 20		

ACTION

27. Nature Of Action REASSIGNMENT TRANSFERRED TO CONFIDENTIAL FUNDS		Code 06		28. Eff. Date Mo. Da. Yr. 07 26 59		29. Type Of Employee REGULAR		Code 01		30. Separation Data	
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PRESENT ASSIGNMENT

31. Organizational Designations OFFICE OF DDI (TOKYO) STRATEGIC INTELLIGENCE STAFF				Code 1825		32. Location Of Official Station TOKYO, JAPAN				Station Code 37597		
33. Dept. - Field Dept. - 1 USIld. - 3 Frqn. - 5 Code 5		34. Position Title				35. Position No. 003		36. Serv. GS		37. Occup. Series 1390.06		
38. Grade & Step 11 2		39. Salary Or Rate \$ 7270		40. SD 1R		41. Date Of Grade Mo. Da. Yr. 10 20 57		42. PSD Date Mo. Da. Yr. 10 11 59		43. Appropriation Number 0 3709 75 901		

44. Remarks
SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.

POSTED
CP 23 JUL 59

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 11797A		2. NAME FOX JEROME			3. ASSIGNED ORGAN. DDI/ORR 3		4. FUNDS V-20		5. ALLOTMENT		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
GS 11	1	\$ 7,030	MO	DA	YR	GS 11	2	\$ 7,270	MO	DA	YR
			10	20	57				04	19	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP None					
IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD						10. INITIALS OF CLERK W			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	CP W					
14. AUTHENTICATION											
PERIODIC STEP INCREASE - AUTHENTICATION SECRET											

FORM NO. 5605
MAY 58

PERSONNEL FOLDER (4)

IN LIEU OF FORM 1150 THIS NOTIFICATION EFFECTS RESLOTTING RESULTING
FROM R-20-250

SER #	NAME	SD	OLD SLOT	NEW SLOT	DATE
11797A	FOX JEROME	IR	0929.01	923	03/11/59

SECRET

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1959 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
FOX JEROME	117974	GS-11-1	\$ 6,390	\$ 7,030

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. Serial No. 117		2. Name (Last-First-Middle) OX, J. E.			3. Date Of Birth Mo. Da. Yr.			4. Vet. Prof. None-0 5 Pt-1 10 Pt-2		5. Sec.		6. CS-EOD Mo. Da. Yr.		
7. SCD Mo. Da. Yr.		8. CSC Reinst. Yes-1 No-2		9. CSC Or Other Legal Authority E.O. 11838		10. Apmt. A/Hldg. Mo. Da. Yr.			11. FEGLI Yes-1 No-2		12. LCD Mo. Da. Yr.		13. <small>See Form 100</small> Yes-1 No-2	

PREVIOUS ASSIGNMENT

14. Organizational Designations CDI				Code		15. Location Of Official Station WASH., D.C.				Station Code	
16. Dept. Field Dept. 2 USfld. 4 Frgn. 6		17. Position Title IDENTIFICATION SFLS				18. Position No. 2011		19. Serv. US		20. Occup. Series 13000	
21. Grade & Step 2		22. Salary Or Rate \$ 575		23. SD IR		24. Date Of Grada. Mo. Da. Yr.		25. PSI Due Mo. Da. Yr.		26. Appropriation Number 11-5	

ACTION

27. Nature Of Action PROS. MOT.		Code		28. Eff. Date Mo. Da. Yr. 12 17		29. Type Of Employee REGULAR		Code		30. Separation Data	
------------------------------------	--	------	--	---------------------------------------	--	---------------------------------	--	------	--	---------------------	--

PRESENT ASSIGNMENT

31. Organizational Designations CDI				Code		32. Location Of Official Station WASH., D.C.				Station Code	
33. Dept. Field Dept. 2 USfld. 4 Frgn. 6		34. Position Title IDENTIFICATION SFLS				35. Position No. 2011		36. Serv. US		37. Occup. Series 13000	
38. Grade & Step 1-1		39. Salary Or Rate \$ 575		40. SD IR		41. Date Of Grada. Mo. Da. Yr.		42. PSI Due Mo. Da. Yr.		43. Appropriation Number 11-2	

44. Remarks

DATE: 11/17/52

INITIALS: [Signature]

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 117974		2. NAME FOX JEROME			3. ASSIGNED ORGAN. DDI/ORR 3		4. FUNDS V-20		5. ALLOCATION		
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			NO.	DA.	YE.				NO.	DA.	YE.
9	1	\$ 5,440	07	01	56	9	2	\$ 5,575	06	30	57
REMARKS											
CERTIFICATION											
I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY.											
TYPED OR PRINTED NAME OF SUPERVISOR JAMES Q. MAY			DATE 23 May 57			SIGNATURE OF SUPERVISOR <i>James Q. May</i>					
PERIODIC STEP INCREASE - CERTIFICATION											

FORM NO. 560
1 MAR 56

SECRET

PERSONNEL FOLDER (4)

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO. 117974		2. NAME FOX JEROME			3. ASSIGNED ORGAN. DDI/ORR		4. FUNDS V-20		5. ALLOCATION		
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			NO.	DA.	YE.				NO.	DA.	YE.
9	1	\$ 5,440	07	01	56	9	2	\$ 5,575	06	30	57
8. CHECK ONE: <input type="checkbox"/> NO STEPS LOST <input type="checkbox"/> EXCESS LEAVE 9. NUMBER OF HOURS LOST 10. INITIALS OF CLERK 11. AUDITED BY TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE TO BE COMPLETED BY THE OFFICE OF PERSONNEL 13. SIGNATURE 14. AUTHENTICATION											

FORM NO. 560
1 MAR 56

SECRET

PERSONNEL FOLDER

STANDARD FORM 52
 PREPARED BY THE
 U. S. GOVERNMENT PRINTING OFFICE
 WASHINGTON, D. C. 20540

REQUEST FOR PERSONNEL ACTION

Reassignment

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 (from name, initial(s), and surname): **Mr. Jerome Fox**
 2. DATE OF BIRTH: **9 Oct. 1923**
 3. REQUEST NO.:
 4. DATE OF REQUEST: **18 April 1957**

5. NATURE OF ACTION REQUESTED:
 A. PERSONNEL (Specify whether appointment, promotion, separation, etc.):
Reassignment
 B. POSITION (Specify whether establish, change grade or title, etc.):
 6. EFFECTIVE DATE A. PROPOSED: **ASAP**
 7. C.S. OR OTHER LEGAL AUTHORITY:
 B. APPROVED: **2 JUN 1957**

FROM—
**Identification Specialist 7-924.03
 GS-1390.06-09 \$5440.00 per annum
 DDI/Office of Research and Reports**
 A. POSITION TITLE AND NUMBER:
 B. SERVICE GRADE AND SALARY:
 C. ORGANIZATIONAL DESIGNATION:
 D. HEADQUARTERS:
Washington, D.C.
 FIELD DEPARTMENTAL
 TO—
**Identification Specialist 7-923.01
 GS-1390.06-09 \$5440.00 per annum
 DDI/Office of Research and Reports**
 A. POSITION TITLE AND NUMBER:
 B. SERVICE GRADE AND SALARY:
 C. ORGANIZATIONAL DESIGNATION:
 D. HEADQUARTERS:
Washington, D.C.
 FIELD DEPARTMENTAL

8. REMARKS (Use reverse if necessary):
Reassignment submitted to conform to T/O reorganization

9. REQUESTED BY (Name and title):
JAMES G. MAY, Chief, SW/HR
 10. REQUEST APPROVED BY:
 Signature: **PAUL H. WILDERRAND**
 Title: **Chief, Administrative Staff, OCS**

11. VETERAN PREFERENCE:
 12. POSITION CLASSIFICATION ACTION:
 NEW VICE I A REAL
SD/IR

13. APPROPRIATION:
 FROM **7-5709-20**
 TO **7-5709-20**
 14. DATE OF APPOINTMENT (REGIONS ONLY):
 15. LEGAL RESIDENCE:
 CLAIMED PROVED
 STATE:

16. STANDARD FORM TO REMARKS:

POSTED
 01 MAY 1957

H. CLEARANCES	INITIAL OF SIGNATURE	DATE	REMARKS
A.			
B. CHIEF OF POSTS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OF 1954			
E.			

17. APPROVED BY:
[Signature]

PERIODIC STEP INCREASE CERTIFICATION

CONFIDENTIAL

U. S. GOVERNMENT PRINTING OFFICE: 1954 O-270080

1. Agency and organizational description: _____

2. Period: period _____

3. Book No. _____

4. Slip No. **6-5709-20**

Employee's name (and social security account number when appropriate): **POK, JEROME**

5. Grade and salary: **GS-7 \$4525**

PAYROLL CHANGE DATA

	BASE PAY	OVERTIME	GROSS PAY	RET.	FEDERAL TAX	BOND	R.C.A.	STATS TAX	GROUP LIFE INS.	NET PAY
7. Previous normal										
8. New normal										
9. Pay this period										

10. Remarks: _____

11. Appropriate initials: **CRB 21**

12. Prepared by: **SPJp 25APR56**

13. Audited by: _____

Periodic step-increase Pay adjustment Other step-increase

14. Effective date: **JUN 56**

15. Date last equivalent increase: **15 JUNE 55**

16. Old salary rate: **\$4525**

17. New salary rate: **\$4660**

18. Acknowledges that the employee's SERVICE AND CONDUCT ARE SATISFACTORY

Signature of supervisor: _____

19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):

No excess LWOP. Total excess LWOP _____

Chart applicable here in case of excess LWOP: _____

Signature of Clerk: _____

STANDARD FORM NO. 1126d-Rev'd
Form prescribed by Comp. Gen. U. S.
October 20, 1954, General Regulations No. 107

CONFIDENTIAL PAYROLL CHANGE SLIP - PERSONNEL COPY

CENTRAL INTELLIGENCE AGENCY, P.C. 27 May 1955
SR-9297-1 CB

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR., MISS, MRS. JOB OFFER NAME, INITIALS, AND SURNAME) MR. JAMES FOX		2. DATE OF BIRTH 9 Oct. 1928	3. JOURNAL OR ACTION NO.	4. DATE 15 June 1955																
This is to notify you of the following action affecting your employment:																				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) RECEIVED APPOINTMENT		6. EFFECTIVE DATE 15 June 1955	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 USCA 403 1																	
FROM		TO																		
8. POSITION TITLE Ident. Specialist P 925.99		9. SERVICE, SERIES, GRADE, SALARY GS-1390.06-7 \$4205.00 per annum																		
10. ORGANIZATIONAL DESIGNATIONS DDI/Office of Research and Reports Office of Chief,		11. HEADQUARTERS Washington, D.C.																		
<input type="checkbox"/> FIELD <input 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																		
<table border="1"> <tr> <th>DATE</th> <th>REASON</th> <th>CLASSIFICATION</th> <th>REMARKS</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>		DATE	REASON	CLASSIFICATION	REMARKS					<table border="1"> <tr> <th>DEF.</th> <th>VICE</th> <th>T.A.</th> <th>REPL.</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>			DEF.	VICE	T.A.	REPL.				
DATE	REASON	CLASSIFICATION	REMARKS																	
DEF.	VICE	T.A.	REPL.																	
15. GEN. RACE		16. APPROPRIATION 5-5700-00	17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) 15 June 1955																
19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED		20. STATE New York																		
<p>21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.</p> <p>Subject to the satisfactory completion of a trial period of one year and a medical examination.</p> <p>R3-69</p> <p> DDJ 06/15/55 CSD 06/15/55 LAD 06/15/55 </p>																				
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0;">27 JUN 1955</p> </div>																				

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (LAST-FIRST-MIDDLE-INITIALS) AND SURNAMES MR. JEROME P. ...	2. DATE OF BIRTH 1197A	3. JOURNAL OR ACTION NO.	4. DATE 26 June 1976
---	----------------------------------	--------------------------	--------------------------------

This is to notify you of the following action affecting your employment:

5. NATURE OF ACTION (SEE STANDARD REGULATIONS) PROBATION	6. EFFECTIVE DATE 1 July 1976	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY 50 U.S.C. 401
--	---	---

FROM	TO
F-25.99 GS-1390.06-7 \$4660.00 per annum	Identification Specialist F-25.99 GS-1390.06-9 \$5440.00 per annum
8. POSITION TITLE	
9. SERVICE NUMBER GRADE SALARY	
10. ORGANIZATIONAL DESIGNATION 131630	DUI/Office of Research and Reports Office of Chief,
11. HEADQUARTERS R	Washington, D. C.
12. FIELD OR DEPT.	

13. VETERAN'S PREFERENCE				14. POSITION CLASSIFICATION ACTION					
NONE	WHILE	OTHER	5-PT	10 POINT	NEW	YR	L A	REAL	
			<input checked="" type="checkbox"/>						
15. APPROPRIATION				17. EMPLOYMENT STATUS		18. DATE OF APPOINTMENT		19. LEGAL RESIDENCE	
FROM: 7-579-80				17. EMPLOYMENT STATUS		18. DATE OF APPOINTMENT		19. LEGAL RESIDENCE	
TO: 750-13				17. EMPLOYMENT STATUS		18. DATE OF APPOINTMENT		19. LEGAL RESIDENCE	

20. REMARKS

4 203 06/25/76

POSTED

6/25/76

CLASSIFICATION

FITNESS REPORT

SECTION A GENERAL INFORMATION

1. EMPLOYEE NUMBER: 017974
 2. NAME (last, first, middle): Fox, Jerome
 3. DATE OF BIRTH: 7 Oct 27
 4. SEX: M
 5. GRADE: GS-13
 6. SD: D
 7. OFFICIAL POSITION TITLE: Ops Officer
 8. OFF/DIV/BR OF ASSIGNMENT: DDO/LA/JK/K
 9. CURRENT STATION: Hqs
 10. CODE (1-5):
 11. TYPE OF APPOINTMENT: CAREER, RESERVE, CONTRACT, OTHER (spec)
 12. TYPE OF REPORT: REASSIGNMENT, ANNUAL, TEMPORARY, SPECIAL
 13. REPORTING PERIOD (From-To): Feb - Jul 1974
 14. DATE REPORT DUE IN O.P.: supervisor

SECTION B QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

SECTION C PERFORMANCE EVALUATION

U - Unsatisfactory: Performance is unacceptable. A rating in this category requires immediate and 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 D.

M - Marginal: Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial action taken or recommended should be described.

P - Proficient: Performance is satisfactory. Desired results are being produced in the manner expected.

S - Strong: Performance is characterized by exceptional proficiency.

O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY performance 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.	RATING LETTER
1. See Section C	
2.	
3.	
4.	
5.	
6.	

OVERALL PERFORMANCE IN CURRENT POSITION

Place your personal appraisal of the employee's overall performance in the current position in the column provided. This is a summary of overall performance based on all major assignments, projects, and general evaluation of talents. Based on your knowledge of employee's overall performance during the rating period, enter the rating letter corresponding to the statement which best reflects the level of performance.

RATING LETTER

18118 / 12

CLASSIFICATION

SECTION D

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 C 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 D, attach a separate sheet of paper.

It is neither feasible nor desirable to attempt an evaluation of Mr. Fox's performance as an operations officer based on the relatively short period (5 months) he has been assigned to the Korean Desk. Throughout this time he has been faced by a series of [redacted] which have understandably pre-occupied him. His [redacted] which causes him almost [redacted] has led him to apply [redacted] a decision on his application is pending. He has also had to undergo a series of [redacted] which required a great deal of time and attention. Under the circumstances no specific duties and letter grades are being listed in Section B above.

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 5	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 15 July 1974	OFFICIAL TITLE OF SUPERVISOR Chief, EA/JK/K	TYPED OR PRINTED NAME AND SIGNATURE Kenneth C. Cathey

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE	DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED	15 July 1974	[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully agree with the supervisor's narrative comments. It would be grossly misleading to attempt to provide letter ratings or a performance evaluation under the unique conditions which obtained throughout this period.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
	IN/FA/JE	Winston L. Oliver

4. BY EMPLOYEE

DATE	SIGNATURE OF EMPLOYEE
15 July 1974	[Signature]

CLASSIFICATION

SECRET

28 August 1974

MEMORANDUM FOR THE RECORD

SUBJECT: Meritorious Unit Citation

On 20 August 1974 the Director of Central Intelligence approved award of the Meritorious Unit Citation to the Manila Station in recognition of the outstanding performance of the following employees during the period June 1971 to December 1973:

Smith, Vernon

Summers, Georgette
Cohen, Meyer
Watson, Anita
Pider, Benjamin F.
Gordon, James M.
Miller, Richard H.
Doyle, Mary Patricia
O'Reilly, John
Waller, Marie E.
Cotton, Mary Anne
Ferguson, Alan C.
Steed, Herbert L.
Foucher, Charles
Vasko, Philip F.
Hayes, Richard

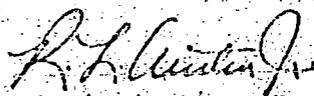
Jamense, Jill
Anton, Eleanor A.
Lawhorne, M. Wesley
O'Reilly, Judith S.
Vaccaro, Joseph R.

Flagg, Warren
Sullivan, Daniel J.
White, Robert H.
Johnson, Richard W.
Markle, Cheryl L.
Thomas, Ann
Robinson, Owen E.
Chu, Kirby K. P.
Larson, Judy A.
Reiniger, Noel W.
Blooding, Shaleta C.
Byerly, Paul M.
Carnivale, Frank
Edinger, John B.

Fox, Jerome
Kaul, Robert J.
Rejonis, Walter G.
von Berg, Helmut L.
Neberline, Lloyd J.
Sherno, Frank
Reynolds, Malcolm
Soderquist, Ray
Jackson, Arthur

Johnson, Wesley
Kalaris, George T.
Mears, Alyce A.
Champlin, Wendy C.

Fitchett, Mildred L.
Harris, Bobby
Chao, James
Thompson, Colin R.
Wright, William H.
Brookner, Janine M.
Hauschild, Raymond G.
Amiano, Suzanne K.
Shields, Charles A.
Ticulka, Vincent R.
Newhouse, Lawrence L.
O'Connell, Mary M.
Kaul, Marlene
Schroeder, Roderick
Gesswein, F. Clark
Chao, Karen
Edinger, Sharon
Shima, Terry



R. L. Austin, Jr.
Recorder

Honor and Merit Awards Board

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

CONFIDENTIAL

FITNESS REPORT		NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.			
SECTION A. GENERAL INFORMATION					
1. EMPLOYEE NUMBER 0 17974		2. NAME (last, first, middle) Fox, Jerome (nmi)		3. DATE OF BIRTH 9 Oct 28	4. SEX M
		5. GRADE GS-13	6. SO D		
7. OFFICIAL POSITION TITLE Ops Officer			8. OFF/DIV/BR OF ASSIGNMENT FE/PMI		9. CURRENT STATION Manila
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> CAREER-PROVISIONAL	<input type="checkbox"/> RESERVE	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> 31-MONTH	<input type="checkbox"/> 30-MONTH
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> REASSIGNMENT		<input type="checkbox"/> SPECIAL
12. REPORTING PERIOD (From-to) 30 Nov 72-31 July 73			13. DATE REPORT DUE IN O.P. 30 September 1973		
SECTION B. PERFORMANCE EVALUATION					
<p>U - Unsatisfactory: Performance is unacceptable. A rating in this category requires immediate and 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>M - Marginal: Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P - Proficient: Performance is satisfactory. Desired results are being produced in the manner expected.</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 Serves as Station referent for MIABYSS matters.					RATING LETTER P
SPECIFIC DUTY NO. 2 Spot, develop, assess and recruit [redacted]					RATING LETTER P
SPECIFIC DUTY NO. 3 Spot, develop, assess and recruit agents to obtain [redacted]					RATING LETTER S
SPECIFIC DUTY NO. 4 Handle on-going cases; tighten operational security, increase production, strengthen agent motivation.					RATING LETTER P
SPECIFIC DUTY NO. 5 Serves as official Station [redacted] contact on PBRAMPART affairs.					RATING LETTER P
SPECIFIC DUTY NO. 6 Prepare reports, correspondence and other management/administrative requirements.					RATING LETTER P
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, past and present work habits, and pertinent knowledge 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 nearly reflects his level of performance.					RATING LETTER P

FORM 45N

CONFIDENTIAL

0 17974 28 10 1973

CONFIDENTIAL

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.	

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	
21 August 1973	/S/ Jerome Fox	
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
21 August 1973	DCOS	[Redacted Signature]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
5 September 1973	COS	/S/ George T. Kalaria

CONFIDENTIAL

CONFIDENTIAL

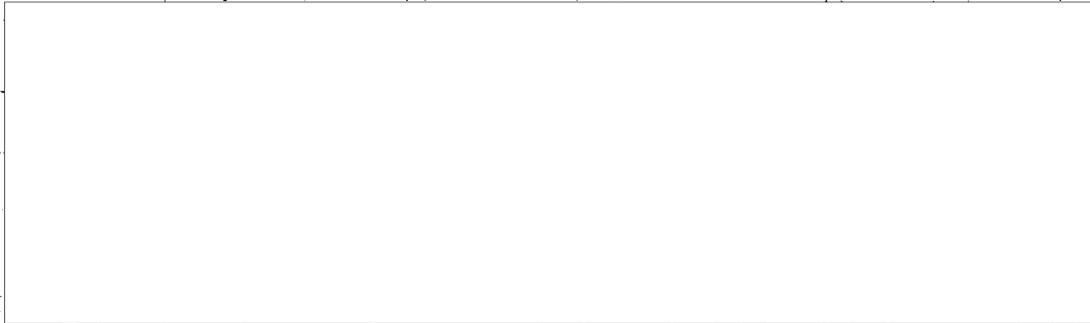
Section C. Narrative Comments (Continued)



CONFIDENTIAL

14-00000
Reviewing Comments
(Continued)

CONFIDENTIAL



CONFIDENTIAL

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				017974	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
Fox, Jerome		9 Oct 28	M	GS-13	D
6. OFFICIAL POSITION/TITLE			7. OFF/DIV/BR OF ASSIGNMENT		
Ops. Officer			DDI/FE		
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify)			<input checked="" 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)		
			30 November 1971 - 30 November 1972		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</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
Serve as the Station referent for MHABYSS matters.					S
SPECIFIC DUTY NO. 2					RATING LETTER
Serve as the Station referent for Communist matters.					S
SPECIFIC DUTY NO. 3					RATING LETTER
Spot, develop, assess and recruit [redacted]					P
SPECIFIC DUTY NO. 4					RATING LETTER
Spot, develop, assess and recruit agents to obtain intelligence [redacted] of the Communist parties (particularly the [redacted] and their main front organizations.					P
SPECIFIC DUTY NO. 5					RATING LETTER
Handle on-going cases: tighten operational security, increase production, strengthen agent motivations, handle ad hoc operational cases.					P
SPECIFIC DUTY NO. 6					RATING LETTER
Prepare reports, correspondence and other management/administrative requirements.					P
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 of 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
					P

JAC

SECRET

FORM 2, 11-67

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.

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	
24 November 1972	/s/ Jerome Fox	
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
24 November 1972	Deputy Chief of Station	/s/ [Redacted]
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
(continued)		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
24 November 1972	Chief of Station	/s/ George T. Kalaris

SECRET

SECRET

SECTION C - Narrative Comments (continued)



~~SECRET~~

S E C R E T

SECTION D - Comments of Reviewing Official (continued)

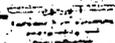


S E C R E T

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
					017974	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Fox, Jerome			9 Oct. 1928	M	GS-13	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/EN OF ASSIGNMENT		8. CURRENT STATION	
Ops. Officer			DDP/FE			
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
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/>	ANNUAL		
<input type="checkbox"/> SPECIAL (Specify)			<input type="checkbox"/> SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)			
28 February 1972			1 August 1971 - 31 December 1971			
SECTION B PERFORMANCE EVALUATION						
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</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
Serve as the Station referent for communist matters.						B
SPECIFIC DUTY NO. 2						RATING LETTER
Spot, develop, assess and recruit [redacted]						P
SPECIFIC DUTY NO. 3						RATING LETTER
Spot, develop, assess and recruit agents to obtain intelligence from the [redacted] (particularly the [redacted] and [redacted] their main front organizations.						P
SPECIFIC DUTY NO. 4						RATING LETTER
Handle on-going cases, tighten operational security, increase production, strengthen agent motivations; handle ad hoc operational cases.						S
SPECIFIC DUTY NO. 5						RATING LETTER
Prepare reports, correspondence, and other management/administrative requirements.						P
SPECIFIC DUTY NO. 6						RATING LETTER
Prepare media placement articles and themes.						P
OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER
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.						P



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.

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	
29 November 1971	/s/ Jerome Fox	
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
29 November 1971	COS, []	/s/ George Kalaris
3. BY REVIEWING OFFICIAL		
COMMENT OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
02 DEC 1971	CFE, []	Ralph J. Katrosh

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SS	
Fox, Jerome			9 Oct, 28	M	GS-13	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/FE				
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"/> CAREER-PROVISIONAL (See instructions - Section C)				<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <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 January 1971 - 30 July 1971			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</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	
Serve as the Station Referent for Communist Matters.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Spot, develop, assess, and recruit agents to obtain intelligence the [] and their main front organizations. (particularly						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Handle on-going cases: tighten operational security, increase production, strengthen agent motivations; handle ad hoc operational cases.						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Spot, develop, assess, and recruit []						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Prepare reports, correspondence, and other management/administrative requirements.						P	
SPECIFIC DUTY NO. 6						RATING LETTER	
Prepare media placement articles and themes.						P	
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 merits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place this letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	

20-2529

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B -- 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.</p>			

(Continued)

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				
31 July 1971	/s/ Jerome Fox				
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			
31 July 1971	Deputy Chief of Station	/s/ Terry T. Shima			
3. BY REVIEWING OFFICIAL					
COMMENTS OF REVIEWING OFFICIAL					
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE			
6 August 1971	Chief of Station	/s/ George T. Kalantz			

SECRET

SECRET

NARRATIVE (Continued)



SECRET

S E C R E T

NARRATIVE (Continued)



S E C R E T

S E C R E T

REVIEWING COMMENTS (continued)

MK

S E C R E T

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYER SERIAL NUMBER	
				017974	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH (M) (D) (YR)		3. GRADE (S) (10)	
Fox, Jerome (mat)		9 Oct. 1928 M		GS-13 D	
4. OFFICIAL POSITION TITLE		7. OFF. DIV. OR OF ASSIGNMENT		8. CURRENT STATION	
Ops. Officer		DDP/FA			
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"/> INITIAL <input type="checkbox"/> ANNUAL		
CAREER-PROVISIONAL (See Instructions - Section C)			REASSIGNMENT SUPERVISOR		
SPECIAL (Specify)			REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
28 February 1971			1 May 1970 to 31 December 1970		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Profitant Performance is satisfactory. Desired results are being produced in the manner expected.</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 Station Communist Movement (CM) officer responsible for functional coordination of overall program, including program guidance, analysis and research, and maintenance of central subject files pertinent to program targets (1 May - 10 August 1970).					RATING LETTER
					S
SPECIFIC DUTY NO. 2 Serve as the Station Referent for Communist Matters (August - 30 December 1970).					RATING LETTER
					S
SPECIFIC DUTY NO. 3 Spot, develop, assess, and recruit agents to obtain intelligence from the [redacted] (particularly the [redacted]) and their main front organizations.					RATING LETTER
					P
SPECIFIC DUTY NO. 4 Handle on-going cases: tighten operational security, increase production, strengthen agent motivation, and handle ad hoc operational cases.					RATING LETTER
					S
SPECIFIC DUTY NO. 5 Spot, develop, assess, and recruit [redacted]					RATING LETTER
					P
SPECIFIC DUTY NO. 6 Prepare reports, correspondence, and other management/administrative requirements.					RATING LETTER
					P
OVERALL PERFORMANCE IN CURRENT POSITION 9-MSR-1971					
Take into account everything about the employee which influences his effectiveness in his present position (such as past performance of specific duties, proficiency, conduct on job, cooperativeness, personal qualities, habits or traits, and particular limitations or needs). 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 best describes his level of performance.					RATING LETTER
					S

SECRET

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 D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

12 February 1971

SIGNATURE OF EMPLOYEE

/s/ Jerome Fox

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

17 February 1971

OFFICIAL TITLE OF SUPERVISOR

DCCG: []

TYPED OR PRINTED NAME AND SIGNATURE

/s/ Terry Shira

3.

BY REVIEWING OFFICIAL

DATE

17 February 1971

OFFICIAL TITLE OF REVIEWING OFFICIAL

SG: []

TYPED OR PRINTED NAME AND SIGNATURE

/s/ George T. Kalaris

SECRET

S E C R E T

NARRATIVE (con'td)



S E C R E T

S E C R E T

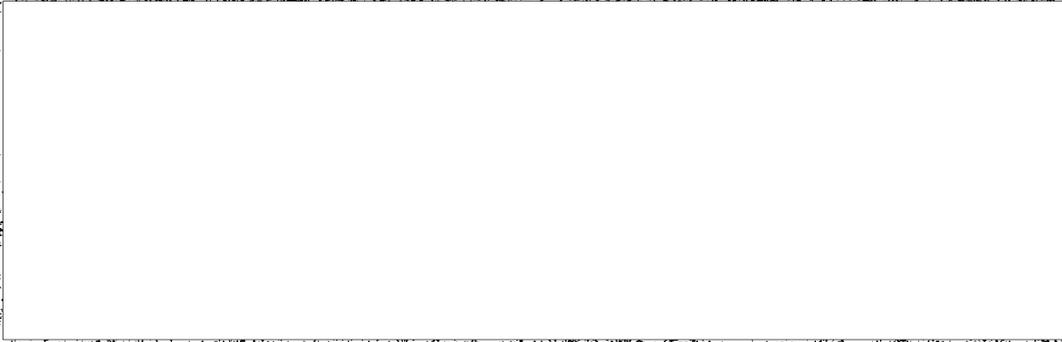
NARRATIVE (CON'TD)



S E C R E T

S E C R E T

NARRATIVE (CON'TD)



S E C R E T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE	5. SO
Fox, Jerome (nm)			Oct. 1928		M	GS-13	D
6. OFFICIAL POSITION TITLE			7. OFF. DIV. OR OF ASSIGNMENT				
Ops Officer			DDP/FE				
8. CHECK (X) TYPE OF APPOINTMENT				9. 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)			
28 February 1970				1 January 1970 - 30 April 1970			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</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		Station communist movement (CM) officer responsible for functional coordination of overall program, including program guidance, analysis and research, and maintenance of central subject files pertinent to program targets.					RATING LETTER
							S
SPECIFIC DUTY NO. 2		Case officer for [redacted] operations and the conduct of relationships [redacted] including intelligence exchange, operational, support and administrative matters consonant with maintaining Station's [redacted]					RATING LETTER
							S
SPECIFIC DUTY NO. 3		Unilateral case officer for selected agents/operations targeted against CM and CM-related objectives and for the development of assets under the CM program, including [redacted] operations.					RATING LETTER
							S
SPECIFIC DUTY NO. 4		The collation and preparation of raw intelligence data from [redacted] primarily, but including Station-wide unilateral sources as feasible, into draft field information reports.					RATING LETTER
							S
SPECIFIC DUTY NO. 5		Managerial and supervisory conduct in performance of duties and cost consciousness in the use of own time, other personnel, equipment, funds and on-the-job initiative.					RATING LETTER
							P
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						17 JUN 70	
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

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, may be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

JUN 16 3 10 PM '70

[Empty space for narrative comments]

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE: 8 May 1970 SIGNATURE OF EMPLOYEE: /s/ Jerome Fox

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 12 months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE: 8 May 1970 OFFICIAL TITLE OF SUPERVISOR: Opn Officer TYPED OR PRINTED NAME AND SIGNATURE: /s/ Harry G. Petersen

3. BY REVIEWING OFFICIAL

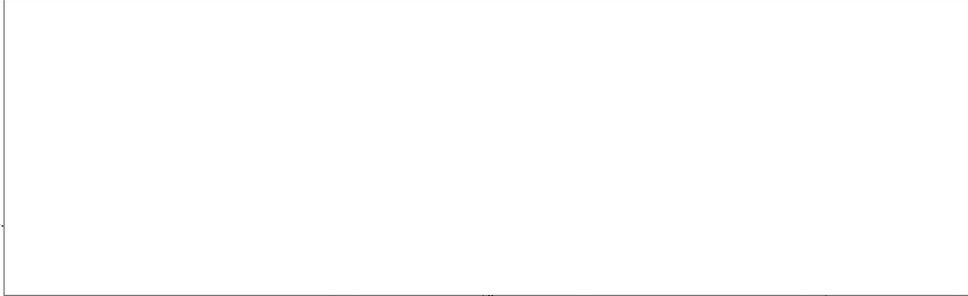
COMMENTS OF REVIEWING OFFICIAL:

[Empty space for reviewing official comments]

22 May 1970 DCOS /s/ Terry T. Shira

SECRET

COMMENTS OF REVIEWING OFFICIAL



SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. DD	
Fox, Jerome (nmf)		Oct. 1928		M	GS-13	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR. OF ASSIGNMENT			
Operations Officer				DDP/FE			
8. 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 type="checkbox"/> SPECIAL (Specify)		<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.				12. REPORTING PERIOD (From - To)			
21 February 1970				20 May 1969 - 31 December 1969			
SECTION B PERFORMANCE EVALUATION							
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</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 Station MPWATCH officer responsible for functional coordination of overall program, including program guidance, analysis and research, and maintenance of central subject files pertinent to program targets.							RATING LETTER S
SPECIFIC DUTY NO. 2 Case officer for [redacted] operations and the conduct of relationships [redacted] including intelligence exchange, operational, support and administrative matters consonant with maintaining Station's [redacted]							RATING LETTER S
SPECIFIC DUTY NO. 3 Unilateral case officer for selected agents/operations targeted against MPWATCH and MPWATCH-related objectives and for the development of new unilateral assets under the MPWATCH program, including [redacted] operations.							RATING LETTER P
SPECIFIC DUTY NO. 4 The collation and preparation of raw intelligence data from [redacted] primarily, but including Station-wide unilateral sources as feasible, into draft field information reports.							RATING LETTER S
SPECIFIC DUTY NO. 5 The preparation and organization of finished field intelligence reports, operational cables, teletapes, dispatches and related correspondence on MPWATCH and other [redacted] operational matters.							RATING LETTER P
SPECIFIC DUTY NO. 6 Managerial and supervisory conduct in performance of duties and cost consciousness in the use of own time, other personnel, equipment, funds and on-the-job initiative.							RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
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.							S

SECRET

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

[Empty box for narrative comments]

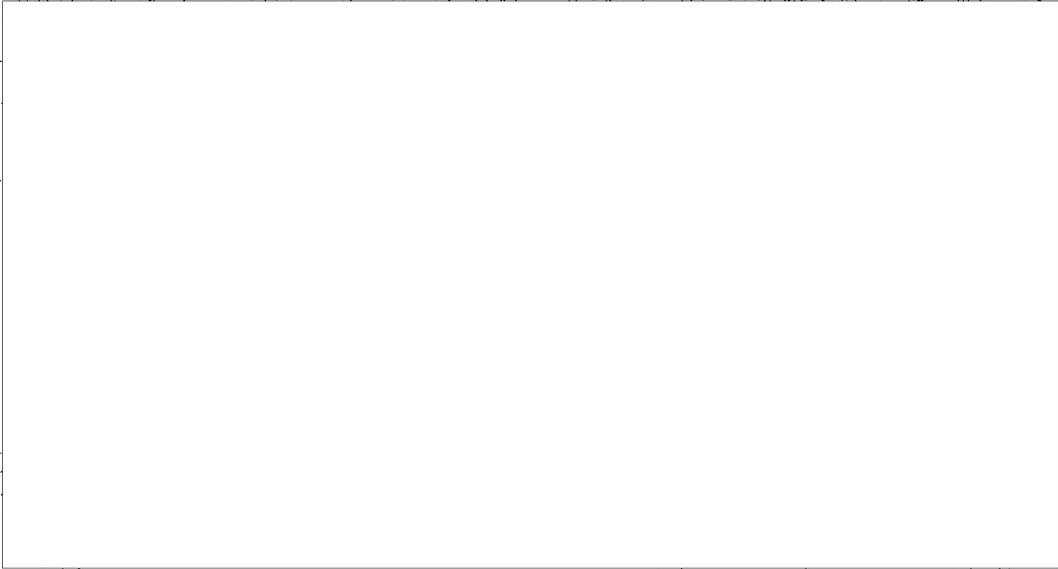
SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.		
DATE	SIGNATURE OF EMPLOYEE	
26 February 1970	/s/ Jerome Fox	
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
26 February 1970	Ops Officer	/s/ Harry G. Peterson
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
26 February 1970	DCOS	/s/ Terry T. Shima

SECRET

SECRET

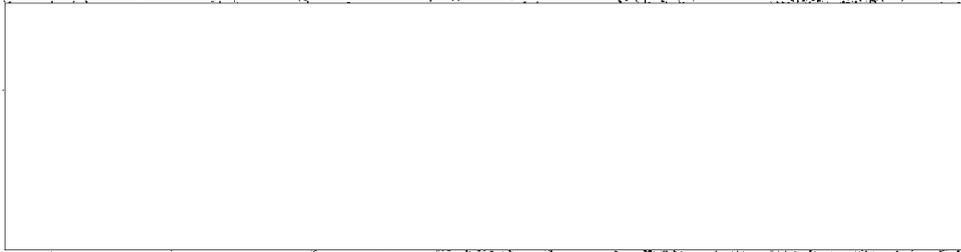
SECTION C - /continued --/



SECRET

SECRET

Reviewing Comments (continued)



SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) Fox, Jerome			2. DATE OF BIRTH 9 Oct 1928	3. SER. M	4. GRADE GS-13	5. SD D	
6. OFFICIAL POSITION TITLE Operations Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/FE/PMI/P		8. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER PROVISIONAL (See instructions - Section C)				<input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 1 January 1969 - 10 May 1969			
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 Acting Chief of the Philippine Desk						RATING LETTER S	
SPECIFIC DUTY NO. 2 Headquarters case officer for a variety of Manila Station CA and FI operations						RATING LETTER S	
SPECIFIC DUTY NO. 3 Contact of unilateral assets in the U.S.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Preparation and coordination of correspondence, studies, etc., in connection with Desk activities						RATING LETTER P	
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 S	

GROUP 1
Excluded from automatic
downgrading and
declassification

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.

[Empty box for narrative comments]

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.		
DATE 28 April 1969	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 28/4/69	OFFICIAL TITLE OF SUPERVISOR ADC/FE/PMI	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Laurent M. St. Georges
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
[Empty box for reviewing official comments]		
DATE 29 APR 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL AC/FE/PMI	[Empty box for reviewing official name/signature]

SECRET

SECRET
(When Filled In)

FITNESS REPORT		EMPLOYEE SERIAL NUMBER
		017974
SECTION A GENERAL		
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. GRADE
Fox, Jerome	9 Oct 1928	GS-13 D
4. OFFICIAL POSITION TITLE	5. OFF/DIV. BR. OF ASSIGNMENT	6. CURRENT STATION
Operations Officer	DDP/FE/PHI/P	Headquarters
7. CHECK (X) TYPE OF APPOINTMENT		8. CHECK (X) TYPE OF REPORT
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> INITIAL
<input type="checkbox"/> CAREER PROVISIONAL (See Instructions - Section C)	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> REASSIGNMENT SUPERVISOR
<input type="checkbox"/> SPECIAL (Specify):	<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE
9. DATE REPORT DUE IN O.P.	10. REPORTING PERIOD (From - To)	
31 January 1969	1 January 1968 - 31 December 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	Hqs desk officer for a variety of Manila Station CA & FI operations.	RATING LETTER S
SPECIFIC DUTY NO. 2	Contact of [redacted] potential unilateral assets in connection with operations.	RATING LETTER S
SPECIFIC DUTY NO. 3	Preparation and coordination of correspondence, studies, etc. in connection with Desk Activities.	RATING LETTER P
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 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. Mention 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.

[Empty space for narrative comments]

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 30 Dec 1968	SIGNATURE OF EMPLOYEE Jerome Fox <i>Jerome Fox</i>	
BY SUPERVISOR		
2. 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
	CFE/PMI/P	<i>Laurent St. Georges</i> Laurent St. Georges
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I believe the foregoing evaluation sums up the situation very well. Mr. Fox is an aggressive, capable, and experienced officer.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
2 January 1969	DC/FF/PMI	

SECRET

SECRET

TRAINING REPORT

NAME OF TRAINEE: Fox, Jerome

COURSE: CI Operations

DOB: 1 1928

HOURS: 80

OFFICE: FE SD:D

DATES: 25 Nov - 6 Dec '68

OBJECTIVE AND METHOD OF INSTRUCTION

Objectives

To provide the Clandestine Services Officer who will be responsible for counterintelligence operational planning and implementation with current counterintelligence operational concepts, techniques, and tactics; to describe the current field organization, functions, techniques, and tactics of selected intelligence and security services; to increase his proficiency in the planning, management, and implementation of counterintelligence operations; and to acquaint him with Headquarters organization and support for operations against selected counterintelligence targets.

Method of Instruction

The course is presented by means of lecture, case study, and discussion.

ADJECTIVAL RATINGS OF ACHIEVEMENT

Adjectival Rating

- | | |
|--|-----------|
| 1. Demonstration of understanding of course concepts and materials. | Excellent |
| 2. Participation in class discussions. | Excellent |
| 3. Imaginative and practical application of operational principles to case studies and problems. | Good |
| 4. Industriousness. | Excellent |

COMMENT: Mr. Fox was a very active student in discussions to which he contributed many helpful ideas. His presentation of the Wennerstroem Case was both objective and critical in terms of the available information on the case.

OVERALL adjectival rating of achievement: Excellent

FOR THE DIRECTOR OF TRAINING:

2 JAN 1969

Date

George G. Kisevalter
Chief Instructor

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) FOX, JEROME			2. DATE OF BIRTH 9 Oct 1928	3. SEX M	4. GRADE GS-12	5. SD D	
6. OFFICIAL POSITION TITLE Operations Officer			7. OFF/DIV/DR OF ASSIGNMENT DDP/FE		8. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)				<input checked="" 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) 7 April 1967 - 31 December 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 Headquarters Desk Officer for several Manila Station operational activities.							RATING LETTER S
SPECIFIC DUTY NO. 2 Study and Familiarization of the situation in the Philippines in preparation to an assignment in that country.							RATING LETTER S
SPECIFIC DUTY NO. 3 Contacts various operating units and staffs in the furtherance of operational assignments.							RATING LETTER S
SPECIFIC DUTY NO. 4 Prepares operational correspondence to the field in connection with his assigned responsibilities.							RATING LETTER P
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							RATING LETTER
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.							S

SECRET

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. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be stated, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Dec 29 3 52 PM '67

[Empty box for narrative comments]

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 19 December 1967	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 5 months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 19/12/67	OFFICIAL TITLE OF SUPERVISOR CFE/PMI/P	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Laurent St. Georges
3. BY REVIEWING OFFICIAL		
[Empty box for reviewing official signature]		
DATE 22 December 1967	OFFICIAL TITLE OF REVIEWING OFFICIAL DCFE/PMI	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> John P. Kennedy

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. ID	
Fox Jerome			9 Oct 1928	M	GS-12	D	
6. OFFICIAL POSITION/TITLE			7. OFF. STATION OF ASSIGNMENT		8. CURRENT STATION		
Operations Officer			FE/PMII		Hqs		
9. CHECK (1) TYPE OF APPOINTMENT				10. CHECK (2) TYPE OF REPORT			
<input 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			
<input type="checkbox"/> SPECIAL (Specify)				<input type="checkbox"/> SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 January - 7 April 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	
Serves as Headquarters Desk case officer for certain Djakarta Station operational activities as assigned to him. <i>DJ/0</i>						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Serves as primary referent on the Indonesian Desk for operations involving communist and other left-wing matters. <i>FE/4</i>						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Performs operational research functions on Indonesian communist and left-wing activities. <i>FE/3</i>						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Prepares operational correspondence to the field in connection with his assigned responsibilities.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<p><i>19 JUN 1967</i></p> OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER	
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.						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.

[Large empty box for narrative comments]

(Continued)

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
I CERTIFY THAT I HAVE SPEN SECTIONS A, B, AND C OF THIS REPORT.

DATE: 25 May 1967
SIGNATURE OF EMPLOYEE: *[Handwritten Signature]*

2. BY SUPERVISOR
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: Three
IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE: 25 May 1967
OFFICIAL TITLE OF SUPERVISOR: Acting Chief, FE/PMI/I
TYPED OR PRINTED NAME AND SIGNATURE: *[Handwritten Signature]* William T. Makino

3. BY REVIEWING OFFICIAL
COMMENTS OF REVIEWING OFFICIAL:

[Large empty box for reviewing official comments]

DATE: 23 May 1967
OFFICIAL TITLE OF REVIEWING OFFICIAL: Deputy Chief, FE/PMI
TYPED OR PRINTED NAME AND SIGNATURE: *[Handwritten Signature]* Clyde R. McAvoy

SECRET

SECRET

FITNESS REPORT - JEROME FOX

25 May 1967

SECTION C, NARRATIVE COMMENTS (Continued)



SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				017974	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
Fox, Jerome			9 Oct 28	M	12
5. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION
Ops Officer			DDP/PE/PMI		Hqs
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"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			October - December 1966		
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
See Section C					
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
Jan 1967					
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
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 & 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.					P

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.

JAN 12 1967

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE: 15 December 1966 SIGNATURE OF EMPLOYEE: Jerome Fox *[Signature]*

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: Oct - Dec 1966 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:

DATE: 15 Dec 1966 OFFICIAL TITLE OF SUPERVISOR: CFE/PMI/I

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur.

DATE: 20 December 1966 OFFICIAL TITLE OF REVIEWING OFFICIAL: Deputy Chief, FE/PMI SIGNATURE: *[Signature]*

SECRET

S-E-C-R-E-T

TRAINING REPORT

Soviet Bloc Operations Course No. 4
80 hours, full time 18 - 19 March 1968

Student : FOI, Jerome Office : DDP/FE
Year of Birth: 1928 Service Designation: D
Grade : GS-12 No. of Students : 32
EOD Date : 1955

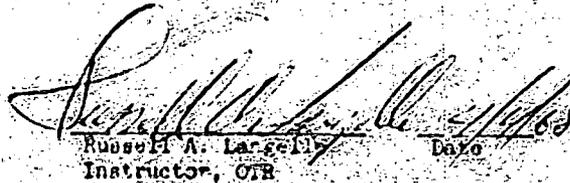
COURSE OBJECTIVES

To orient the student on the special nature of the Clandestine Services' Soviet Bloc target and to train him in the application of clandestine methods for collecting information on, assessing, and preparing recruitment operations against Soviet Bloc personalities.

ACHIEVEMENT RECORD

This is a certificate of attendance. No evaluation is made of individual performance in the course.

FOR THE DIRECTOR OF TRAINING:


Russell A. Large
Instructor, OIR

S-E-C-R-E-T

SECRET

TRAINING REPORT

 FAMILIARIZATION NO. 34
(40 hours, full-time)

26 February - 1 March 1968

Name : Fox, Jerome

No. of Students: 17

Office : FE

ED : D

Year of Birth: 1928

Grade : GS-12

BOB Date : June 1955

COURSE OBJECTIVES - CONTENT AND METHODS

The course is designed for Agency personnel requiring a sound basic understanding of contemporary and some acquaintance with the fundamentals of the language. The aim is familiarization, no specialization. The course focuses on . The language familiarization phase includes pronunciation of an introduction to the most widely accepted system of dictionary recording of and the telegraphic code. The area phase includes: cultural and historical development, geography and resources, economic development and problems, the political system, social change and control in contemporary and foreign relations.

ACHIEVEMENT RECORD

The above named student actively participated in the Familiarization Course No. 34. In this session no evaluation was attempted for the area phase. The student's performance in the language familiarization phase was .

FOR THE DIRECTOR OF TRAINING:

Robert R. Keller 5 March 1968
Chief Instructor Date

GROUP 1
Excluded from automatic
downgrading and
declassification

SECRET

SECRET

TRAINING REPORT

Operations Course No. 1-68
40 hours, full time 4 - 8 March 1968

Student : Fox, Jerome

Office : FE

Year of Birth: 1928

Service Designation: D

Grade : GS-12

No. of Students : 25

EOD Date : June 1955

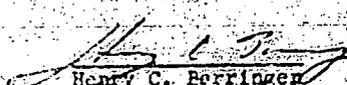
COURSE OBJECTIVE

To prepare Clandestine Services officers to conduct operations against [redacted] from the point of view of Human Source Collection; to present material directed toward the updating of officers in the operational realities inside and outside [redacted] today; and specifically to train officers in providing political, political-military, advanced weapons and other coverage of the priority [redacted] target which cannot be obtained by technical means.

ACHIEVEMENT RECORD

This is a certificate of attendance. No record is made of individual performance in the course.

FOR THE DIRECTOR OF TRAINING:


Henry C. Berringer Date
Chief Instructor

15 MAR 1968

SECRET

S-E-C-R-E-T

TRAINING REPORT

Chiefs of Station Seminar No. 68
80 hours, full time 5 - 16 February 1968

Participant : Jerome Fox Office : FE/PMI
Year of Birth: 1928 Service Designation: D
Grade : GS-12 No. of Students : 18
EOD Date : 1955

COURSE OBJECTIVES, CONTENT AND METHODS

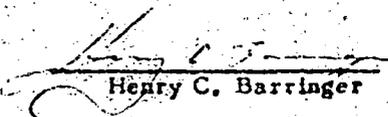
The COS Seminar is aimed to prepare prospective Chiefs and Deputy Chiefs of Station and Chiefs of Base for field assignments. Emphasis was upon the difficulties confronting Chiefs of small or medium-sized installations, since they must handle a peculiarly wide range of problems. Included were case studies serving to remind outgoing chiefs of various operational approaches and techniques, but more time was devoted to policy, coordination, management, reporting, and administrative responsibilities of the Chief of Station, both within CIA and in the government at large, at home and abroad.

The bulk of the course is given in lectures and question periods conducted by officials responsible for the missions, functions, programs, and services discussed. A few key items of suggested reading are included, and bibliographies of suggested reading tailored to the individual's assignment are offered for those who want them.

ACHIEVEMENT RECORD

This is a certificate of attendance. No further assessment of individual capacity or performance is made in this course.

FOR THE DIRECTOR OF TRAINING:


Henry C. Barringer

20 FEB 1968
Date

S-E-C-R-E-T

S-E-C-R-E-T

TRAINING REPORT

Information Reporting, Reports and Requirements Course No. 2 - 68
LEO Hours, full time - 26 February 1968

Student : FOX, Jerome Office : FE/PAI
Year of Birth: 1928 Service Designation: D
Grade : GS-12 No. of Students : 5
EOD Date : 1955

COURSE OBJECTIVES - CONTENT AND METHODS

The over-all objectives of the course are: to show the requirements function as it develops; to describe information evaluation, appraisal, and dissemination; to present fundamental principles of collection and communication of information; to demonstrate how, through Headquarters guidance, reporters can be directed and developed; and to prepare intelligence officers in the field to put information into finished report form. Supervised practice to develop skills is given in the production of finished reports; in reporting on area guidance patterns; in tailoring requirements into specific assignments; and in observing, collecting, organizing, and communicating information.

ACHIEVEMENT RECORD

Student achievement is judged from each student's observed performance during laboratory practice in the areas of instruction indicated. An asterisk (*) indicated this student's ratings. The ratings are weak, adequate, proficient, strong, and outstanding.

A. Qualitative and Quantitative Production of Reports:

Weak Adequate Proficient Strong Outstanding

COMMENT: The quality of Mr. Fox's work was uniformly excellent in every respect. He worked to full capacity.

B. Requirements Performance:

Weak Adequate Proficient Strong Outstanding

COMMENT:

His paper on this subject demonstrated that he has a very sound understanding of the Requirements and guidance systems.

S-E-C-R-E-T

S-E-C-R-E-T

C. Editorial Performance:

Weak Adequate Proficient Strong Outstanding

COMMENT:

His work demonstrated that he has acquired a very sound understanding of the principles of good editorial organization in intelligence reporting.

D. Reporting Performance:

Weak Adequate Proficient Strong Outstanding

COMMENT:

His outside reporting assignment was efficiently executed. It was well organized. Unfortunately, it lacked sufficient reporting detail to warrant a higher rating.

INSTRUCTOR'S OVER-ALL COMMENT:

Mr. Fox was a very fine student. He worked extremely well and his many penetrating questions added very considerably to the tone of the class. His work was of excellent quality and it showed that he has acquired a sound understanding of the various aspects of the reporting function discussed.

FOR THE DIRECTOR OF TRAINING

Herbert G. King

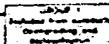
Herbert G. King
Chief Instructor

1 FEB 1968
Date

S-E-C-R-E-T

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO	
Fox, Jerome			9 Oct 28	M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/SR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/EE/VIC		Vietnam		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)			<input type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
<input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
				1 January - 9 July 1966			
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	
The initiation, development and management of a sensitive FI/CI operation. <i>DDP/EE/70</i>						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
The spotting, assessment, development, recruitment and management of unilateral FI agents.						S	
SPECIFIC DUTY NO. 3						RATING LETTER	
Functions as a liaison officer with officials of the Vietnamese National Police. <i>DDP/51</i>						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
The preparation of dispatches, cables, intelligence information reports, memoranda and other necessary papers required by the above duties.						A	
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	
						S	



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position ^{OFFICE} 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.

JUL 28

SECTION D

CERTIFICATION AND COMMENTS *with him again.*

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT.		
DATE	SIGNATURE OF EMPLOYEE	
8 July 1966	Jerome Fox (s)	
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
8 July 1966	Ops Officer	Michael F. Stern (s)
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I concur in the above.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
8 July 1966	Chief of LB	John L. Stent (s)

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				017974	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
Fox, Jerone		10/09/28	M	GS-12	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/NS/ARC		Saigon	
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"/>	CAREER-PROVISIONAL (See instructions - Section C)	<input checked="" type="checkbox"/>	INITIAL	<input type="checkbox"/>	REASSIGNMENT SUPERVISOR
<input type="checkbox"/>	SPECIAL (Specify):	<input type="checkbox"/>	ANNUAL	<input type="checkbox"/>	REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
Feb 66			29 December 1964 to 31 Dec 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 Officer in charge of liaison with the Municipal Police					RATING LETTER P
SPECIFIC DUTY NO. 2 Officer in charge of liaison 					RATING LETTER S
SPECIFIC DUTY NO. 3 Officer in liaison with operational components of Headquarters, Special Branch					RATING LETTER P
SPECIFIC DUTY NO. 4 Handles all the correspondence, files and associated memoranda connected with the tasks cited above.					RATING LETTER P
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 P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective 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.

OFFICE OF PERSONNEL
FEB 15 10 43 AM '66

[Empty box for narrative comments]

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
1 Feb 66	/s/ Jerome Fox

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
1 Feb 66	Ops Officer	/s/ James Braafandt

3. BY REVIEWING OFFICIAL

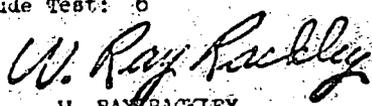
COMMENTS OF REVIEWING OFFICIAL

I concur with the above.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
1 Feb 66	Ops Officer	/s/ John Stent

SECRET

SECRET
(When Filled In)

TRAINING REPORT - LANGUAGE				COURSE TITLE			
				French Inter. - SW - Ph I			
INSTRUCTOR				PROGRAM			
Mr. T. Burke				Daytime - Part-time			
NO. OF STUDENTS		NO. OF HOURS		DATE OF COURSE			
1		60		05/04/64 - 07/20/64			
STUDENT							
NAME		YOB	DOB DATE	OFFICE		GS	SD
Eck, Jerome		28	06/55	FB		12	D
<i>(See reverse side for definitions of proficiency levels)</i>							
LEVEL OF PROFICIENCY AT ENTRY INTO TRAINING				<input checked="" type="checkbox"/> INSTRUCTORS ESTIMATE		OFFICIAL TEST	
		NO PROFICIENCY	SLIGHT	ELEMENTARY	INTERMEDIATE	HIGH	
LEVEL OF PROFICIENCY AT ENTRY INTO TRAINING	READING			X			
	WRITING			X			
	PRONUNCIATION			X			
	SPEAKING		X				
	UNDERSTANDING		X				
LANGUAGE TRAINING OBJECTIVES AND METHODS							
<p>The general aims of language training are attainment of proficiency in speaking, understanding, reading and writing. The specific objectives are: (1) ability to produce and distinguish the sounds of the language; (2) ability to use a stock of basic sentences and expressions; (3) ability to recombine the elements of basic sentences and expressions and to apply them to new situations; (4) ability to comprehend the language spoken at normal speed in various situations; (5) ability to write and read the language commensurate with ability to speak.</p> <p>Methods used in all courses stress oral drills and free conversation based at first on memorized material and, at a later stage, on varied reading materials. Written and oral tests are given at intervals. Listening to and recording on tapes in the Language Lab is essential for class preparation.</p>							
PERFORMANCE EVALUATION							
		UNSATISFACTORY	SATISFACTORY		EXCELLENT		
ACHIEVEMENT			X				
ATTITUDE			X				
ATTENDANCE			X				
LEVEL OF PROFICIENCY AT COMPLETION OF TRAINING				<input checked="" type="checkbox"/> INSTRUCTORS ESTIMATE		OFFICIAL TEST	
		NO PROFICIENCY	SLIGHT	ELEMENTARY	INTERMEDIATE	HIGH	
LEVEL OF PROFICIENCY AT COMPLETION OF TRAINING	READING				X		
	WRITING			X			
	PRONUNCIATION			X			
	SPEAKING			X			
	UNDERSTANDING			X			
Foreign Language Aptitude Test: 6							
 W. RAY RACKLEY SIGNATURE, HEAD OF DEPARTMENT, 67/148/074							
FOR THE DIRECTOR OF TRAINING:				25 Mar 64		DATE	

FORM 2222

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(45)

SECRET

TRAINING REPORT

Covert Action Operations Course No. 63, 30 March to 17 April 1964
60 hours part time

Student : Fox, Jerome Office : FE
Year of Birth: 1928 Service Designation: D
Grade : GS-12 No. of Students : 13
EOD Date : June 1955

STUDENT OBJECTIVES - CONTENT AND METHODS

The Covert Action Operations Course is an advanced seminar for senior and middle grade CS officers who will direct and conduct covert action operations in the field. It provides a conference setting in which experienced officers may discuss the full range of operational problems — from policy and strategy to tactics and techniques — with senior Agency officers, both those recently returned from field posts and those assigned to Headquarters for guidance and support of CA field operations.

The CAO course covers the origin and scope of CIA's covert action mission, [redacted] tactical approaches to the direction of CA operations, political action, economic action, propaganda, paramilitary operations, special operations, the national counterinsurgency program, covert action in the [redacted] counterintelligence problems in covert action, joint CI-CA programs, and current area case studies.

ACHIEVEMENT RECORD

This is a certificate of attendance. Adjectival ratings are not given in this course.

FOR THE DIRECTOR OF TRAINING:



Dawson Smith
Chief Instructor

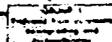
22 April 1964
Date

Group I
Excluded from automatic
downgrading and
declassification

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEA	4. GRADE	5. SO	
FOX Jerome J.			9 Oct 1928	M	GS-12	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION		
Ops Officer				DDP/EE/VNC/VN	Headquarters		
9. CHECK IN TYPE OF APPOINTMENT				10. CHECK IN TYPE OF REPORT			
CAREER		RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)				XX ANNUAL	REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)				SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.				12. REPORT PERIOD (From - to)			
January 1964				April - 31 January 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	
Assembles available information on North Vietnam, and its diplomatic establishments abroad.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Acts as ZRGRAIL officer for Vietnam Desk.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Aids in giving operational support to denied areas ops program run by Saigon Station.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Prepares periodic reports on progress of denied area ops program.						S	
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	
17 MAR 1964						P	



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 applicable.

[Large empty rectangular box for narrative comments]

SECTION D

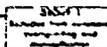
CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
18 February 1964	<i>E. K. ...</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
10		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
18 February 1964	Chief, FE/VNC/Vietnam	Donald P. GORDON
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
[Empty box for reviewing official comments]		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
9 March 1964	Chief, FE/VNC	Philip B. K. Potter

SECRET

SECRET
(When Filled In)

FITNESS REPORT				FILED SERIAL NUMBER <i>017774</i>			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) FOX, Jerome			2. DATE OF BIRTH 9 Oct 28	3. SEX M	4. GRADE GS-12	5. SD IR	
6. OFFICIAL ID 10			7. OFF. DIV. OR OF ASSIGNMENT DDP/FE		8. CURRENT STATION TOKYO		
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 checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From To) 1 Jan 62 - 23 September 1962			
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 Monitors and coordinates with ODYOKE and allied armed services the [redacted] in North Asian area covering specifically Japan, South Korea, [redacted]						RATING LETTER S	
SPECIFIC DUTY NO. 2 Determines, initiates and directly participates in the exploitation of [redacted] in conjunction with KUDOVE and ODYOKE armed services.						RATING LETTER S	
SPECIFIC DUTY NO. 3 Provides detailed training and guidance for ODYOKE personnel and for foreign allied personnel (e.g. [redacted] in the identification, photographic and collection techniques						RATING LETTER S	
SPECIFIC DUTY NO. 4 Maintains continuing & close official and personal working liaison with & support for commanders & officers of the various ODYOKE military intel collection units in [redacted] & with Tokyo KUDOVE elements, particularly the [redacted] Staff.						RATING LETTER A	
SPECIFIC DUTY NO. 5 Responsible for preparation of collection intel & admin rpts & dispatches to KULYNX [redacted], on all matters pertaining to the [redacted] in this area of jurisdiction.						RATING LETTER A	
SPECIFIC DUTY NO. 6 Assisted the Branch Chief in the handling of KULYNX requirements.						RATING LETTER P	
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 P+	



SECRET

NARRATIVE COMMENTS

SECTION C

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

SECTION D

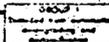
CERTIFICATION AND COMMENTS

1. BY EMPLOYEE	
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE 4/23/63	SIGNATURE OF EMPLOYEE Jerome Fox <i>Jerome Fox</i>
2. BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 15 MONTHS	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION FR shown HAS ALREADY DEPARTED TO NZA POST <i>to language 4/23/63</i>
DATE 19 Oct 1962	OFFICIAL TITLE OF SUPERVISOR TYPED OR PRINTED NAME AND SIGNATURE <i>Elmer P. Hintz</i>
3. BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL CORRECT.	
DATE 22 Oct 1962	OFFICIAL TITLE OF REVIEWING OFFICIAL <i>8005. Tolson</i>
TYPED OR PRINTED NAME AND SIGNATURE <i>Robert P. Wheeler</i>	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				017974			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO	
FOX Jerome J.			9 Oct 1928	M	GS-12	D	
6. OFFICIAL POSITION/TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/FE/VNC/VN		Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
CAREER		RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)				SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
January 1964				April - 31 January 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		
Assembles available information on North Vietnam, and its diplomatic establishments abroad.					S		
SPECIFIC DUTY NO. 2					RATING LETTER		
Acts as ZRGRAIL officer for Vietnam Desk.					P		
SPECIFIC DUTY NO. 3					RATING LETTER		
Aids in giving operational support to denied areas ops program run by Saigon Station.					P		
SPECIFIC DUTY NO. 4					RATING LETTER		
Prepares periodic reports on progress of denied area ops program.					S		
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		
					P		



SECRET

OFFICE

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 assignment 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.

02 PM '62

[Empty space for narrative description of manner of job performance]

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
31 December 61	Jerome Fox (Signed)

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
7	

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

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
31 December 61		Elmer P. Hints (Signed)

3. BY REVIEWING OFFICIAL

- I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
- I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
- I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
- I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

[Empty space for comments]

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
31 Dec. 61		Robert P. Wheeler (Signed)

SECRET

SECRET

Continuation of Section B:

Specific Duty No. 3

collection techniques [redacted]

Specific Duty No. 4

KUDCVS elements, particularly [redacted]

SECRET

SECRET
(When Filled In)

[Handwritten Signature]

FITNESS REPORT		EMPLOYER SERIAL NUMBER
-----------------------	--	------------------------

SECTION A GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE
FOX, Jerome		9 October 1940		Male	GS-11
5. SERVICE DESIGNATION		6. OFFICIAL POSITION/TITLE		7. OFF/DIVISION OF ASSIGNMENT	
IR		IO			
8. CAREER STAFF STATUS			9. TYPE OF REPORT		
NOT ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR	
PENDING	DECLINED	DENIED	X ANNUAL	REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD		SPECIAL (Specify)	
		From Sept. 59 to Apr. 61			

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 (insert number of employees supervised).						
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
SPECIFIC DUTY NO. 1: Monitors and coordinates with ODYKKE and allied armed services in North Asian area covering [redacted]		RATING NO. 6	SPECIFIC DUTY NO. 4: Maintains continuing and close official & personal working liaison with a support for commanders & officers of the various ODYKKE Military Intel collection units in [redacted]		RATING NO. 5	(cont)
SPECIFIC DUTY NO. 2: Determines, initiates and directly participates in the exploitation of PMS targets in conjunction with RUCGZ and ODYKKE armed services.		RATING NO. 6	SPECIFIC DUTY NO. 5: Responsible for proper [redacted] of collection intel & admin rpts & dispatches to [redacted] on all matters pertaining to the ENCI in this area of jurisdiction.		RATING NO. 5	
SPECIFIC DUTY NO. 3: Provides detailed training and guidance for ODYKKE personnel and for foreign allied personnel (e.g. [redacted] in the identification, photographic and [redacted])		RATING NO. 6	SPECIFIC DUTY NO. 6: Represents the interest of [redacted] generally in liaison with other ODYKKE intelligence components - both collection and analysis in [redacted]		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.			
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:100px; height:100px;"> <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 3 4 5
GETS THINGS DONE					X
RESOURCEFUL					X
ACCEPTS RESPONSIBILITIES					X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES					X
DOES HIS JOB WITHOUT STRONG SUPPORT					X
FACILITATES SMOOTH OPERATION OF HIS OFFICE					X
DRIVES EFFECTIVELY					X
IS SOCIALLY CONSCIOUS					X
THINKS CLEARLY					X
DISCIPLINED IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS					X
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.

[Empty space for narrative description of manner of job performance]

SECTION F CERTIFICATION AND COMMENTS (Continued)

1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE 14 April 1961	SIGNATURE OF EMPLOYEE Jerome Fox (Signed)	This report has been prepared in accordance with F.P. Division standards which are being used to evaluate the individual's performance.
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 18	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE	IF NOT, GIVE EXPLANATION: N/A
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 14 April 1961	OFFICIAL TITLE OF SUPERVISOR Chief, SIB	TYPED OR PRINTED NAME AND SIGNATURE Frank J. Denny
3. BY REVIEWING OFFICIAL		
I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.		
I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.		
I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.		
I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
14 Apr 1961		Robert P. Wheeler

SECRET

Continuation of Section B:

Specific Duty No. 3

collection technique

Specific Duty No. 4

KUDOV elements

Continuation of Section E:

and experience in the broader, analytical aspects of the KUCHAP area, including language and area studies.

Continuation of Section F-3:

normal administrative responsibilities.

SECRET
(When Filled In)

WAL

FITNESS REPORT				EMPLOYEE SERIAL NUMBER								
SECTION A GENERAL												
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE							
FOX Jerome		9 October 1928		Male	GS-11							
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT								
IR												
8. CAREER STAFF STATUS			9. TYPE OF REPORT									
NOT ELIGIBLE	<input checked="" type="checkbox"/> MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR								
PENDING	DECLINED	DENIED	ANNUAL	REASSIGNMENT/EMPLOYEE								
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD From To		12. SPECIAL (Specify)								
		4 Sept 59 30 Sept 59		Promotion								
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).												
<table border="0" style="width:100%;"> <tr> <td>1 - Unsatisfactory</td> <td>2 - Barely adequate</td> <td>3 - Acceptable</td> <td>4 - Competent</td> <td>5 - Excellent</td> <td>6 - Superior</td> <td>7 - Outstanding</td> </tr> </table>						1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding						
SPECIFIC DUTY NO. 1		SPECIFIC DUTY NO. 4		RATING NO.								
Monitors and coordinates with ODYOKE and allied armed services the [redacted] in [redacted] officially		maintains continuous and close official & personal working liaison with & support for commanders & officers of the various ODYOKE units in [redacted] in [redacted]		6								
SPECIFIC DUTY NO. 2		SPECIFIC DUTY NO. 5		RATING NO.								
Determines, initiates and directly participates in the exploitation of targets in conjunction with KUDOVE and ODYOKE armed services.		analyzes, particularly the [redacted] liaison staff // responsible for preparation of collection intel & admin [redacted] & [redacted] [redacted] to [redacted] in [redacted]		6								
SPECIFIC DUTY NO. 3		SPECIFIC DUTY NO. 6		RATING NO.								
Provides detailed training and guidance for ODYOKE personnel and [redacted] (e.g. [redacted] Nationalist) in the identification, photo [redacted] [redacted]		area of jurisdiction, represents the interests of ODYOKE generally in liaison with other ODYOKE intelligence components - both collected [redacted] [redacted]		5								
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION												
collection techniques applicable to the [redacted]. 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.												
<table border="0" style="width:100%;"> <tr> <td>1 - Performance in many important respects fails to meet requirements.</td> <td rowspan="6" style="border: 1px solid black; text-align: center; vertical-align: middle;">RATING NO. 5</td> </tr> <tr> <td>2 - Performance meets most requirements but is deficient in one or more important respects.</td> </tr> <tr> <td>3 - Performance clearly meets basic requirements.</td> </tr> <tr> <td>4 - Performance clearly exceeds basic requirements.</td> </tr> <tr> <td>5 - Performance in every important respect is superior.</td> </tr> <tr> <td>6 - Performance in every respect is outstanding.</td> </tr> </table>					1 - Performance in many important respects fails to meet requirements.	RATING NO. 5	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.	
1 - Performance in many important respects fails to meet requirements.	RATING NO. 5											
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.												
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	3	4	5		
GETS THINGS DONE										X		
RESOURCEFUL										X		
ACCEPTS RESPONSIBILITIES										X		
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES										X		
DOES HIS JOB WITHOUT STRONG SUPPORT									X			
FACILITATES SMOOTH OPERATION OF HIS OFFICE									X			
WRITES EFFECTIVELY								X				
SECURITY CONSCIOUS								X				
THINKS CLEARLY									X			
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								X				
OTHER (Specify):												
SEE SECTION "E" ON REVERSE SIDE												

Continuation of Section E:

In recognition of subject officer's outstanding performance to date and in view of the considerable responsibilities incident to the post of [redacted] representative in this area, I recommend that subject officer be promoted to the grade of GS-12 as soon as possible.

SECRET (When Filled In) 24 AUG 1959

24128

FITNESS REPORT	EMPLOYEE SERIAL NUMBER 117974
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SECTION A GENERAL			
1. NAME (Last) (First) (Middle) Fox, Jerome	2. DATE OF BIRTH 1928	3. SEX Male	4. GRADE GS-11
5. SERVICE DESIGNATION IR		6. OFFICIAL POSITION TITLE IO	
7. OFF/DIV/GR OF ASSIGNMENT ORR-FM/EA			
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
		<input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR	<input checked="" type="checkbox"/> REASSIGNMENT/EMPLOYEE
10. DATE REPORT DUE IN O.P. 31 Oct 1959		11. REPORTING PERIOD 15 Mar 58 - 30 Sep 1959	

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 Prepares written reports on results of analysis.	RATING NO. 3	SPECIFIC DUTY NO. 4 Directs and participates in field exploitation.	RATING NO. 4
SPECIFIC DUTY NO. 2 Derives significant intelligence from factory markings data.	RATING NO. 4	SPECIFIC DUTY NO. 5 Organizes raw data into analytic file.	RATING NO. 5
SPECIFIC DUTY NO. 3 Supervises junior analyst.	RATING NO. 4	SPECIFIC DUTY NO. 6	RATING NO.

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 style="text-align: center;">RATING NO.</td></tr> <tr><td style="text-align: center;">3</td></tr> </table>	RATING NO.	3
RATING NO.			
3			

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 APPLI- CABLE	NOT OBS- ERVED	RATING				
					1	2	3	4	5
GETS THINGS DONE							X		
RESOURCEFUL								X	
ACCEPTS RESPONSIBILITIES							X		
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X	
DOES HIS JOB WITHOUT STRONG SUPPORT								X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE								X	
WRITES EFFECTIVELY						X			
SECURITY CONSCIOUS								X	
THINKS CLEARLY							X		
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								X	
OTHER (Specify):									

SEE SECTION "E" ON REVERSE SIDE

SECRET
(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

State 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.

[Empty space for narrative description]

OFFICE OF PERSONNEL
AUG 19 4 56 PM '59
MAIL ROOM

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: 42
IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION: Departed on PCS overseas.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON:

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS: OTHER (Specify): REPORT MADE WITHIN LAST 90 DAYS:

DATE: 13 August 1959
OFFICIAL TITLE OF SUPERVISOR: Chief, FM/EA
TYPED OR PRINTED NAME AND SIGNATURE: John H. Dufala

3. BY REVIEWING OFFICIAL

I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION:
I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION:
I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION:
I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE:

COMMENTS OF REVIEWING OFFICIAL:

DATE: 13 August 1959
OFFICIAL TITLE OF REVIEWING OFFICIAL: Chief, St/PM
TYPED OR PRINTED NAME AND SIGNATURE: James Q. May

S-E-C-R-E-T

REPORT OF TRAINING

Operations Familiarization Course No. 17

I. IDENTIFYING INFORMATION

Name: FOX, Jerome Sex: Male
Date of Birth: 9 October 1928 Grade or Rank: GS-11
EOD Date: 15 June 1953 Office: OAR
Dates of Course: 6 Apr - 15 May 59 No. of Students: 25
Projected Assignment or Present Position:
(from Request for Internal Training)

II. DESCRIPTION OF COURSE

The Operations Familiarization Course is a six-week course designed primarily for Clandestine Services non-case officer personnel and for non-Clandestine Services officers whose responsibilities in support of operations require adequate familiarization with case officer functions and with the programs and operations of the Clandestine Services.

III. REPORT OF STUDENT ACHIEVEMENT

To satisfactorily complete the Operations Familiarization Course the student must demonstrate in a series of seminars and in a limited number of written assignments that he has acquired an adequate understanding of the fundamentals of clandestine operations. Testing mechanisms are minimal and do not permit an extensive evaluation of individual performance.

Mr. Fox satisfactorily completed Operations Familiarization Course No. 17.

FOR THE DIRECTOR OF TRAINING:

(SIGNED) *[Signature]*

Chief Instructor, OFC

[Signature]
Chief, Field Training

S-E-C-R-E-T

(When filled in)

COURSE DESCRIPTION

SPANISH BASIC COURSE (REPEATED WINTER II (PART-TIME))

SECTION I: IDENTIFYING INFORMATION

NAME		SEX	DATES OF COURSE	NO. OF STUDENTS
FOX, Jerome		Male	5 Jan - 13 March 1959	3
DATE OF BIRTH	END DATE	GRADE OR RANK		OFFICE
9 Oct 1928	15 June 1955	OS-11		OSB
PRESENT ASSIGNMENT OR PRESENT LOCATION				
Analytic position in ST/PM				

SECTION II: SPECIFIC CHARACTERISTICS OF THE COURSE

This course lasts 10 weeks. The classes are held 2 hours per day, 5 days a week. Students are required to do a minimum of 10 hours per week of drill in the language laboratory outside of class hours. The instructor is able to meet at any time by appointment with each student individually. Students are given at least two major tests and a number of ten-minute tests during the progress of the course.

SECTION III: OBJECTIVES

The general aim of this course is to provide a thorough grounding for the student who has previously had either a reading course in the language or an insufficient introduction to the language. It serves as a basis for further advancement either by independent learning in the area or by further study.

The specific objectives are:

- A. Ability to produce and distinguish all the sounds of the language.
- B. Ability to use adequately a stock of correct Spanish sentences and expressions.
- C. Ability to analyze sentences and expressions into their components.
- D. Ability to comprehend speech-speed spoken Spanish in a wide variety of non-technical situations.
- E. Ability to read and write informal Spanish using a limited number of vocabulary and structural items.

SECTION IV: EVALUATION RATINGS

The following is an explanation of the five terms of evaluation employed below:

1. The student failed to satisfy minimum requirements, and his grasp of the material is too inadequate to be functional.
2. The student satisfied only the minimum requirements of the objectives. His grasp is barely functional.

S-E-C-R-E-T
(When filled in)

S-E-C-R-E-T
(When Filled In)

3. The student met the objectives in a creditable manner, revealing a good grasp of essentials.
4. The student showed a high degree of competence in meeting the objectives.
5. The student demonstrated exceptional ability or proficiency in meeting the objectives. His accomplishment was one attained by a very small number of students.

SECTION V: ACHIEVEMENT RATINGS

The number in each cell represents the number of students receiving that rating in terms of the above objectives. The asterisk (*) represents the rating this student achieved.

Course Objectives	Rating 1	Rating 2	Rating 3	Rating 4	Rating 5
Objective A			2*	1	
Objective B			2*	1	
Objective C			2*	1	
Objective D			2*	1	
Objective E			2*	1	

This class as a whole is rated as:

Above average _____ Average **X** _____ Below than average _____

SECTION VI: COMMENTS

FOR THE DIRECTOR OF TRAINING

181
 Signature of Instructor

SECTION I: IDENTIFYING FACTORS

NAME	SEX	DATE OF BIRTH	NO. OF SEMESTERS
FOX, Jerome	Male	13 Oct 58-19 Dec 58	6
DATE OF BIRTH	FOR GRAD	CLASS	ORG
9 October 1928	15 June 1955	CS-11	OSR
IF SELECTED AS MEMBER OF PRESENT INSTITUTION			
Analyst			

SECTION II: SPECIFIC CHARACTERISTICS OF THE COURSE

This course lasts 10 weeks. The classes are held 2 hours per day, 5 days a week. Students are required to do a minimum of 10 hours per week of drill in the language laboratory outside of class hours. The instructor is able to meet at any time by appointment with each student individually. Students are given at least two major tests and a number of assignments during the period of the course.

SECTION III: OBJECTIVES

The general aim of this course is to provide a thorough grounding for the student who has previously had either a reading course in the language or an insufficient introduction to the language. It serves as a basis for further advancement either by independent learning in the area or by further study.

The specific objectives are:

- Objective A. Ability to produce and distinguish all the sounds of the language.
- Objective B. Ability to use intelligibly a bank of correct Spanish sentences and expressions.
- Objective C. Ability to analyze sentences and expressions into their components.
- Objective D. Ability to understand and interpret spoken Spanish in a wide variety of conversational situations.
- Objective E. Ability to read and understand a limited number of elementary and structural texts.

SECTION IV: EVALUATION SYSTEM

Continued
When filled in

UNIVERSITY OF CALIFORNIA, BERKELEY

The following is an explanation of the five terms of evaluation employed below:

- Rating 1. The student failed to satisfy minimum requirements, and his grasp of the material is too inadequate to be functional.
- Rating 2. The student satisfied only the minimum requirements of the objectives. His grasp is barely functional.
- Rating 3. The student met the objectives in a creditable manner, revealing a good grasp of essentials.
- Rating 4. The student showed a high degree of competence in meeting the objectives.
- Rating 5. The student demonstrated exceptional ability or proficiency in meeting the objectives. His accomplishment was one attained by a very small number of students.

SECTION VI: ACHIEVEMENT RATINGS

The number in each cell represents the number of students receiving that Rating in terms of the above objectives. The asterisk (*) represents the Rating this student achieved.

Course Objective	Rating 1	Rating 2	Rating 3	Rating 4	Rating 5
Objective A		1	2	2*	1
Objective B			3*	3	
Objective C			4*	2	
Objective D			3*	3	
Objective E			3	3*	

This class as a whole is rated as:

Above average _____ Average X _____ Below than average _____

SECTION VII: COMMENTS

Since reading skills are stressed during the latter part of the 50-week course series, the rating for Objective E is based on a limited amount of information.

FOR THE DIRECTOR OF STUDENTS:

/s/

Signature of Head Instructor

DATE: _____
(When filled in)

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 OP 9. PERIOD COVERED BY THIS REPORT 10. TYPE OF REPORT

SECTION B. CERTIFICATION

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

A. CHECK (X) APPROPRIATE STATEMENTS:

2. THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL. 3. THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS. 4. I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

B. THIS DATE C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR D. SUPERVISOR'S OFFICIAL TITLE

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.

BY DATE MA 10 APR 1958 Reviewed by PUS [Signature] 4/14/58

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

A. THIS DATE B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION C. JOB PERFORMANCE EVALUATION

1. 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.

- 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

DIRECTIONS:

a. State in the spaces below up to six of the more important SPECIFIC duties performed during the reporting period. Place the most important first. Do not include minor or unimportant duties.

b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.

c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).

d. Compare in your mind, when possible, the individual being rated with others performing a similar level of responsibility.

e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.

f. Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING 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

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.

OFFICE OF AIR FORCE
APR 9 4 38 PM '58
MAIL ROOM

1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY	6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS
2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY	7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY
3 - PERFORMS THIS DUTY ACCEPTABLY	
4 - PERFORMS THIS DUTY IN A COMPETENT MANNER	
5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB	

SPECIFIC DUTY NO. 1 Organizes raw data into analytic file	RATING NUMBER 5	SPECIFIC DUTY NO. 2 Directs field exploitation	RATING NUMBER 4
SPECIFIC DUTY NO. 3 Derives significant intelligence from data	RATING NUMBER 5	SPECIFIC DUTY NO. 4 Supervises junior analysts	RATING NUMBER 4
SPECIFIC DUTY NO. 5 Prepares reports on conclusions	RATING NUMBER 3	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

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

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.

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:

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 question. 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 CE 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) FOX JEROME
2. DATE OF BIRTH 9 Oct 26
3. SEX M
4. SERVICE DESIGNATION LR
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT CRR/ST/EN/EA
6. OFFICIAL POSITION TITLE Identification Specialist
7. GRADE 11
8. DATE REPORT DUE IN OP 29 March 58
9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 15 March 57 - 15 March 58
10. TYPE OF REPORT (Check one) INITIAL [] ANNUAL [X] REASSIGNMENT-SUPERVISOR [] REASSIGNMENT-EMPLOYEE [] SPECIAL (Specify) []

SECTION F: CERTIFICATION
1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED.
A. THIS DATE 8 April 1958
B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR JOHN H. DEBOIS
C. SUPERVISOR'S OFFICIAL TITLE Branch Chief/EA
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.
A. THIS DATE 8 Apr 58
B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL JAMES C. HANCOCK
C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, ST/EN/RR

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 4
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 RESPONSIBILITIES 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? [X] Yes [] No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SENIORITY 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.

Table with columns: ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Rows 1-6 describing supervisory potential levels from 1 (no opinion) to 6 (immediate subordinate requires supervision).

SECRET

OFFICE OF PERSONNEL

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

4. COMMENTS CONCERNING POTENTIAL
APR 9 - 4 31 PM '58

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL
Writing courses and additional on-the-job training, to include overseas TDY on operational assignments.

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

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.

- 4 - 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
3	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 NEEDED	4	12. SHOWS ORIGINALITY	3	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
4	3. HAS INITIATIVE	4	13. ACCEPTS RESPONSIBILITIES	3	23. IS THOUGHTFUL OF OTHERS
4	4. IS ANALYTIC IN HIS THOUGHTS	3	14. ADMITS HIS ERRORS	4	24. STAYS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW RECOGNITION AND PRAISE	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
3	6. SHOWS URGE TO SEEK ASSISTANCE	4	16. ENJOYS HIS JOB WITHOUT STRONG SUPPORT	3	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	4	27. IS SENSITIVE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	4	28. HAS CRITICISM TO CONSTRUCTIVE
4	9. GETS THINGS DONE	4	19. THINKS CLEARLY	4	29. FACILITATES OTHERS' OPERATION OF HIS OFFICE
4	10. CAN cope WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	4	30. OPERATES WITHIN THE STRONG AND CONTINUOUS SUPERVISORY

SECRET

TSS/PB TRAINING DIVISION EVALUATION

DARKROOM 9

BASIC PHOTOGRAPHY No. 1

NAME Jerome FOX DIV CRS BR EA DATES TRAINED: from 29 June to 17 July '57

This course is primarily designed to develop the following skills: Use of 35 mm cameras with accessories, document copy, processing and printing.

	None	Unsat	Fair	Good	Excellent	Superior
I Manipulation of camera.						
a. Leica				X		
b. Retina II C	X					
c. Recordak				X		
II Processing and printing.						
a. Film loading				X		
b. Film processing				X		
c. Enlarging				X		
d. Reflex and contact printing					X	
III Use of accessory equipment.						
a. Exposure meter				X		
b. Filters	X					
c. Telephoto and wide angle lenses				X		
IV. Document copy and small objects.						
a. Available light	X					
b. Accessory illumination				X		
c. BOOWU, portra lens, focus slide				X		
V. Ground photography.						
a. Coverage						
b. Report	X					
VI. Casing.						
a. Coverage						
b. Report						
VII Surveillance.						
a. Coverage						
b. Report						
VIII Special problems.						
a. Coverage						
b. Report						
General quality of prints				X		
Choice of subject matter				X		
Quality of darkroom work (Cleanliness, etc.)				X		
Attitude toward subject matter				X		
Cooperation					X	

REMARKS

APPROVED _____
C/S/S/D

INSTRUCTOR _____
Instructor

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. D. SER 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 10. TYPE OF REPORT

SECTION B.

CERTIFICATION

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

A. CHECK (X) APPROPRIATE STATEMENTS:

XX THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL. THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS. I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

D. THIS DATE 28 March 57 C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR John H. DuBois D. SUPERVISOR'S OFFICIAL TITLE Acting Branch Chief

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.

BY [Signature] DATE 22 APR 22 1957 54

CONTINUED ON ATTACHED SHEET

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

A. THIS DATE 28 March 57 B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL C. OFFICIAL TITLE OF REVIEWING OFFICIAL

SECTION C.

JOB PERFORMANCE EVALUATION

1. 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.

- 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 WEARINESS. 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

DIRECTIONS:

- a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty. Do not rate as supervisors those who supervise a secretary only.
- c. For supervisors, ability to supervise will always be rated as a specific duty for the 3000 series *4 or 5* supervisors those who supervise a secretary only.
- d. Compare in your mind, when possible, the individual being rated with others performing the *same* duty at a similar level of responsibility.
- e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- f. Be specific. Examples of the kind of duties that might be rated are:

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING 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
- 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>DESCRIPTIVE RATING NUMBER</p> <ul style="list-style-type: none"> 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY 3 - PERFORMS THIS DUTY ACCEPTABLY 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | <ul style="list-style-type: none"> 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
|--|--|

SPECIFIC DUTY NO. 1 Organizes raw data into analytic file.	RATING NUMBER 6	SPECIFIC DUTY NO. 4 Devises codes for mechanical processing of raw data.	RATING NUMBER 5
SPECIFIC DUTY NO. 2 Derives significant intelligence from data.	RATING NUMBER 5	SPECIFIC DUTY NO. 5 Participates in field exploitation	RATING NUMBER 5
SPECIFIC DUTY NO. 3 Drafts reports on conclusions.	RATING NUMBER 4	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

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

Mr. Fox [Redacted]

SECTION C. 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.

- 1 - DEFINITELY UNSUITABLE... HE SHOULD BE SEPARATED
- 2 - OF DOUBTFUL SUITABILITY... SHOULD 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.

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 question. 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 after 90 days, the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the IS no later than 25 days after the due date indicated in item 8 of Section "E" below.

SECTION E. GENERAL

1. NAME (Last) FOX	(First) Jerome	(Middle)	2. DATE OF BIRTH 9 Oct. 1928	3. SER. M	4. SERVICE DESIGNATION IR
5. OFFICE/SERIES/BRANCH OF ASSIGNMENT ORR/Techniques & Methods/Analysis & Reports			6. OFFICIAL POSITION TITLE Ident. Specialist		
7. GRADE GS-9	8. DATE REPORT DUE IN OP. 25 March 1957	9. PERIOD COVERED BY THIS REPORT (Include dates) 15 March 1956 - 15 March 1957			
10. TYPE OF REPORT (Check one)	INITIAL <input checked="" type="checkbox"/>	REASSIGNMENT SUPERVISOR <input type="checkbox"/>	SPECIAL (Specify)		

SECTION F. CERTIFICATION

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

A. THIS DATE 28 March 57	B. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR John H. DeBour	C. SUPERVISOR'S OFFICIAL TITLE Acting Branch Chief
A. THIS DATE 28 March 57	B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL James C. ...	C. OFFICIAL TITLE OF REVIEWING OFFICIAL CHIEF DIT

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.

1 - ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	DATE 26 1957
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED	RESPONSIBILITIES
3 - MAKING PROGRESS, BUT NEEDS MORE EXPERIENCE BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES	
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES	
5 - WILL PROBABLY ADJUST HIMSELF TO MORE RESPONSIBILITIES WITHOUT FURTHER TRAINING	
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL	

7 - AN EXPERIMENTAL PERIOD AND 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 your opinion of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by checking 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.

DISCRIPTIVE RATINGS

ACTUAL	POTENTIAL	DISCRIPTIVE SITUATION
1	1	A SUPERVISOR HAS THE ABILITY TO CONTACT SUPERVISORS, ADMINISTRATORS, TECHNICIANS OR PROFESSIONAL SPECIALISTS OF VARIOUS GRADES; BUT CONTACT WITH IMMEDIATE SUPERVISORS IS FREQUENT (First line supervisor)
	2	A GROUP OF SUPERVISORS WHO CONTACT THE BASIC AND SECOND LINE SUPERVISORS.
	3	A SUPERVISOR WHO MAY BE CONTACTED BY SUPERVISORS, WHICH IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level)
	2	MADE CONTACT WITH IMMEDIATE SUPERVISORS; IS NOT FREQUENT
	1	OVER IMMEDIATE SUPERVISOR'S ACTIVITIES AND BUSINESS AND NEEDS COORDINATION
2		MADE APPROPRIATE SUPERVISORIAL CONTACT WITHIN THE OFFICE, ETC.

Note (Specify)

SECRET
(When Filled In)

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION **18**

2. COMMENTS CONCERNING POTENTIAL

SECTION II: FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

Mr. Fox's development program will continue to be in increasing

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

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 to each 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 SIGNIFYING WITH ASSOCIATES
4	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	4	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	2	24. HOLDS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	4	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS OBSERVANT	2	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	4	19. THINKS CLEARLY	4	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
	10. CAN cope WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS		30. DOES NOT REQUIRE A PLEASANT AND CONTINUOUS SUPERVISOR

21
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 section. 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 B. of Section A. below.

SECTION A.

GENERAL

1. NAME (Last) Fox	(First) Jerome	(Middle)	2. DATE OF BIRTH 9 Oct 1928	3. SEX M	4. SERVICE DESIGNATION SD/IR
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT OPR, Techniques & Methods Div., Analysis & Reports Br.			6. OFFICIAL POSITION TITLE Identification Specialist		
7. GRADE GS-7	8. DATE REPORT DUE IN OF 6 April 1956	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 15 June 1955 - 15 March 1956			
10. TYPE OF REPORT (Check one)	<input checked="" type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT-SUPERVISOR	<input type="checkbox"/> SPECIAL (Specify)		
	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT-EMPLOYEE			

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 STATEMENTS:

<input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "1" IN C1 OR D & BARRING LETTER HAS SENT TO HIM SA COPY ATTACHED TO THIS REPORT.
THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	
I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	
I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):	

B. THIS DATE

9 April 1956

C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR

H. HARRISON HUGHES

D. SUPERVISOR'S OFFICIAL TITLE

CHIEF, T/AR

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.

No difference of opinion. Concur in evaluation of Mr. Fox as one of the better young men I've seen.

BY **F.P.** DATE **20 APR 1956**
Posted Pos. Control
Reviewed by PUD **4-25**

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

A. THIS DATE

9 April 56

B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL

JAMES C. WATSON

C. OFFICIAL TITLE OF REVIEWING OFFICIAL

CHIEF, D/P

SECTION C.

JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DEFINITIONS: 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.

5
INSERT RATING NUMBER

- 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:

1. Employment should be continued beyond the probationary period.
2. Mr. Fox's performance on this job was substantially superior to indications from the BUC evaluation.

FORM NO. 45 (Part I)
1 NOV 55

REPLACES PREVIOUS EDITIONS OF FORMS 45 AND 45A WHICH ARE OBSOLETE.

SECRET

Performance

141

SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

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

ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONTACTS INTERROGATIONS
GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES BUDGETS
CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN
WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES
CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS
TYPIING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK
TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING
SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
- 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>DESCRIPTIVE RATING NUMBER</p> <ul style="list-style-type: none"> 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY 3 - PERFORMS THIS DUTY ACCEPTABLY 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | <ul style="list-style-type: none"> 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
|--|--|

SPECIFIC DUTY NO. 1 Organize raw data into analytic file	RATING NUMBER 6	SPECIFIC DUTY NO. 4 Participate in field exploitation	RATING NUMBER 4
SPECIFIC DUTY NO. 2 Derive significant intelligence from data	RATING NUMBER 6	SPECIFIC DUTY NO. 5	RATING NUMBER
SPECIFIC DUTY NO. 3 Draft reports on conclusions	RATING NUMBER 5	SPECIFIC DUTY NO. 6	RATING NUMBER

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

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

Mr. Fox has been an energetic and steady worker, quick to grasp instructions,

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.

- 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

EXPLAIN FULLY:

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 question. 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 CE 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
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT 6. OFFICIAL POSITION TITLE
7. GRADE 8. DATE REPORT DUE IN OP 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)
10. TYPE OF REPORT (Check one)

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED.
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering other's 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.

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.

Table with columns: ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Rows describe various supervisory levels from basic job to executive level.

SECRET

(When Filled In)

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

SIX

2. COMMENTS CONCERNING POTENTIAL

OFFICE OF PERSONNEL

MAIL ROOM

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

For the immediate future, Mr. Fox' development program should be in terms

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

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 EFFICIENT IN DISCUSSIONS WITH ASSOCIATES
4	2. CAN MAKE DECISIONS OR CAN GET HELP WHEN DECISIONS ARE NEEDED	4	12. SHOWS ORGANIZATION	4	22. IMPLEMENTS DECISIONS REGARDLESS OF HOW FEEL ABOUT THEM
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. TOWNS HIS SPEECH	X	24. WORKS WELL UNDER PRESSURE
5	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND SKILLS	4	15. RESPONDS WELL TO SUPERVISION	4	25. DISPLAYS JUDGMENT
4	6. WORKS WELL WITH OTHERS	5	16. DOES HIS JOB WITHOUT SUPERVISOR	4	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
4	8. HAS MINDSET FOR TASKS	4	18. IS OBSERVANT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. DOES THINGS DONE	4	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
X	10. CAN cope WITH EMERGENCIES	4	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS	4	30. DOES NOT SHOW UP STRESS AND CONTINUOUS WORKING

SECRET

SECRET

TRAINING EVALUATION

INTELLIGENCE PRINCIPLES AND METHODS ED. 8

SECTION I: IDENTIFYING INFORMATION

NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
FOX, Jerome	M	26 Sept. - 21 Oct.	14
DATE OF BIRTH	END DATE	GRADE OR RANK	OFFICE
9 October 1928	15 June 1955	OS-7	OSR

PROJECTILE ASSIGNMENT OR FUTURE POSITION

Identification Specialist

SECTION II: OBJECTIVES OF THE COURSE

1. To introduce students to the skills and methods involved in the processing of intelligence materials.
2. To provide practice in the oral and written presentation of intelligence reports for a variety of purposes.

SECTION III: SYNOPSIS CHARACTERS OF THE COURSE

Intelligence Principles and Methods is a four weeks (100 hours) expansion of Basic Orientation Course for personnel who are or will be engaged in the production of intelligence. Emphasis is on "learning by doing", through the medium of a series of integrated written exercises which require processing of actual intelligence documents. Exercise is also gained in the oral presentation of intelligence through a series of briefings before the class. Each student is assigned a special research problem for which approximately 40 hours are allotted in the course schedule. The results are presented to fellow-students and instructors in an oral briefing at the close of the course. The student also prepares an annotated bibliography, and writes a critical review of one of his chief sources.

SECTION IV: HOW THE STUDENTS ARE EVALUATED

Written exercises are graded independently by at least two members of the instructional staff on the basis of how well the student has fulfilled the requirements of selectivity, organization, accuracy to original, brevity and clarity of style. Grades for each type of written exercise are defined in Section V. Oral briefings are evaluated by both instructors and fellow students through the use of written critique sheets and oral observations following each presentation. A composite grade is given for the oral briefings. In the evaluation of the research problem the grade awarded reflects intelligence focus, exploitation of sources, and general effectiveness of written and oral presentation. The grades are defined as follows:

SUPERIOR: The student demonstrated outstanding ability in presenting

information in this course (all objectives); he indicated an

thorough knowledge of the material presented and indicated

no demonstrable lack of interest or effort in the course.

area.

READING ANALYSIS PROGRAM

OBJECTIVE ORIGIN

1. To determine employees' proficiency level in scanning, extensive and intensive reading tasks.
2. To determine employees' degree of reading versatility. Versatility is defined as the ability to apply the general reading skills appropriately to various reading situations.
3. To ascertain the probable gain which would accrue from further training in reading skills.
4. To inform each employee concerning his relative reading proficiency in scanning, extensive and intensive reading and his versatility.

TEST DESCRIPTION

READING COMPREHENSION TESTS: Measures speed and accuracy of basic comprehension skills. Complete and objective understanding, analysis, and interpretation are required in this test.

EXTENSIVE READING TESTS: Measure the degree of proficiency in informational, or general reading.

INTENSIVE READING TESTS: Measure reading proficiency in acquiring basic knowledge of new subjects.

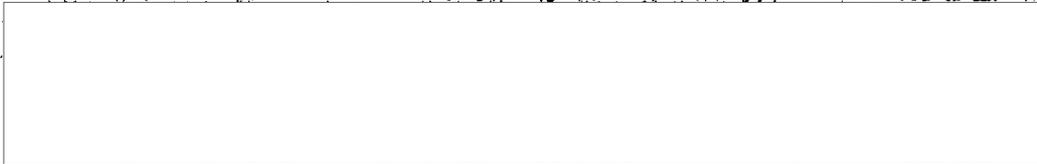
SCANNING TESTS: Measure proficiency in the organization and location of specific information, main ideas, and questions.

ANALYSIS OF READING PERFORMANCE

	Poor	Fair	Ant.	Exc.	Sup.
1. Basic Comprehension Skills			X		
2. Extensive Techniques			X		
3. Intensive Techniques		X			
4. Scanning Techniques:					
Specific Information			X		
Main Ideas			X		
Organization			X	X	
5. Versatility			X		

COMMENTS AND RECOMMENDATIONS:

Mr. Fox scans for specifics quickly and accurately; he scans for main



FOR THE DIRECTOR OF TRAINING

Francis Cook
Chief Instructor

SECRET

TRAINING EVALUATION -- BASIC ORIENTATION					COURSE NO.	
					21	
SECTION I IDENTIFYING INFORMATION						
NAME OF STUDENT FOX, Jerome		SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF COURSE 6 - 23 October 1955		NO. OF STUDENTS 120
DATE OF BIRTH 9 October 1928	EDD DATE June '55		GRADE OR RANK GS-7		OFFICE TR	
PROJECTED ASSIGNMENT OR PRESENT POSITION Identification Specialist						
SECTION II CHARACTERISTICS OF THE COURSE						
Material in this course is presented primarily by lecture and exhibit; several seminars and discussions are also held. The rating on Introduction to Intelligence is determined by the results of one multiple choice test, based on lecture material; the rating on Communism and the USSR is determined by one multiple choice test covering the lecture and readings.						
SECTION III OBJECTIVES						
A. The Basic Orientation Course is designed to provide the student with information in the following areas:						
1. <u>Introduction to Intelligence</u>						
a. Organization for national security, with emphasis on the intelligence community and the organization and mission of CIA as it fits into the whole national security effort.						
b. The principles and methods of intelligence, emphasizing the substantive components of CIA, considering the types of information, and the collecting, processing, and disseminating functions.						
c. An introduction to clandestine activity, with emphasis on the functions of the clandestine services.						
2. <u>Communism and the USSR</u>						
This deals with Marxist theory, the history of Socialism and Communism, Communist activities outside the USSR, history and geography of Russia, political structure of the USSR, Soviet foreign policy, and potentialities and vulnerabilities of the USSR.						
B. Throughout the three weeks of the course discussions and conferences deal with the American Thesis.						
SECTION IV STUDENT ACHIEVEMENT RATINGS						
The numbers placed in the columns below show how many students received each rating. An asterisk (*) shows the rating this student received.						
SUBJECT	HOURS	RATING				
		FAIL	POOR	SATISFACTORY	EXCELLENT	SUPERIOR
INTRODUCTION TO INTELLIGENCE	64	4	9	30	45*	32
COMMUNISM AND THE USSR	56	2	14	40*	37	29
SECTION V COMMENTS						
INDICATE ANY STRONG AND WEAK POINTS OF THE STUDENT, OR ANYTHING THAT MAY HAVE INFLUENCED HIS PERFORMANCE IN THE COURSE						
CONTINUE COMMENTS ON REVERSE SIDE <input type="checkbox"/> OVER						
FOR THE DIRECTOR OF TRAINING:				SIGNATURE OF CHIEF INSTRUCTOR: <i>Edward J. O'Sara</i>		

DESIGNATION OF BENEFICIARY FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

IMPORTANT
Read instructions
on back of duplicate
before filling in this form

INFORMATION CONCERNING THE INSURED:

NAME (Last) (First) (Middle) DATE OF BIRTH (Month, day, year)
 Jerome (MI) October 9, 1938

PLACE AN "X" IN THE APPROPRIATE BOX BELOW TO SHOW WHETHER YOU ARE:

AN EMPLOYEE
 RETIRED OR AN APPLICANT FOR RETIREMENT
 RECEIVING FEDERAL EMPLOYEES COMPENSATION BENEFITS OR AN APPLICANT FOR SUCH BENEFITS

IF YOU ARE RETIRED OR RECEIVING FEDERAL EMPLOYEES COMPENSATION BENEFITS, GIVE YOUR "CSA," "CSL," "A," or "X" NUMBER

(CSA, CSL, A, or X number)

DEPARTMENT OR AGENCY IN WHICH PRESENTLY EMPLOYED (If retired, former department or agency):

(Department or agency) (Bureau) (Division) (Location—City, State, and ZIP Code)

I, the individual identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees Group Life Insurance Program heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of LIFE INSURANCE and ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as it is automatically canceled (see regulation "f" on reverse side of duplicate copy).

INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES (SEE EXAMPLES OF DESIGNATIONS):

Type or print first name, middle initial, and last name of each beneficiary	Type or print address (including ZIP Code) of each beneficiary	Relationship	Share to be paid to each beneficiary
		Daughter	50%
		Son	50%

For each type of insurance (regular and optional): (1) I hereby direct, unless otherwise indicated above, that if more than one beneficiary is named, the share of any beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. (2) I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.

I hereby specifically reserve the right to cancel or change this Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

(Date of execution—month, day, year)

(Signature of insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

PRINT OR TYPE NAME AND ADDRESS (including ZIP Code) OF INSURED:

THIS SPACE RESERVED FOR RECEIVING AGENCY

JUL 9 10 00 AM '74

PERSONAL AFFAIRS

(Indicate date and by whom received)

IMPORTANT.—The filing of this form will completely cancel any Designation of Beneficiary under the Federal Employees Group Life Insurance Program you may have previously filed. Be sure to name in this form all persons you wish to designate as beneficiaries of any insurance payable under that program at your death.

EXAMPLES OF DESIGNATIONS

1. How To DESIGNATE ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
Mary E. Brown*	214 Central Avenue Muncie, Ind. 47303	Niece	All

2. How To DESIGNATE MORE THAN ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
Alice M. Long	503 Canal Street Red Bank, N.J. 07701	Aunt	25%
Joseph P. Brady	360 William Street Red Bank, N.J. 07701	Nephew	25%
Catherine L. Rowe	792 Broadway Whiting, Ind. 48394	Mother	50%

3. How To DESIGNATE A CONTINGENT BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
John M. Parrish, if living	810 West 130th Street New York, N.Y. 10033	Father	All
Otherwise to: Susan A. Parrish	810 West 130th Street New York, N.Y. 10033	Sister	All

4. How To DESIGNATE DIFFERENT BENEFICIARIES FOR REGULAR AND OPTIONAL INSURANCE**

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
John D. Jones	124 Elm Street Dayton, Ohio 45420	Son	All Regular Insurance
Jane M. Smith	421 Spring Avenue Portland, Maine 04101	Niece	All Optional Insurance

5. How To CANCEL A DESIGNATION OF BENEFICIARY AND EFFECT PAYMENT UNDER ORDER OF PRECEDENCE (see back of duplicate)

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary (including ZIP Code)	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

*Do not write name as M. E. Brown or as Mrs. John H. Brown. If you want to designate your estate as beneficiary, enter "My estate" in the beneficiary column.
 **Be sure that the shares to be paid to the beneficiaries add up to 100 percent.
 ***If you have designated a beneficiary for regular or optional insurance, payment for that type of insurance will be made in order of precedence (see back of duplicate) if there is no surviving beneficiary of contingent beneficiary for that type of insurance.

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) (First) (Middle) FOX, Jerome	SOCIAL SECURITY NUMBER* 017974	DATE OF BIRTH (month, day, year) October 9, 1928	SOCIAL SECURITY NUMBER* <input type="text"/>
EMPLOYING DEPARTMENT OR AGENCY <input type="text"/>	LOCATION (City, State, ZIP Code) <input type="text"/>		

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 February 19, 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; border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> OFFICE OF PERSONNEL FEB 21 10 32 AM '68 </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 1964
 (For use only until April 14, 1968)
 176-101

SECRET

13 December 1973

Letter of Commendation

TO: Jerome Fox

1. I heroby commend you for your performance in a sensitive Station operation which was completed on 3 and 4 December 1973. Your role ensuring the security of the operation was of the utmost importance. To your credit you remained alert and carried out your duties professionally, despite the initial frustrations and the long hours involved. In doing so you have contributed to the successful accomplishment of a priority objective of our organization.

2. A copy of this letter will be placed in your official personnel file.


James W. NOTTACKER
Chief of Station

SECRET

CONFIDENTIAL
(When Filled In)

RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HMB 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

GENERAL

NAME OF EMPLOYER (Last) *Fox* (First) *Jerome* (Middle)

1. MARITAL STATUS (Check one)
 SINGLE MARRIED SEPARATED DIVORCED WIDOWED ANNULLED

IF MARRIED, DATE OF MARRIAGE

IF DIVORCED, PLACE OF DIVORCE DECREE

2. MEMBERS OF FAMILY

NAME OF FATHER (or male guardian) ADDRESS TELEPHONE NO.
Deceased

NAME OF MOTHER (including maiden name (or female guardian)) ADDRESS TELEPHONE NO.
Deceased

WHAT MEMBERS OF YOUR FAMILY IF ANY, GUARDED IN AN EMERGENCY? *Brother* WITH THE ORGANIZATION IF CONTACT IS REQUIRED

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 51% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HMB 22-12). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Last, First, Middle)	RELATIONSHIP	HOME TELEPHONE NUMBER
	<i>Friend</i>	

NAME OF EMPLOYER, IF APPLICABLE, BUSINESS TELEPHONE & EXTENSION:
Housewife

IS THE INDIVIDUAL NAMED ABOVE, BEYOND OF YOUR AGENCY AFFILIATIONS (If "No" give name and address of organization to which you work for.)
USAF YES NO

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)
Yes YES NO

DID THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESS? (If answer is "No" explain why in item 6.)
Yes YES NO

The persons named in items 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 OR THE REVERSE SIDE OF THIS FORM.

CONFIDENTIAL
(When Filled In)

5. VOLUNTARY ENTRIES		
<p>Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.</p>		
INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS IN WHICH THE ACCOUNTS ARE CARRIED:		AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED:
<i>Northern Virginia Bank</i>		[]
ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DO YOU HAVE A JOINT ACCOUNT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?		(If "Yes" document located?)
<i>Northern Virginia Bank</i>		[]
HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes" give name(s) and address)		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If "Yes" who possess the power of attorney?)		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
[]		
7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY. (No Approval Required)		
RESIDENCE WHEN EMPLOYED (Full Address)		PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3 (Full Address)
[]		[]
8. CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3) (To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)		
FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 22-3)	DATE
[]	[]	[]
SIGNED AT <i>Wash DC</i>	DATE <i>4 Oct 73</i>	SIGNATURE <i>[Signature]</i>

CONFIDENTIAL

SECRET

FIELD ASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE FOR HEADQUARTERS USE ONLY				
NAME (Use initials only if DA)		DATE (from item 3-D)	NAME OF SUPERVISOR (if any)	DATE (from item 3-D)
Gromo Fox		14 Mar 73	George Kalaris	14 Mar 73
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
14 March 1973		FPMT-15218		
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGNATION	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	
10/9/28	D	Ops Ofcr, GS-13	Manila	
5A. DATE OF PCS ARRIVAL IN FIELD	5B. DESIRED DATE OF DEPARTURE	5C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	5D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
(2nd tour) 29 June 71	1 July 1973	1 August 1973	1 September 1973	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
Wife; Dau - 13; Son - 12				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
Wife cannot travel by air for medical reasons. Separate travel has been utilized in past assignments with principal and dependents going by air and wife following by ship.				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 340-8)				
Referent on MHABYSS matters 1 July 1972 to present. Referent on MPWATCH matters prior to 1 July 1972. Recruit and handle unilateral agents. Backup Liaison officer with official services. Station PERAMPART officer.				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
None				

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT.

11a. DESCRIBE BRIEFLY THE TYPE OF DUTY YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

Supervise field unilateral and [] MIABYSS program.

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

EXTEND YOUR 12 MONTHS AT CURRENT STATION TO 1 July 1974 (DATE)

BE ASSIGNED TO DUTY FOR A TOUR BY DUTY. INDICATE YOUR CHOICE OF DIVISION, CLASS OR OFFICE.
1ST CHOICE EA 2ND CHOICE WH 3RD CHOICE EVR

BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA.
1ST CHOICE Bangkok 2ND CHOICE Seoul 3RD CHOICE []

RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

I believe that Subject could make a contribution as a case officer at a station with an active MIABYSS program. He knows the subject well and can get along with LNAON personnel. His other strength lies in Communist Party operations either as a handler of recruited assets or as an analyst of doctrine. In light of the foregoing, Bangkok Station might well be an appropriate assignment. Should that not be practical, recommend that Subject be reassigned to HQs in a component where his strengths can be utilized. If assigned at HQs, he should be given the

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

(CONT'D)

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Mr. Fox will be assigned to EA/PMI upon completion of his tour and home leave. He has been so advised.

DATE 24 Jul 73 TITLE C/EA/PERSONNEL

FOR USE BY CAREER SERVICE

SIGNATURE William H. Bright
Ernest G. Hardt

14. APPROVED ASSIGNMENT

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATE: _____
CABLE NO. _____ DATE: _____

CAREER SERVICE REPRESENTATIVE: _____ DATE: _____

SECRET

FRQ - Jerome Fox - 14 March 1973

Operations Review course and training in writing.

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

FILE
PUNCHED

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
017974	fox	JEROME	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 80, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39	MANILA	40-42
05	22	69					1		575

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify) <i>Per Division</i>	

DOCUMENT IDENTIFICATION NO. _____ DOCUMENT DATE/PERIOD _____

REMARKS _____

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DEC	DATE	SIGNATURE
C & L DIVISION, CTBB	<i>6/1/70</i>	<i>James W. Poney</i>
X C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET
(When Filled In)

FILE
PUNCHED
BY

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
019974	FOX	JEROME	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (Only on 17). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
			05	22	71	1 - PCS (Basic)	1		PHILIPPINES	575
						3 - CORRECTION				
						0 - CANCELLATION				

TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	CODE	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR					
						1 - TOY (Basic)				
						4 - CORRECTION				
						0 - CANCELLATION				

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

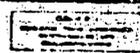
TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION BY: *Marta 16711* DOCUMENT DATE/PERIOD: *4 May 1971*

REMARKS

PREPARED BY	REPORT ASSOCIATED ON ORIGINAL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
CCO	DATE: <i>5/21/71</i>	SIGNATURE: <i>Clayton S. Griffith</i>
C & L DIVISION, CPBR		
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item 5-D)	NAME OF SUPERVISOR (true)	DATE (from item 5-E)
Jerome Fox	5 Oct 1970	George T. Kalaris	5 Oct 1970
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
16 October 1970	FPMT 13290	11 DEC 1970	

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
10/9/28	D	Operations Officer GS-13	Manila	[Redacted]
6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
22 May 1969	26 May 1971		27 July 1971	

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

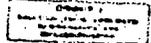
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 340-8)

- A. Recruit and handle unilateral agents.
- B. Conduct [Redacted] as required.
- C. Provide advice and support for Station's [Redacted] program.

10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS:

None



SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

NA

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, or 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

EXTEND TOUR 12 MONTHS AT CURRENT STATION TO 30 May 1972 (DATE)

BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____

BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE Bangkok 2ND CHOICE _____ 3RD CHOICE _____ AREA OR SPECIALIZATION CHOICE Recruit

RETURN TO MY CURRENT STATION after home leave.

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

I favor, strongly the return of Subject to this Station for a second tour of duty following home leave. He is handling one of the most complex fields of activity at this Station, one which is of a very high priority - the radical left in all its manifestations. Continuity and experience are essentials to any significant progress against this target. Returning Subject for a second tour of duty would give us both at a time when the radical left will be expanding and moving ahead towards its goals.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

The Division approves subject's request for home ^{leave} and return to Manila.

DATE 10 Dec 70 TITLE CFE SIGNATURE James R. Doherty

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. FPMS 5948 DATED: 10 Dec 70

CABLE NO. _____ DATED: _____

CAREER SERVICE REPRESENTATIVE: [Signature] DATE: 14 Dec 70

S E C R E T

FIELD COMMENTS - continued

Subject has performed well in his assigned field thus far and I would expect to reap substantial benefits from his performance during his second tour based on the experience and knowledge he will have gained by the end of his first tour.

S E C R E T

CONFIDENTIAL

(When Filled In)

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave at government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) (First) (Middle)
Fox Jerome

1. RESIDENCE DATA
 PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY: **28 Willow St. Brooklyn, N.Y.**
 PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE: **Annapolis, Va.**
 LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad): **5019 Cockney Ct. Annapolis, Va.**
 HOME LEAVE RESIDENCE: **New York, N.Y.**

2. MARITAL STATUS (Check one)
 SINGLE MARRIED SEPARATED

IF WIDOWED, PLACE SPOUSE DIED: _____ DATE SPOUSE DIED: _____

IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S): _____

3. MEMBERS OF FAMILY

NAME	ADDRESS	TELEPHONE	SEX
"	"	"	F
"	"	"	M

NAME OF YOUR FATHER (Or male guardian): **Deceased** ADDRESS: **Deceased** TELEPHONE NO.: _____

NAME OF YOUR MOTHER (Or female guardian): **Deceased** ADDRESS: _____ TELEPHONE NO.: _____

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY? **None**

4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME (Mr. / Mrs. / Miss)	RELATIONSHIP
HOME ADDRESS	Bro - In - Law
BUSINESS ADDRESS	HOME TELEPHONE NUMBER
IS THE INDIVIDUAL BELIEVED TO BE AVAILABLE IN AN EMERGENCY?	BUSINESS TELEPHONE EXTENSION

IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" can make such decision in case of emergency.)

335 Central Park West, New York, N.Y.
 Explain why in (Item 6.)

The persons named in Item 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

CONTINUED ON REVERSE SIDE

CURRENT RESIDENCE AND DEPENDENCY REPORT

CONFIDENTIAL

(When Filled In)

5. VOLUNTARY ENTRIES
Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE AC-

Jerome Fox Northern Virginia Bank
Check-A-Lot Division
Springfield, Va.

Jerome Fox First National Bank of Arizona
Scottsdale, Ariz. Acct # 535 6462

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? YES NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? YES NO

STATEMENT? YES NO. (If "Yes" where is document located?)

Riverside Branch Lot Box No. 171

HAVE YOU PRE-PLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?

YES NO. (If "Yes" give name(s) and address)

Rockville, Md.

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes" who possess the power of attorney?)

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT

DATE

SIGNATURE

28 April 1969 Jerome Fox

CONFIDENTIAL

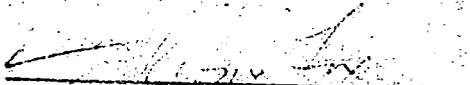
CONFIDENTIAL
(When filled in)

IMPORTANT

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CFB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 23 October 1964.


Signature

15 October 1964
Date

FOX, JEROME

CONFIDENTIAL

Group 1 - Excluded from
automatic downgrading
and declassification.

SECRET

SSA/DAS 67-2031

CC: 7-4476

16 OCT 1967

MEMORANDUM FOR: Deputy Director for Plans

SUBJECT : Messrs. Jerome Fox and Harry G. Peterson -
Fourth Security Violation

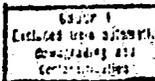
REFERENCE : HR 10-16

1. This memorandum contains a recommendation for approval in paragraph 4.

2. Two officers of this Division have incurred their fourth security violation. Reference requires that I impose at least two weeks' leave without pay in each case unless your approval is obtained for a lesser penalty. I propose such a lesser penalty and request your concurrence.

3. The officers concerned, Messrs. Jerome Fox and Harry G. Peterson, are both dedicated Agency employees who have never, to the best of my knowledge, evidenced contempt for our security procedures nor displayed such gross negligence as to require strong remedial action. In neither case were any of the violations such as to indicate a compromise of information was probable; all were either open-safe or "exposed-classified-material" violations such as one-time typewriter ribbons, and none involved loss of documents, indiscreet talk or other more serious matters. Further, the majority of the violations occurred on occasions when the individuals concerned worked past the normal close of business and, while this is no excuse for carelessness, frequent overtime work does increase the possibility of a violation since the usual after-hours duty check is not operative. It seems to me, therefore, that the two weeks' leave without pay required by reference would be an excessively harsh penalty and not conducive to the enhancement of Agency security in general. I, therefore, propose the imposition of two days' leave without pay and a written reprimand for each officer. Copies of the proposed reprimand are attached.

SECRET



SECRET

4. It is recommended that the subjects be each issued a written reprimand and directed to take two days' leave without pay as the result of incurring their fourth security violation.

signed/ Joseph W. Smith

William E. Colby
Chief, Far East Division

Attachment
Proposed reprimands

* The recommendation contained
in paragraph 4 is APPROVED:

/s/ Cord Meyer, Jr.

Deputy Director for Plans

16 NOV 1967

Date

* The recommendation contained in para. 4 is approved; except that 3 days LWOP will be charged instead of the 2 days proposed.

SECRET

Supplement to Staff Employee Personnel

Action [redacted] of JEROME FOX

Effective 21 November 1967

The purpose of this memorandum is to call your attention to existing policies which are particularly material to you while you are [redacted] and to set forth certain rights and obligations which are incident to your status as an appointed employee. It is hereby agreed and understood that:

1. As an employee of this organization, at the present grade and salary of GS-12-612.443 per annum, you [redacted]

[redacted] effective as of 21 November 1967. You will, insofar as consistent with your basic responsibility to this organization, abide by all the rules, regulations, practices and policies of [redacted], in order to [redacted] of that establishment. Your appointment to you [redacted] effected at PBR-5 and salary of [redacted]. You are prohibited, except as specifically authorized herein, from retaining emoluments paid [redacted].

2. It is understood and agreed that the minimum period of your overseas tour of duty is governed by and coincident with the prescribed tour of duty [redacted]. Currently, your prescribed tour consists of a period of 2 years from the date of your arrival at your overseas post of duty. Your assignment may be terminated earlier for the convenience of this organization and the length of your tour of duty, as currently specified, may be unilaterally changed by this organization in order to conform with subsequent changes in the prescribed tour [redacted]. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed the minimum period of service prescribed above from the date of arrival at your overseas post of duty, you will not be entitled to return travel or transportation for yourself or your dependents to the United States at Government expense. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed one (1) year of service from the date of your arrival at your overseas post of duty, you will be required to reimburse the Government for all of its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.

SECRET

3. Travel to your post of duty overseas and your return travel to the United States, as well as travel performed overseas which is [redacted] will normally be at the direction of you [redacted]. Such travel will be accomplished in conformance with applicable regulations [redacted] except when you are directed for operational reasons to perform travel in accordance with the regulations of this organization.

4. Salary and (except as provided in paragraph three (3) above) allowances [redacted] shall be retained by you to the extent that they are less than or equal to [redacted].

If such cover payments are less than the amount due, the difference will be credited to your payroll account with this organization. If such [redacted] exceed the amount due, the overage will be remitted to this organization at designated intervals, presently [redacted].

Computations hereunder will be made on the basis of the aggregate gross due and received provided, however, that in computing remittances for [redacted] Federal and, if applicable, District of Columbia income taxes [redacted] may be deducted. To assure timely accuracy in your payroll account with this organization you are expected to immediately report [redacted] payroll changes.

5. Your status as an employee of this organization will continue in full force and effect during your period of duty [redacted] and you will continue to be entitled to all rights, benefits and emoluments of such status. Certain variations in procedure will be required, however, to preserve [redacted].

a. [redacted] you will continue to be covered by the provisions of the Civil Service Retirement Act, as amended, and at your personal expense you will be subject to payroll deductions for retirement purposes (now six and one-half per cent) on the basis of [redacted] your salary from this organization, whichever is the greater.

b. [redacted] necessary adjustments for Federal, and if applicable, District of Columbia income tax purposes will be made in conformance with instructions received from this organization.

c. Consistent with your [redacted] you will continue to be responsible for compliance with the rules and regulations of this organization.

d. You are not assured upon the completion of your period of duty [redacted] at the request of this organization.

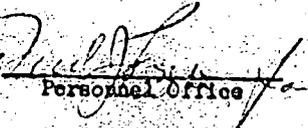
SECRET

e. All annual and sick leave which is accrued to your credit

[redacted] you will be permitted annual leave, sick leave, home leave, and leave without pay in accordance with the regulations of [redacted] in lieu of the leave benefits of this organization. Upon completion of [redacted] your accrued annual and sick leave will be [redacted] with this organization. If security conditions require that [redacted] make a lump-sum payment for accrued annual leave, you will be required [redacted] including any income taxes withheld [redacted]

6. You will be required to keep forever secret this agreement and all other information which you may obtain by reason hereof, unless you are released in writing by this organization from this obligation. Violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1948, as amended, and other applicable laws and regulations. The termination of your employment with this organization will not release you from the obligation of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY 
Personnel Office

EVELYN M. FLAGG

ACCEPTED:


JES023 FOX

3

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

CS 515/3 80

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (Do not include only if SA)	DATE (from item 5-1)	NAME OF SUPERVISOR (if any)	DATE (from item 5-2)
JEROME FOX	7 Feb 66	James Bruchardt	3 Mar 66
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY LAMERS SERVICE:	
11 Mar 66	FVST 11617		

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
9 Oct 28	D XX	GS-12 Ops Officer	Saigon	
6. DATE OF PCS ARRIVAL IN FIELD	7. REQUESTED DATE OF DEPARTURE	8. EXPECTED DATE OF FIRST CHECK-IN AT HQ	9. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
29 Dec 1964	9 July 1966	15 August 1966	10 September 1966	

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

3 - 35, 6, 5

8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

No unaccompanied assignment

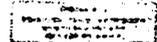
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-P 240-8)

operations - penetration communist organizations

Unilateral operations

10. TRAINING DESIRED. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS:

CI course



SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

Unilateral operations

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

- EXTEND TOUR _____ MONTHS AT CURRENT STATION TO _____ (DATE)
- BE ASSIGNED TO HQ/RS FOR A TOUR OF DUTY; INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____
- BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE Bangkok 2ND CHOICE _____ 3RD CHOICE _____
- RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING: This man has completed a

tour separated from his family and has performed competently _____ in which he has done an outstanding
job. Believe he would profit by the CI course and another field tour
in Southeast Asia at a post where he can be with his family.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

PE Division has no suitable assignment for subject. Request his next
assignment be determined by the CS Career Service and that he be
advised accordingly.

DATE 02/24/68 TITLE C/PE/DRS SIGNATURE Green Byrd
M. T. Boulger

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT: Assigned to PE/DRS

15. EMPLOYEE NOTIFIED BY DISPATCH NO. _____ DATED: _____
CABLE NO. _____ DATED: _____

CAREER SERVICE REPRESENTATIVE: _____ DATE: _____
SECRET

SECRET

C O N F I D E N T I A L

MEMORANDUM FOR: JS Career Management Committee

SUBJECT: Recommendation for Promotion of Mr. Jerome Fox
from GS-12 to GS-13

1. The Vietnam Station has recommended the promotion of Mr. Jerome Fox from GS-12 to GS-13. He has been in his present grade for almost five years. He is already performing at the level normally expected of a GS-13. Mr. Fox was ranked fifth among all GS-12's currently at Vietnam Station. The Station recommendation as contained in [redacted] is quoted in the following paragraphs.

2. This employee has performed at a highly commendable level during his tour at this Station. During the first year he was assigned to a variety of jobs, all of which he approached with vigor and capability. These included [redacted] responsibilities.

[redacted] He has also engaged in unilateral agent activities; he has developed, recruited and managed [redacted] unilateral agents, and plans to attempt the recruitment of [redacted] prior to his departure. During the last period of his duty, Subject has concentrated on the development and progress of a sensitive T/C activity concerned with a [redacted]. He initiated this project, and has since managed it in such a manner that it has evolved into a unilateral project with considerable potential. During the course of his tour, the case officer was also charged with the implementation of an activity designed to bring about the [redacted]. While this did not come to fruition, Subject approached this difficult task with a measurable degree of initiative and energy.

3. Subject displays the qualities of a highly capable, well-rounded officer. He has approached his own tasks with a mature and efficient manner, and has always demonstrated an excellent understanding of the role and mission [redacted] and the Station in this area. He appears to be highly motivated, and I consider him an officer with a great deal of long-range potential.

(11 Aug 66)

Thomas A. Duncan
Thomas A. Duncan
Chief, Vietnam-Cambodia Branch

C O N F I D E N T I A L

CONFIDENTIAL

28 MAR 1967

MEMORANDUM FOR: Chief, FE Division, DD/P

SUBJECT : Security Violation - Open Safe
FOX, Jerome
(FOURTH VIOLATION)

1. An investigation by this Office has determined that Mr. Fox, assigned to your Division, was responsible for an Open Safe security violation which occurred on 9 March 1967.

2. The records of this Office indicate that Mr. Fox has been previously charged with an Open Safe security violation which occurred on 28 May 1964, an Exposed Classified Material security violation which occurred on 11 January 1966, and an Exposed Classified Material security violation which occurred on 12 May 1966. In view of the fact that there have not been two consecutive years without a violation since 28 May 1964, this is to be considered Mr. Fox's fourth security violation for administrative action as specified in Section (e) of CIA Headquarters Regulation 10-1.

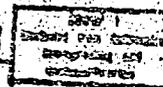
3. It would be appreciated if you would advise this Office by memorandum of the administrative action taken in this case.

jc E. J. ZANE
Ernal P. Celso
Deputy Director of Security (PTOS)

Att
Violation Report

cc: Deputy Director for Plans
Director of Personnel

CONFIDENTIAL



CONFIDENTIAL

SECURITY VIOLATION REPORT

DETAILS OF VIOLATION:

On 9 March 1967, at 7:29 p. m., USSP Poag reported finding Safe No. D-1480 improperly secured in Room 5C-35, Headquarters Building. Security Duty Officer Craig responded and determined that:

1. both drawers were found closed but unlocked;
2. the safe was opened by merely depressing the hand latch;
3. the safe contained material classified through SECRET;
4. the char force had not been in the area prior to this discovery.

SDO Craig changed the combination and secured the safe at 8:30 p. m.

INVESTIGATIVE FACTS:

Mr. Jerome Fox, the custodian of the safe, accepted full responsibility for this occurrence when interviewed in his office on 10 March. Mr. Fox stated that he obviously failed to secure the safe due to the fact that he had no reason to believe anyone else would have opened it subsequent to his departure at 6:00 p. m. (NOTE: The safe was left improperly secured for approximately 90 minutes.) It should be noted that Mr. Fox had signed for the security check of his area.

CONCLUSION:

In view of the above circumstances, Mr. Fox is charged with an Open Safe security violation.

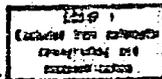
SECURITY HISTORY:

Mr. Fox has been employed by the Agency since June 1955. A review of his record indicates that he has been previously charged with an Open Safe security violation which occurred on 23 May 1964, an Exposed Classified Material security violation which occurred on 11 January 1965, and an Exposed Classified Material security violation which occurred on 12 May 1966.

William S. Wilkinson
WILLIAM S. WILKINSON
Chief, Survey Branch

John M. Sandels
JOHN M. SANDELS
Investigator

CONFIDENTIAL



REPUBLIC OF VIETNAM

MERIT COMMENDATION

FOR Mr. JEROME FOX, American counterpart to the Police Special Branch of the Directorate General of National Police, who is awarded the Third Class Honorary Police Medal by Decree No. 1744-ND/HP/VP of 24 September 1966.

Mr. JEROME FOX is an outstanding counterpart and a sincere friend of the National Police Branch.

During his period of service in Vietnam, Mr. JEROME FOX devoted all his ability, experience, and good will to helping the Police Special Branch, especially in the task of setting up a people's intelligence net.

The dedication and enthusiasm of Mr. JEROME FOX helped the National Police Branch to achieve excellent results in safeguarding security and maintaining law and order in Saigon, the Capital.

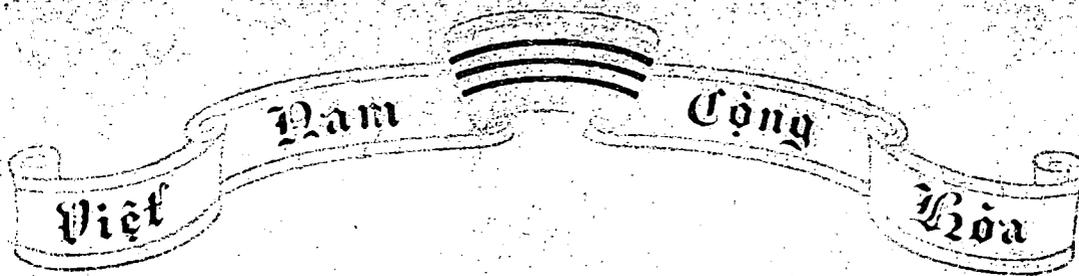
Mr. JEROME FOX's spirit of mutual aid merits praise and remembrance.

Saigon, 24 September 1966

Chairman of the Central Executive Committee

/Signed and Sealed/

Air Vice Marshal NGUYEN CAO KY



BẢNG CẢNH ĐƯƠNG CÔNG TRẠNG

về Ông Jerome Fox, Phó-trí-viên Hoa-ý cảnh Khố
Cảnh-Sát Đặc-Biệt Tổng Nha Cảnh-Sát Quốc-Gia được
ăn thưởng Bộ tam đẳng Cảnh-sát danh-dự Nội-tỉnh do
do Nghị-dịnh số 1744-NĐ/HP/VP ngày 24 tháng 9 năm 1966.

Ông Jerome Fox là một Phó-trí-viên ưu-tú và là
Người bạn chân-thành của ngành Cảnh-Sát Quốc-gia.

Trong thời gian phục-vụ tại Việt-Nam, Ông Jerome
Fox đã đem hết khả năng, kinh-nghiệm và thiện-chí giúp đỡ Khố
Cảnh-sát Đặc-biệt, nhất là trong công tác đặt lữai tình báo
nhân dân.

Sự tận tâm và lòng nhiệt thành của Ông Jerome Fox
đã giúp cho ngành Cảnh-sát Quốc-gia thân đạt được nhiều kết-
quả tốt đẹp trong công cuộc bảo vệ an-ninh và duy-trì trật-tự
tại Lũ-thành Saigon.

Tinh-thần tương-trợ của Ông Jerome Fox đáng được
khon ngợi và ghi nhớ.

Saigon, ngày 24 tháng 9 năm 1966
CHỦ-TỊCH ỦY-BAN HÀNH-PHÁP TRUNG-ƯƠNG,



TH. QU. NGUYỄN CAO KỶ

REPUBLIC OF VIETNAM
OFFICE OF THE CHAIRMAN
NATIONAL LEADERSHIP COMMITTEE

CHAIRMAN OF THE CENTRAL EXECUTIVE COMMITTEE

Reference the order of 19 June 1965 which was supplemented by Decree No. 6-QLVNCH/QD of 6 June 1966 of the Armed Forces Council of the Republic of Vietnam;

Reference Decree No. 3-QLVNCH/QD of 14 June 1965 which was supplemented by Decree No. 7-QLVNCH/QD of 6 June 1966 of the Armed Forces Council of the Republic of Vietnam which established and fixed the composition of the National Leadership Council;

Reference Decree No. 001-a/CT/LDQG/SL of 19 June 1965 and all succeeding documents which established and set the composition of the Central Executive Committee;

Reference Decree No. 080-CT/LDQG/SL of 6 September 1965 which created two types of medals, the Police Service Medal and the Honorary Police Medal;

Reference Decree No. 001-CT/LDQG/SL of 21 January 1966 which fixed the methods of awarding the medals mentioned above,

DECREE

Article One. Now the Third Class Honorary Police Medal is awarded to Mr. JEROME FOX, American counterpart to the Police Special Branch of the Directorate General of National Police.

Article Two. The Commissioner General for Security and the Administrative Assistant in the Office of the Chairman of the Central Executive Committee will assume the responsibility for implementing the Decree.

Saigon, 30 September 1966

/Signed and Sealed/

Air Vice Marshal NGUYEN CAO KY

VIỆT-NAM CỘNG-HÒA

Phủ Chủ-Tịch
Ủy-Ban Hành-Pháp Trung-Ưong

Số 1744-NĐ/HĐ/VP.

Chỉ-Dịch
Ủy-Ban Hành-Pháp Trung-Ưong

Chiếu Sắc-lệnh ngày 19 tháng Sáu năm 1965 bổ-túc bởi Quyết-định số 6-LV/CH/QĐ ngày 6 tháng Sáu năm 1966 của Đại Hội-Dồng Quốc-Lực Việt-Nam Cộng-Hòa ;

Chiếu Quyết-định số 3-LV/CH/QĐ ngày 14 tháng Sáu năm 1965 bổ-túc bởi Quyết-định số 7-LV/CH/QĐ ngày 6 tháng Sáu năm 1966 của Đại Hội-Dồng Quốc-Lực Việt-Nam Cộng-Hòa thành-lập và an-định thành-phần Ủy-Ban Lãnh-Đạo Quốc-Đia ;

Chiếu Sắc-lệnh số 001-a/CT/LĐQG/SL ngày 19 tháng Sáu năm 1965 và các văn-khẩu kế-tiếp thành-lập và an-định thành-phần Ủy-Ban Hành-Pháp Trung-Ưong ;

Chiếu Sắc-lệnh số 060-CT/LĐQG/SL ngày 6 tháng Sáu năm 1965 thiết-lập hai loại huy-chương "Cảnh-Sát Chiến-Công Lợi-Tinh" và "Cảnh-Sát Dành-Dự Đội-Tinh" ;

Chiếu Nghị-định số 001-CT/LĐQG/HĐ ngày 21 tháng Giêng năm 1966 an-định chế-độ cấp-tướng các huy-chương kể trên,

H H I - D I H H :

Điều thứ nhất. - Máy an-tướng Độ-tam đấng Cảnh-Sát Dành-Dự Đội-Tinh cho Ông JEROME FOX, Phó-tri-viễn Hoa-Kỳ cạnh Khối Cảnh-Sát Đặc-biệt Tổng Nha Cảnh-Sát Quốc-Đia.

Điều thứ 2. - Tổng-Ủy-Viễn An-Hình và Phụ-Tả Hành-Chánh tại Phủ Chủ-Tịch Ủy-Ban Hành-Pháp Trung-Ưong, chiếu nhiệm-vụ, lãnh tải-dành Nghị-định này.

Saigon, ngày 24 tháng 9 năm 1966



[Handwritten signature]

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO: Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters

EMPLOYEE SERIAL NO.	NAME OF EMPLOYEE			OFFICE/COMPONENT
	LAST	FIRST	MIDDLE	
617974	(Prior) FOX,	JERO:Z	7-24	25-29 45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (OR Omit). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	ARRIVAL							DEPARTURE			COUNTRY	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39				VIET NAM	40-42
3 - CORRECTION						07	11	66				7-22
5 - CANCELLATION	1											

TOY DATES OF SERVICE

TYPE OF DATA	DEPARTURE				RETURN			AREA(S)	OMIT
	CODE	MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TOY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
4 - CORRECTION									
6 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

TRAVEL VOUCHER	<input checked="" type="checkbox"/>	DISPATCH
CABLE	<input type="checkbox"/>	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify):		

DOCUMENT IDENTIFICATION NO. PVST-12830	DOCUMENT DATE/PERIOD 7-14-66
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REMARKS

PREPARED BY USA C & L DIVISION	REPORT ANNOTATED ON SOURCE DOCUMENT DATE 7-21-66	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE RICHARD L. HARTMAN
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FORM 1451a USE PREVIOUS EDITIONS

SECRET

GROUP 1
Excluded from automatic
downgrading and declassification

(4-10)

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO: Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters.

EMPLOYEE SERIAL NO. 1-8	NAME OF EMPLOYEE			OFFICE/COMPONENT 25-28
	LAST (Print)	FIRST	MIDDLE	
1997	FOX,	JEROME		45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION. (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA 1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT 40-42
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
	27	28-29	30-31	32-33	34-35	36-37	38-39	VIET NAM	772

TDY DATES OF SERVICE

TYPE OF DATA 2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	CODE	DEPARTURE			RETURN			AREA(S)	OMIT 40-42
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
	27	28-29	30-31	32-33	34-35	36-37	38-39		

SOURCE OF RECORD DOCUMENT

TRAVEL VOUCHER	<input type="checkbox"/>	DISPATCH	<input checked="" type="checkbox"/>
CABLE	<input type="checkbox"/>	DUTY STATUS OR TIME AND ATTENDANCE REPORT	<input type="checkbox"/>
OTHER (Specify)	<input type="checkbox"/>		

DOCUMENT IDENTIFICATION NO. FVST 8803	DOCUMENT DATE/PERIOD 31 Dec 64
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REMARKS

PREPARED BY D & I DIVISION	REPORT ANNOTATED ON SOURCE DOCUMENT	DATE 17 Jan 65	ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	SIGNATURE Devin Harris
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SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO: Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO. 1-6	NAME OF EMPLOYEE			OFFICE/COMPONENT 20-28
	LAST (Print)	FIRST	MIDDLE	
17974	Fox	Jerome		45

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	97	08-28	30-31	58-59	09-23	62	JAPAN	40-48	
3 - CORRECTION								375	
6 - CANCELLATION									

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	08-29	30-31	52-53	09-25	27		40-48	
4 - CORRECTION									
6 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. FORM - 764	DOCUMENT DATE/PERIOD 2 Sept - 23 Sept 62
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REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDITIONAL DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
FISCAL DIVISION	DATE 16 OCT 1962	SIGNATURE Doris Horvath
FINANCE DIVISION		

SECRET

101

FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE HEADQUARTERS USE ONLY

DO NOT COMPLETE

DO NOT COMPLETE

AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:

NAME OF EMPLOYEE (Type)	DATE (from item 1)	NAME OF SUPERVISOR (Type)	DATE (from item 2)
FOX, JEROME	Jan 1962	HINTZ, ELMER F.	Jan 1962

NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:	DATE
	12 Feb 1962

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE
9 October 1928	GS-12	

4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE
NA	Tokyo Station

6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR	7. EXPECTED DATE OF DEPARTURE
NA	September 1962

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

a) Supervise, coordinate and monitor with KUDOVE, ODYOKE and allied military services, the [redacted] in North Asia specifically covering Japan, [redacted] and South Korea. b) Determine new CHUCKWAGON targets and initiate specific collection projects with appropriate KUDOVE, ODYOKE and allied military units. c) Prepare and provide detailed training and guidance for KUDOVE assets, ODYOKE and allied military personnel, on CHUCKWAGON collection techniques and CHUCKWAGON targets. d) Personally participate in the exploitation of CHUCKWAGON targets when appropriate. e) Conduct official liaison relationships with ODYOKE intelligence units pertaining KUCHAP interests, as directed by the Chief, SIS, Tokyo

9. PREFERENCE FOR NEXT ASSIGNMENT: [redacted]

A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF ASSIGNMENT YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 9, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.

SAME

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):

Language Training

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 2475

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: Singapore

2ND CHOICE: London

3RD CHOICE: _____

PERSONNEL
JUL 18 11 30 PM '62
MAIL ROOM

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?

30 days

INDICATE NUMBER OF WORK DAYS _____

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:

Three: 32, 30 months, 18 months

12. SIGNATURE: COMPLETE ITEM NO. S-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:

In view of this officer's field experience and his competent performance in the Japan area, his continued assignment to a field station would soon to be in the best interests of KUBARK.

14. SIGNATURE: COMPLETE ITEM NO. S-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:

FE Division concurs.

"The staffing plans of St/PM call for the assignment of Mr. Fox to analytical duties on his return to Headquarters in the fall of 1962."

16. NAME OF SUPERVISOR

LEWIS R. FIRCH

SIGNATURE:

DATE:

TITLE:

Personnel Officer, ORR

20 March 1962

17. REMARKS (additional comment):

Mr. Fox was notified of his planned reassignment in Memorandum No. 363, dated 14 March 1962.

21 MAR

David E. Yager
DAVID E. YAGER

Acting Secretary, ORR Career Service Board

SECRET

SECRET
(When Filled In)

VERIFIED RECORD OF OVERSEAS SERVICE

TO:
Office of Personnel, Statistical Reporting Branch, ROOM 192 Curie Hall

EMPLOYEE SERIAL NO. 1-6	NAME OF EMPLOYEE			OFFICE/COMPONENT 25-26
	LAST (Print)	FIRST	MIDDLE	
17974	FOX	JEROME		18

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

PCS DATES OF SERVICE

TYPE OF DATA	CODE	ARRIVAL			DEPARTURE			COUNTRY	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
1 - PCS (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39	JAPAN	40-42
3 - CORRECTION									
5 - CANCELLATION	1	09	04	59					375

TDY DATES OF SERVICE

TYPE OF DATA	CODE	DEPARTURE			RETURN			AREA(S)	OMIT
		MONTH	DAY	YEAR	MONTH	DAY	YEAR		
2 - TDY (Basic)	27	28-29	30-31	32-33	34-35	36-37	38-39		40-42
4 - CORRECTION									
6 - CANCELLATION									

SOURCE OF RECORD DOCUMENT

<input type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input checked="" type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
	10 AUG. - 5 SEP. 59

REMARKS

PREPARED BY	REPORT ANNOTATED ON SOURCE DOCUMENT	ADDITIONAL DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
FISCAL DIVISION	DATE	SIGNATURE
FINANCE DIVISION	21 APR. 60	

Office of Training
TRAINING RECORD

Institute of Training, Council on Education
40 hours, 30 Oct. - 3 Nov. 1961

6 students

Student: Fox, Jerome

Year of Birth: 1928

EOB Date: June 1955

Grade: 11

Office: Orr/St/PM

COURSE OBJECTIVES, CONTENT, AND METHODS

The Objectives of this course are:

1. To develop an acquaintance with the learning processes.
2. To apply the principles of learning and instruction in practical teaching experiences.

This course included planning and practical teaching work in: principles of learning and teaching; effective oral communication; demonstration techniques; training aids; elements of effective class discussions; principles of lesson planning; and based upon the implementation of the principles of learning. Due to the shortness of the course, familiarization only was attempted with the above aspects of teaching.

During this course, each student presented to the class a sample speech, demonstration, a class discussion, and lesson plan, all related to his own subject matter area. These presentations were critiqued and rated by his classmates and the instructor. Over half of the student's course time was spent in practical exercises.

ACHIEVEMENT RECORD

This student has satisfactorily accomplished the course objectives and met the course standards in presenting his exercises. Mr. Fox has a pleasant manner of speaking, and with each presentation to the class his effectiveness increased. He was able to use visual aids effectively to good advantage, and he made worthwhile suggestions for improving the presentations of others. He evidenced a sound grasp of the principles of lesson plan format.

Despite his noticeable progress during the course, Mr. Fox needs to show more interest in his students and regularly maintain good eye contact with his entire class. By giving continual attention and practice to vocal variety, overt manifestations of enthusiasm, and the establishment of closer rapport with the students, Mr. Fox should be able to increase considerably his competence as an instructor.

FOR THE DIRECTOR OF TRAINING:

David DeWaver

9 NOV 1961

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)	NAME OF SUPERVISOR (true)	DATE (from item 2)
Jerome Fox	21 March 1961	Frank Denny	21 March 1961
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	
9 October 1928	GS-11	Identification Specialist	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		
NA	Tokyo Station		
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7. EXPECTED DATE OF DEPARTURE
NA			October 1961
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form)			
<p>a) Supervise, coordinate and monitor with KUDOVE, ODYOKE and allied military services, the [redacted] in North Asia specifically covering Japan, [redacted] and South Korea. b) Determine new CHUCKWAGON targets and initiate specific collection projects with appropriate KUDOVE, ODYOKE and allied military units. c) Prepare and provide detailed training and guidance for KUDOVE assets, ODYOKE and allied military personnel, on CHUCKWAGON collection techniques and CHUCKWAGON targets. d) Personally participate in the exploitation of CHUCKWAGON targets when appropriate. e) Conduct official liaison relationships with ODYOKE intelligence units pertaining to KUCHAI interests, as directed by the Chief, SIS, Tokyo.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT [redacted]			
<p>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> <p>SAME</p>			
<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> <p>Language Training</p>			

SECRET

18 April 1961

MEMORANDUM FOR THE RECORD

SUBJECT: Outstanding Advance Balance, *James Fox*

1. This memorandum is to be made a part of subject's personnel file, by direction of Acting Chief, Tokyo Station.
2. As stated in Paragraph 4 of the Tokyo Station Audit Report for the period 1 September 1960 through 28 February 1961, subject has an outstanding balance of \$167.62 in his travel advance account. The advance has been open since 8 December 1960, despite repeated efforts on the part of Finance to close the account.
3. The balance referred to above is computed as follows:

8 December 1960 - Travel advance	\$500.00
22 March 1961 - Accounting for travel for period 10-18 December 1960	<u>332.38</u>
Balance Outstanding	<u>\$167.62</u>
4. Finance Memorandum 61-19 dated 17 April 1961 again requested that the balance be refunded and the account closed. An addendum to this memorandum, signed by Acting Deputy for Operations, informed KRACKE that he was to refund the balance no later than COB 17 April 1961.
5. *Fox*'s written reply to the memo stated that he would refund the balance no later than 28 April 1961, upon receipt of a bank deposit slip from PBPRIME.
6. After further discussion between POLLOCK, *Fox*, POLCER, and the undersigned, TOKY 6451 and PJTT-7132 were sent to Headquarters requesting an immediate transfer of \$167.62 from subject's Credit Union account to Finance Division for T/A to Tokyo Station.
7. Subject has been informed that no further advances of official funds will be made to him, except for housing expenses and the exact cost of tickets necessary for official travel.

Henry R. Singsbabe
HENRY R. SINGSBABB
Finance Officer

Distribution

- 1 - PERS
- 2 - PIR
- 1 - A/DOPS

SECRET

TSS/PB/TRAINING DIVISION EVALUATION

DARKROOM 9

BASIC PHOTOGRAPHY No. 1

NAME James P. J. DIV. GR. BR. 1A DATES TRAINED: from 23 June to 17 July '71

This course is primarily designed to develop the following skills: Use of 35 mm cameras with accessories, document copy, processing and printing.

	None	Unsat.	Fair	Good	Excellent	Superior
I. Manipulation of camera.						
a. Leica				X		
b. Retina II C	X					
c. Recordak				X		
II. Processing and printing.						
a. Film loading				X		
b. Film processing				X		
c. Enlarging				X		
d. Rellex and contact printing					X	
III. Use of accessory equipment.						
a. Exposure meter				X		
b. Filters	X					
c. Telephoto and wide angle lenses				X		
IV. Document copy and small objects.						
a. Available light	X					
b. Accessory illumination				X		
c. BOOWU, porra lens, focus slide				X		
V. Ground photography.						
a. Coverage						
b. Report	X					
VI. Casimg.						
a. Coverage						
b. Report						
VII. Surveillance.						
a. Coverage						
b. Report						
VIII. Special problems.						
a. Coverage						
b. Report						
General quality of prints				X		
Choice of subject matter				X		
Quality of darkroom work (Cleanliness, etc.)				X		
Attitude toward subject matter				X		
Cooperation					X	

REMARKS:

Mr. Fox met the course objectives and completed all of the course assignments for this two weeks he attended with average results.

Overcoming some difficulty at the outset, Mr. Fox soon overcame many of his problems in the two week time. He demonstrated an eagerness to learn, by asking to be checked out in not only course equipment, but other equipment as well. He also offered to complete additional assignments on his own time.

It is suggested he continue his practice and association with photography in order to maintain and improve present proficiency.

APPROVED
C/TSS/ADROBERT L. J. J.
Instructor

SECRET
(When Filled In)

PERIODIC SUPPLEMENT
PERSONAL HISTORY STATEMENT

THIS DATE

INSTRUCTIONS

This form provides the space 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 1964 entirely. You need complete Sections VII through XII only if there has been a change since you entered on duty with the organization or if you believe the data requires more complete coverage than you have previously reported.

SECTION I

GENERAL

1. FULL NAME (Last, First, Middle)

Fox Jerome

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

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

4. HOME TELEPHONE NUMBER

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

SECTION II

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME

BY RESIDING IN U.S.

2. RELATIONSHIP

Aunt

3. HOME

4. HOME

H.O. 9-3173

BUSINESS TELEPHONE EXTENSION

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

SECTION III

MARITAL STATUS

1. CHECK (X) ONE:



MARRIED

SEPARATED

DIVORCED

ANNULLED

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

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 fiancee.

3. NAME

4. DATE OF MARRIAGE

2 Sept. 1956

New York, N.Y.

6. ADDRESS OF SPOUSE BEFORE

7. LIVING

YES

NO

CAUSE OF DEATH

10. CURRENT ADDRESS (Give last address, if deceased)

11. DATE OF BIRTH

11 June 1930

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

Jackson, Tenn.

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

14. PLACE OF ENTRY

15. CITIZENSHIP (Country)

16. DATE ACQUIRED

17. WHERE ACQUIRED (City, State, Country)

18. OCCUPATION

Housewife

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

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

SECTION III CONTINUED TO PAGE 2

SECRET
(When Filled In)

SECTION V CONTINUED FROM PAGE 2

9. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

NAME OF INSTITUTION	ADDRESS (City, State, Country)
National Bank of Washington	Wash. D. C.
Old Dominion	Arlington, Va

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)

SECTION VI: CITIZENSHIP

1. COUNTRY OF CURRENT CITIZENSHIP _____

2. CITIZENSHIP ACQUIRED BY - CHECK (A) 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 (FIVE Digits, etc.) _____

SECTION VII: EDUCATION

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

LESS THAN HIGH SCHOOL GRADUATE	OVER TEN YEARS OF COLLEGE - NO DEGREE
HIGH SCHOOL GRADUATE	BACHELOR'S DEGREE
TRADITIONAL BUSINESS OR COMMERCIAL SCHOOL GRADUATE	GRADUATE STUDY LEADING TO HIGHER DEGREE
TWO YEARS COLLEGE OR LESS	MASTERS DEGREE
	DOCTOR'S DEGREE

2. COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		DATES ATTENDED		DEGREE REC'D	DATE REC'D	REMARKS - USE 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 HOURS
		FROM	TO	

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET
3

DESIGNATION OF BENEFICIARY
FEDERAL EMPLOYEES' GROUP LIFE
INSURANCE ACT OF 1951

IMPORTANT
Read instructions
on back of duplicate
before filling in this form

INFORMATION CONCERNING THE INSURED:

NAME (Last)	(First)	(Middle)	DATE OF BIRTH (Month, day, year)
FOX	JEROME		October 9, 1928

DEPARTMENT OR AGENCY IN WHICH EMPLOYED (If retired, so state and give "CSA" or "CSI" number):

(Department or agency)	(Bureau)	(Division)
------------------------	----------	------------

I, the employee or annuitant identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees' Group Life Insurance Act heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of GROUP LIFE INSURANCE and GROUP ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as I become insured in a department or agency other than the above, or until such time as I become insured as a retired employee, in which event this Designation of Beneficiary shall terminate.

INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death.
I hereby specifically reserve the right to cancel or change any Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

August 30, 1956

(Date of execution—month, day, year)

(Signature of Insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

(Signature of witness)	(Name and street)	(City, town number, and State)

PRINT OR TYPE NAME AND ADDRESS OF INSURED

Jerome Fox

THIS SPACE RESERVED FOR RECEIVING AGENCY

MAILED
AUG 31 11 27 AM '56
U. S. CIVIL SERVICE COMMISSION

IMPORTANT--The filing of this form will completely cancel any Designation of Beneficiary under the Federal Employees' Group Life Insurance Act you may have previously filed. Be sure to name in this form all persons you wish to designate as beneficiaries of any group life and accidental death insurance payable under that act at your death.

EXAMPLES OF DESIGNATIONS

How To Designate ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Mary E. Brown*	214 Central Avenue, Muncie, Ind.	Niece	All

How To Designate MORE THAN ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Alice M. Long	509 Canal Street, Red Bank, N. J.	Aunt	One-fourth**
Joseph P. Brady	360 Williams Street, Red Bank, N. J.	Nephew	One-fourth
Catherine L. Rowe	792 Broadway, Whiting, Ind.	Mother	One-half

How To Designate A CONTINGENT BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
John M. Parrish, if living	810 West 180th Street, New York, N. Y.	Father	All
Otherwise to: Susan A. Parrish	810 West 180th Street, New York, N. Y.	Sister	All

How To CANCEL A DESIGNATION OF BENEFICIARY SO THAT AMOUNT DUE WILL BE PAYABLE AS PROVIDED IN THE LAW

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

*Do not write names as M. E. Brown as Mr. John H. Brown.
 **Do show that the shares to be paid to the several beneficiaries add up to 100 percent.

CONFIDENTIAL

TO : Chief, Fiscal Division 1405 Alcott Hall
FROM : Chief, Records and Services Division
SUBJECT: SF-2808

Attached is SF-2808 (Designation of Beneficiary) for:

For: Jerome

Rec'd Milla Kuster

Date 21 JUN 1955

Please sign second copy and return to:

Chief, Transactions and Records Branch
Room 187
Curie Hall

Joseph S. Reff
JOSEPH S. REFF

CONFIDENTIAL

APPOINTMENT AFFIDAVITS

IMPORTANT.— Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

WASHINGTON, D.C.

(Bureau or division)

(Place of employment)

I, Jerome Fox, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, **SO HELP ME GOD.**

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

15 June 1955

(Date of entrance on duty)

Jerome Fox

(Signature of appointee)

Subscribed and sworn before me this 15th day of June, A. D. 1955,

at Washington, (City) D.C. (State)

[SEAL]

(Signature of officer)

NOTE.— If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PREC. _____

2. (A) DATE OF BIRTH: **OCT 9, 1928** (B) PLACE OF BIRTH (City or town and State or country): **BROOKLYN, N. Y.**

(C) RELATIONSHIP: **Brother** (D) STREET AND NUMBER, CITY AND STATE: _____ (E) TELEPHONE NO.: **EL 5-7829**

3. DO YOU, THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? YES NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under item 10.

NAME	POST OFFICE ADDRESS (One street number, if any)	(1) POSITION (2) DEPARTMENT, OR AGENCY, IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE

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

QUESTION	YES	NO	ITEM NO.
1. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X		
2. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in item 10.</i>		X	
3. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY FEDERAL LAW OR ANY REGION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in item 10 reason for retirement, that is, age, physical disability, or the reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act, and rating, if retired from military or naval service.</i>		X	
4. SINCE YOU FILED APPLICATION HEREIN THIS APPLICATION HAVE YOU BEEN EMPLOYED OR ENGAGED IN ANY WAY FOR DISCRETIONARY OR UNUSUAL FACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in item 10 the name and address of employer, date and reason in each case.</i>		X	
5. HAVE YOU BEEN ARRESTED (NOT INCLUDING TRAFFIC VIOLATIONS) FOR WHICH YOU WERE FINED \$25.00 OR MORE OR SENT TO JAIL OR FOR WHICH YOU HAD APPLICATION RESCINDED IN THIS APPOINTMENT? <i>If your answer is "Yes", list all such cases under item 10. Give in each case: (1) The date; (2) the nature of the offense of violation; (3) the name and location of the court; (4) the penalty imposed; (5) date of the disposition of the case. If appointed, your fingerprints will be taken.</i>		X	

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that the appointment is in accordance with the Civil Service Act, and that the Civil Service Rules and Regulations and acts of Congress pertaining to appointments.

This form should be checked for the bearing of office, position, rate, salary, and other matters with our record of recent change of record, and provisions for the following:

(1) **Identity of appointee**—It is the duty of the appointing officer to check against representation and to determine to his satisfaction whether the appointee is the same person whose application was approved. The appointing officer should compare the appointee with the application and other pertinent records. If the appointee is a minor, the appointing officer should compare the appointee with the application and other pertinent records, which was based on the applicant's name. The appointing officer should be checked against the official records. The appointing officer should be checked against the official records for approval with the previous appointments.

(2) **Age**—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Under such determination is made, the special conditions will be determined.

(3) **Citizenship**—The appointing officer should determine to his satisfaction that the appointee is a citizen of the United States and is not a foreign-born person. If the appointee is a foreign-born person, the appointing officer should determine to his satisfaction that the appointee is a citizen of the United States and is not a foreign-born person. If the appointee is a foreign-born person, the appointing officer should determine to his satisfaction that the appointee is a citizen of the United States and is not a foreign-born person.

(4) **Members of Family**—Section 5 of the Civil Service Act prohibits members of family from being members of a family service unit. The appointing officer should determine to his satisfaction that the appointee is not a member of a family service unit. If the appointee is a member of a family service unit, the appointing officer should determine to his satisfaction that the appointee is not a member of a family service unit.

Standard Form No. 64
September 1954
U. S. Civil Service Commission
F. F. S. Chapter 71

DESIGNATION OF BENEFICIARY
FEDERAL EMPLOYEES' GROUP LIFE
INSURANCE ACT OF 1954

IMPORTANT
Read instructions
on back of duplicate
before filling in this form

INFORMATION CONCERNING THE INSURED:

NAME (Last)	(First)	(Middle)	DATE OF BIRTH (Month, day, year)
FOX	JEROME		OCTOBER 9, 1928
DEPARTMENT OR AGENCY IN WHICH EMPLOYED (If retired, so state and give "CSA" or "CSI" number):			
CIA (Department or agency) (Branch) (Division)			

I, the employee or annuitant identified above, canceling any and all previous Designations of Beneficiary under the Federal Employees' Group Life Insurance Act heretofore made by me, do now designate the beneficiary or beneficiaries named below to receive any amount of GROUP LIFE INSURANCE and GROUP ACCIDENTAL DEATH INSURANCE due and payable at my death. I understand that this Designation of Beneficiary will remain in full force and effect, with respect to any amount payable, unless or until canceled by me in writing, or until such time as I become insured in a department or agency other than the above, or until such time as I become insured as a retired employee, in which event this Designation of Beneficiary shall terminate.

INFORMATION CONCERNING THE BENEFICIARY OR BENEFICIARIES:

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
		Brother	ALL

I hereby direct, unless otherwise indicated above, that, if more than one beneficiary is named, the share of any deceased beneficiary who may predecease me shall be distributed equally among the surviving beneficiaries, or entirely to the survivor. I understand that this Designation of Beneficiary shall be void if none of the designated beneficiaries is living at the time of my death. I hereby specifically reserve the right to cancel or change my Designation of Beneficiary at any time without knowledge or consent of the beneficiary.

JUNE 15, 1955

(Date of execution - month, day, year)

Jerome Fox

(Signature of Insured)

WITNESSES TO SIGNATURE (A witness is ineligible to receive payment as a beneficiary):

[Empty box for witness signature]

Washington, D.C.
(City, zone number, and State)

Washington, D.C.
(City, zone number, and State)

PRINT OR TYPE NAME AND ADDRESS OF INSURED

JEROME FOX

THIS SPACE RESERVED FOR RECEIVING AGENCY

*Rec'd Off of Personnel
6/15/55
Margaret J. Donnelly*

(Indicate date and by whom received)

IF ISSUED AS AN EMPLOYEE, GIVE BOTH COPIES TO THE PROPER OFFICE OF YOUR AGENCY - DUPLICATE WILL BE NOTED AND RETURNED. IF ISSUED AS AN ANNUITANT, SEND BOTH COPIES TO THE CIVIL SERVICE COMMISSION, WASHINGTON 25, D. C. - DUPLICATE WILL BE NOTED AND RETURNED.

IMPORTANT.—The filing of this form will completely cancel any Designation of Beneficiary under the Federal Employees' Group Life Insurance Act you may have previously filed. Be sure to name in this form all persons you wish to designate as beneficiaries of any group life and accidental death insurance payable under that act at your death.

EXAMPLES OF DESIGNATIONS

HOW TO DESIGNATE ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Mary E. Brown*	214 Central Avenue, Muncie, Ind.	Niece	All

HOW TO DESIGNATE MORE THAN ONE BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Alice M. Long	509 Canal Street, Red Bank, N. J.	Aunt	One-fourth **
Joseph P. Brady	360 Williams Street, Red Bank, N. J.	Nephew	One-fourth
Catherine L. Rowo	792 Broadway, Whiting, Ind.	Mother	One-half

HOW TO DESIGNATE A CONTINGENT BENEFICIARY

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
John M. Parrish, if living	810 West 180th Street, New York, N. Y.	Father	All
Otherwise to: Susan A. Parrish	810 West 180th Street, New York, N. Y.	Sister	All

HOW TO CANCEL A DESIGNATION OF BENEFICIARY SO THAT AMOUNT DUE WILL BE PAYABLE AS PROVIDED IN THE LAW

Type or print first name, middle initial, and last name of each beneficiary	Type or print address of each beneficiary	Relationship	Share to be paid to each beneficiary
Cancel prior designations			

*Do not write name as M. E. Brown or as Mrs. John H. Brown.
 **Be sure that the shares to be paid to the several beneficiaries add up to 100 percent.

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

IMPORTANT: The information on this form will be used in determining creditable service for leave purposes and retention credits for reduction in force. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I.—EMPLOYEE'S STATEMENT

PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial): **Fox, Jerome**

2. DATE OF BIRTH: **9 Oct. 1928**

9. RETENTION GROUP

10. CSC STATUS (For permanent employees only)
 YES NO

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.)

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
CIA	55	6	15				

11. SERVICE

YEAR	MONTH	DAY

4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."

BRANCH	FROM—			TO—			DISCHARGE (Hon. or dishon.?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
U.S. ARMY	1952	NOV	17	1959	MAY	16	HON.

12. TOTAL SERVICE
2 00 00

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? YES NO IF ANSWER IS "YES" LIST FOLLOWING INFORMATION.

TYPE OF SERVICE (LWOP, Phil. Serv., AWOL, Mat. Mar.)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

13. NONCREDITABLE SERVICE (Leave purposes only)
1 1 29

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? YES NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)

14. NONCREDITABLE SERVICE (RIF purposes only)

7. ARE YOU:
 A. THE WIFE OF A DECEASED VETERAN? YES NO
 B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? YES NO
 C. THE UNDEVELOPED WIDOW OF A VETERAN? YES NO

15. EMPLOYMENT RIGHTS YES NO
 16. RETENTION RIGHTS YES NO
 17. EXPIRATION DATE OF RETENTION RIGHTS

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS.

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

15 June 1955 (DATE)
Jerome Fox (SIGNATURE)
 Subscribed and sworn to before me on this 15th day of June 1955 at Washington, D.C. (CITY) (STATE)

SEAL

Charles W. [Signature]

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

(OVER)

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 13)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

YEARS	MONTHS	DAYS
5	5	45
1	1	29
54	4	16

revised
1/11/57

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction
in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 14)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (RIF purposes)

SERVICE COMPUTATION DATE (RIF purposes)
(Enter as the "service computation date" on the employee's "Service Record Card," SF-7)

YEARS	MONTHS	DAYS

REMARKS:

SECRET

1. NAME (Last, First, Middle) FOX, JEROME (NMI)		2. DATE OF BIRTH OCT 1928	3. GRADE GS-13
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/CE/PMI		5. PRESENT POSITION Ops Officer -PMI/P	6. EMPLOYEE EXTENS. 6109
7. PROPOSED STATION Saia, .Pf.		8. PROPOSED POSITION (Title, Number, Grade) OPS Officer-4947-GS-13	
STATION		10. ESTIMATED DATE OF DEPARTURE 10 May 1969	11. NO. OF DEPENDENTS TO ACCOMPANY 3
12. COMMENTS Request evaluation of current medical for proposed PCS assignment			
13. DATE OF REQUEST 24 Jan 1969		14. SIGNATURE OF REQUESTING OFFICIAL <i>Dale R. Skovgaard</i> Dale R. Skovgaard PE/PECS/PMI	15. ROOM NUMBER AND BUILDING 5 22
16. EXTENSION 6109			
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION 27 MAR 1969 QUALIFIED FOR OVERSEAS ASSIGNMENT <i>76 COT</i> Chairman, Overseas Candidate Review Panel			
REQUEST FOR PCS OVERSEAS EVALUATION			

259a USE PREVIOUS EDITIONS

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

141

SECRET

1. NAME (Last, First, Middle) Fox, Jerome (RMI)		2. DATE OF BIRTH 9 October 1923		3. GRADE GS-12	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) DDP/TE/RMI		5. PRESENT POSITION Ops Officer		6. EMPLOYEE EXTENSION 140	
7. PROPOSED STATION <input type="text"/>		8. PROPOSED POSITION (Title, Number, Grade) Ops Officer/441/OS-13			
9. <input type="text"/> ION		10. ESTIMATED DATE OF DEPARTURE 1 June 1968		11. NO. OF DEPENDENTS TO ACCOMPANY 3	
12. COMMENTS Request that Subject's physical be re-evaluated for the above PCS assignment. <input type="text"/>					
13. DATE OF REQUEST 23 December 1967		14. SIGNATURE OF REQUESTING OFFICIAL Virginia Curry		15. ROOM NUMBER AND BUILDING 5 B 22	16. EXTENSION 6109
17. OFFICE OF MEDICAL SERVICES DISPOSITION <p align="center">PROPOSED BY DATE</p>					
18. OFFICE OF SECURITY DISPOSITION <p align="center">FILED</p>					
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION					
REQUEST FOR PCS OVERSEAS EVALUATION					

fol

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? Yes
(Yes or No)

SEC. 1. PERSONAL BACKGROUND

A. FULL NAME Miss JEROME Mr. FOX Mrs.
(Use No Initials) (First) (Middle) (Last) Telephone: Office 6 X 3 8115
 Ext. 617
 Home

PRESENT ADDRESS (Country)

PERMANENT ADDRESS NA (St. and Number) (City) (State) (Country)

B. NICKNAME JERRY WHAT OTHER NAMES HAVE YOU USED? NA

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? _____

HOW LONG? _____ IF A LEGAL CHANGE, GIVE PARTICULARS _____

C. DATE OF BIRTH Oct. 9, 1918 (Where?) PLACE OF BIRTH ALBANY, N.Y. (City) KINGS (State) U.S.A. (Country)

D. PRESENT CITIZENSHIP U.S.A. (Country) BY BIRTH? YES BY MARRIAGE? NA

BY NATURALIZATION CERTIFICATE NO. NA ISSUED _____ (Date) BY _____ (Court)

AT _____ (City) _____ (State) _____ (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? NO (Yes or No) _____ (Country)

HELD BETWEEN WHAT DATES? _____ TO _____ ANY OTHER NATIONALITY? _____ (Country)

GIVE PARTICULARS _____

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? NO GIVE PARTICULARS: _____

~~CONFIDENTIAL~~

K. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? U.A.

PORT OF ENTRY? ON PASSPORT OF WHAT COUNTRY?

LAST U. S. VISA
(Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE SEX HEIGHT WEIGHT
EYES HAIR COMPLEXION SCARS
BUILD OTHER DISTINGUISHING FEATURES

SEC. 3. MARITAL STATUS

A. SINGLE MARRIED DIVORCED WIDOWED

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE--INCLUDING ANNULMENTS--USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

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

PLACE AND DATE OF MARRIAGE NEW YORK, N.Y. SEPT. 2, 1956

HIS (OR HER) ADDRESS BEFORE MARRIAGE
(St. and Number) (City) (State) (Country)

LIVING OR DECEASED Living DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS
(St. and Number) (City) (State) (Country)

DATE OF BIRTH JUNE 11, 1930 PLACE OF BIRTH JACKSON, TENN. MADISON
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY N.A.

CITIZENSHIP U.S.A. WHEN ACQUIRED? BIRTH WHERE?

OCCUPATION CLERK LAST EMPLOYER

EMPLOYER'S OR BUSINESS ADDRESS
(City) (State) (Country)

MILITARY SERVICE FROM N.A. TO BRANCH OF SERVICE

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? NA

PORT OF ENTRY? _____ ON PASSPORT OF WHAT COUNTRY? _____

LAST U. S. VISA _____
(Number) (Type) (Place of Issue) (Date of Issue)

Sec. 2. PHYSICAL DESCRIPTION

AGE _____ SEX _____ HEIGHT _____ WEIGHT _____

EYES _____ HAIR _____ COMPLEXION _____ SCARS _____

BUILD _____ OTHER DISTINGUISHING FEATURES _____

Sec. 3. MARITAL STATUS

A. SINGLE _____ MARRIED DIVORCED _____ WIDOWED _____

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS _____

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE _____
(First) (Middle) (Maiden) (Last)

PLACE AND DATE OF MARRIAGE NEW YORK, N.Y. SEPT 3, 1956

HIS (OR HER) ADDRESS BEFORE MARRIAGE _____
(St. and Number) (City) (State) (Country)

LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE _____

PRESENT, OR LAST, ADDRESS _____
(St. and Number) (City) (State) (Country)

DATE OF BIRTH JUNE 11, 1930 PLACE OF BIRTH JACKSON, TENN. MADISON
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA

CITIZENSHIP USA WHEN ACQUIRED? BIRTH WHERE? _____
(State) (State) (Country)

OCCUPATION LABORER LAST EMPLOYER _____

EMPLOYER'S OR BUSINESS ADDRESS _____
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO _____ BRANCH OF SERVICE _____
(Date) (Date)

COUNTRY _____ DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN _____

Sec. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1. NAME RELATIONSHIP AGE
CITIZENSHIP ADDRESS
(St. and Number) (City) (State) (Country)

2. NAME RELATIONSHIP AGE
CITIZENSHIP ADDRESS
(St. and Number) (City) (State) (Country)

3. NAME RELATIONSHIP AGE
CITIZENSHIP ADDRESS
(St. and Number) (City) (State) (Country)

Sec. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME
(First) (Middle) (Last)

LIVING OR DECEASED DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS
(St. and Number) (City) (State) (Country)

DATE OF BIRTH PLACE OF BIRTH
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY

CITIZENSHIP WHEN ACQUIRED? WHERE?
(City) (State) (Country)

OCCUPATION LAST EMPLOYER

EMPLOYER'S OR OWN BUSINESS ADDRESS
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM TO BRANCH OF SERVICE

(Date) (Date)

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

Sec. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME
(First) (Middle) (Last)

LIVING OR DECEASED DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS
(St. and Number) (City) (State) (Country)

DATE OF BIRTH PLACE OF BIRTH
(City) (State) (Country)

CITIZENSHIP WHEN ACQUIRED? WHERE?
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY

(4)

OCCUPATION LAST EMPLOYER

EMPLOYER'S OR OWN BUSINESS ADDRESS
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM TO BRANCH OF SERVICE

COUNTRY DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME AGE
(First) (Middle) (Last)

PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

2. FULL NAME AGE
(First) (Middle) (Last)

PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

3. FULL NAME AGE
(First) (Middle) (Last)

PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

4. FULL NAME AGE
(First) (Middle) (Last)

PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

5. FULL NAME AGE
(First) (Middle) (Last)

PRESENT ADDRESS
(St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME
(First) (Middle) (Last)

LIVING OR DECEASED LIVING DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS JEAN MADISON
(St. and Number) (City) (State) (Country)

DATE OF BIRTH PLACE OF BIRTH JACKSON, TENN

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY U.S.

CITIZENSHIP U.S. WHEN ACQUIRED? BIRTH WHERE?
(City) (State) (Country)

OCCUPATION LAST EMPLOYER

SEC. 9. MOTHER-IN-LAW

FULL NAME _____
(First) (Middle) (Last)
LIVING OR DECEASED DECEASED DATE OF DECEASE MAY 1955 CAUSE L.I.C. 10102
PRESENT, OR LAST, ADDRESS _____
(St. and Number) (City) (State) (Country) TEANA MADISON
DATE OF BIRTH _____ PLACE OF BIRTH INDICISPART, N.Y.
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
CITIZENSHIP U.S.A. WHEN ACQUIRED? BIRTH WHERE? _____
(City) (State) (Country)
OCCUPATION NA LAST EMPLOYER _____

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

1. NAME NA RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
2. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

1. NAME NA RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
2. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
3. NAME _____ RELATIONSHIP _____ AGE _____
CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) _____

(14)

F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

.....
.....
.....
.....

Sec. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME RELATIONSHIP
ADDRESS
(St. and Number) (City) (State) (Country)

Sec. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

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."

.....
.....
.....
.....

Sec. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT WASHINGTON, D. C. DATE AUG 30, 1956
(City and State)

(Witness)

James F. J.
Signature of Applicant

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.



PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "N/A". Write unknown only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.
 2. Type, print, or write carefully; illegible or incomplete copies will not receive complete credit.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?

22A. PERSONAL BACKGROUND

1. FULL NAME: _____ (Last) _____ (First) _____ (Middle) _____ (Suffix)

2. BIRTH DATE: _____ (MM/DD/YYYY) BIRTH PLACE: _____ (City, State, Country)

3. CURRENT ADDRESS: _____ (Street, City, State, ZIP)

4. PREVIOUS ADDRESSES: _____ (Street, City, State, ZIP) _____ (Street, City, State, ZIP)

5. EDUCATION: _____ (School Name, City, State, Year Graduated)

6. OCCUPATION: _____ (Job Title, Employer Name, City, State, Year Started)

7. SOCIAL SECURITY NUMBER: _____ (Last four digits)

8. MARITAL STATUS: _____ (Single, Married, Divorced, Widowed)

9. NUMBER OF CHILDREN: _____ (Total) _____ (Male) _____ (Female)

10. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

11. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

12. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

13. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

14. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

15. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

16. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

17. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

18. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

19. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

20. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

21. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

22. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

23. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

24. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

25. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

26. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

27. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

28. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

29. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

30. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

31. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

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36. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

37. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

38. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

39. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

40. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

41. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

42. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

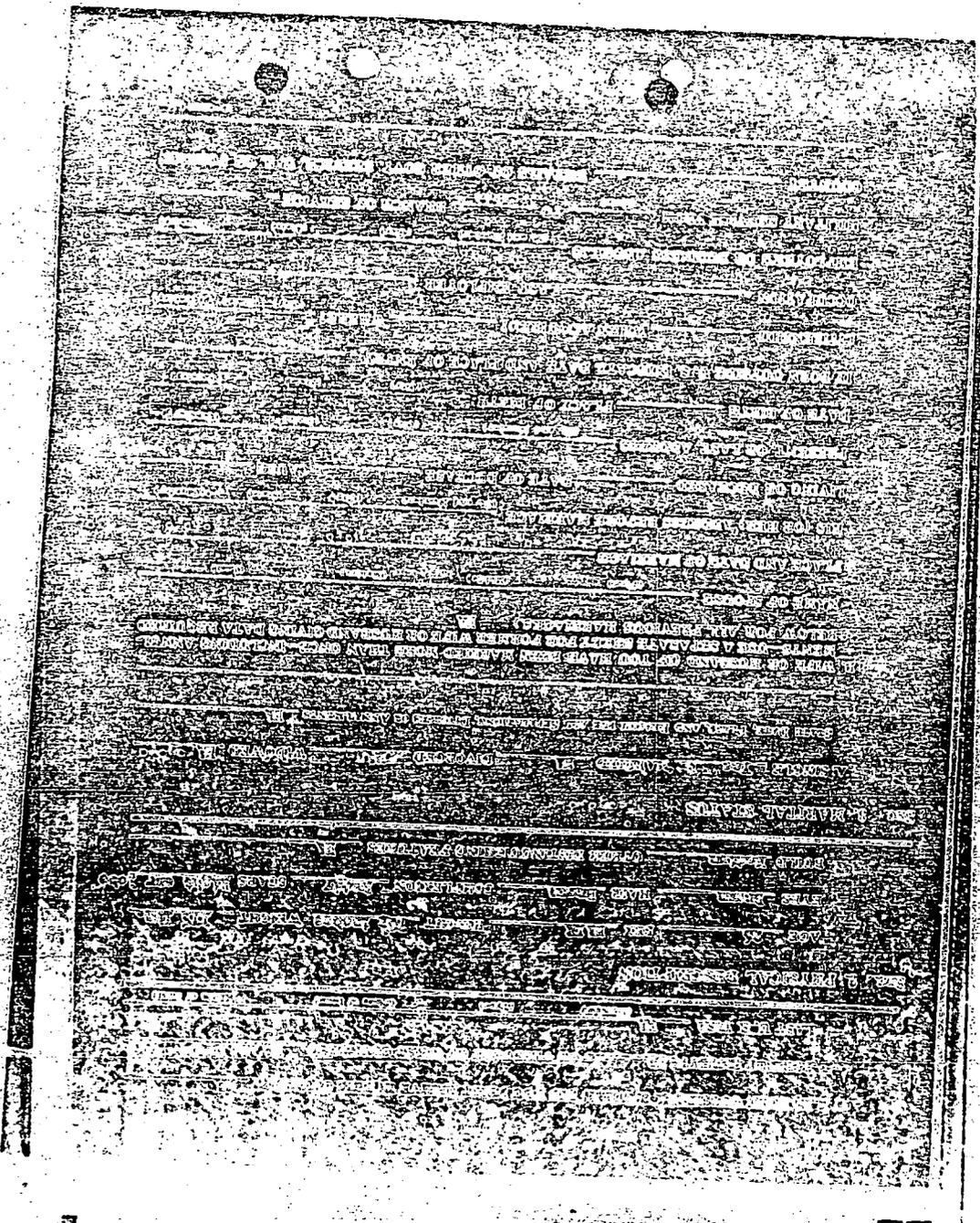
43. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

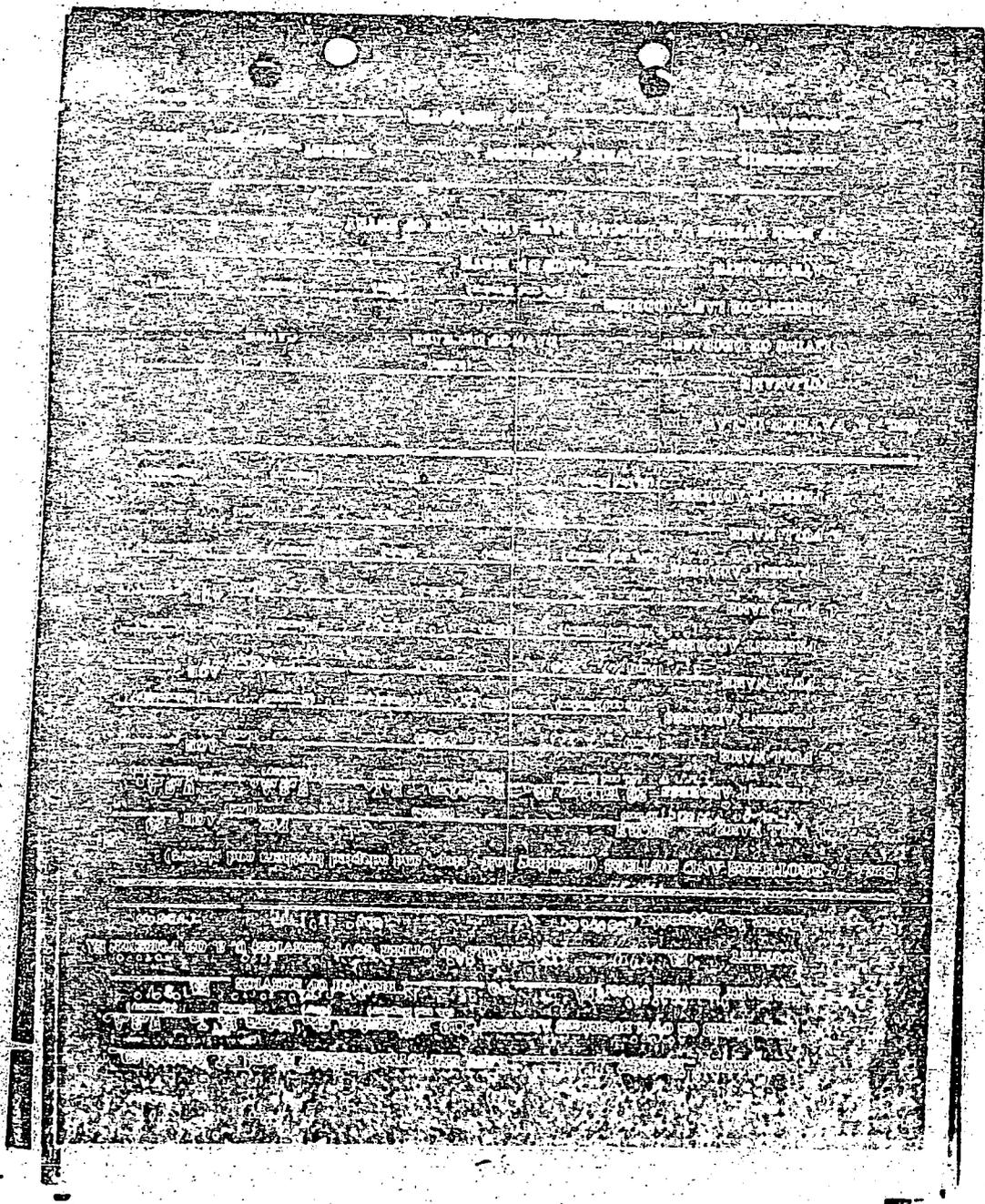
44. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

45. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

46. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)

47. CURRENT EMPLOYER: _____ (Company Name, City, State, Year Started)





Sec. 8. MOTHER-IN-LAW

FULL NAME _____
LIVING OR DECEASED _____ DATE OF DECEASE _____
PRESENT OR LAST ADDRESS _____
DATE OF BIRTH _____ PLACE OF BIRTH _____
IF BORN OUTSIDE U.S. DATE AND PLACE OF ENTRY _____
CITIZENSHIP _____ WHEN ACQUIRED _____ WHEREBY _____
OCCUPATION _____

Sec. 10. RELATIVE BY BLOOD, MARRIAGE OR ADOPTION, WHO RESIDES ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES

NAME _____
RESIDENCE _____
CITIZENSHIP _____
RELATIONSHIP _____
DATE OF BIRTH _____ PLACE OF BIRTH _____
IF BORN OUTSIDE U.S. DATE AND PLACE OF ENTRY _____
CITIZENSHIP _____ WHEN ACQUIRED _____ WHEREBY _____
OCCUPATION _____

Sec. 11. RELATIVE BY BLOOD OR MARRIAGE OF THE DECEASED

NAME _____
RESIDENCE _____
CITIZENSHIP _____
RELATIONSHIP _____
DATE OF BIRTH _____ PLACE OF BIRTH _____
IF BORN OUTSIDE U.S. DATE AND PLACE OF ENTRY _____
CITIZENSHIP _____ WHEN ACQUIRED _____ WHEREBY _____
OCCUPATION _____

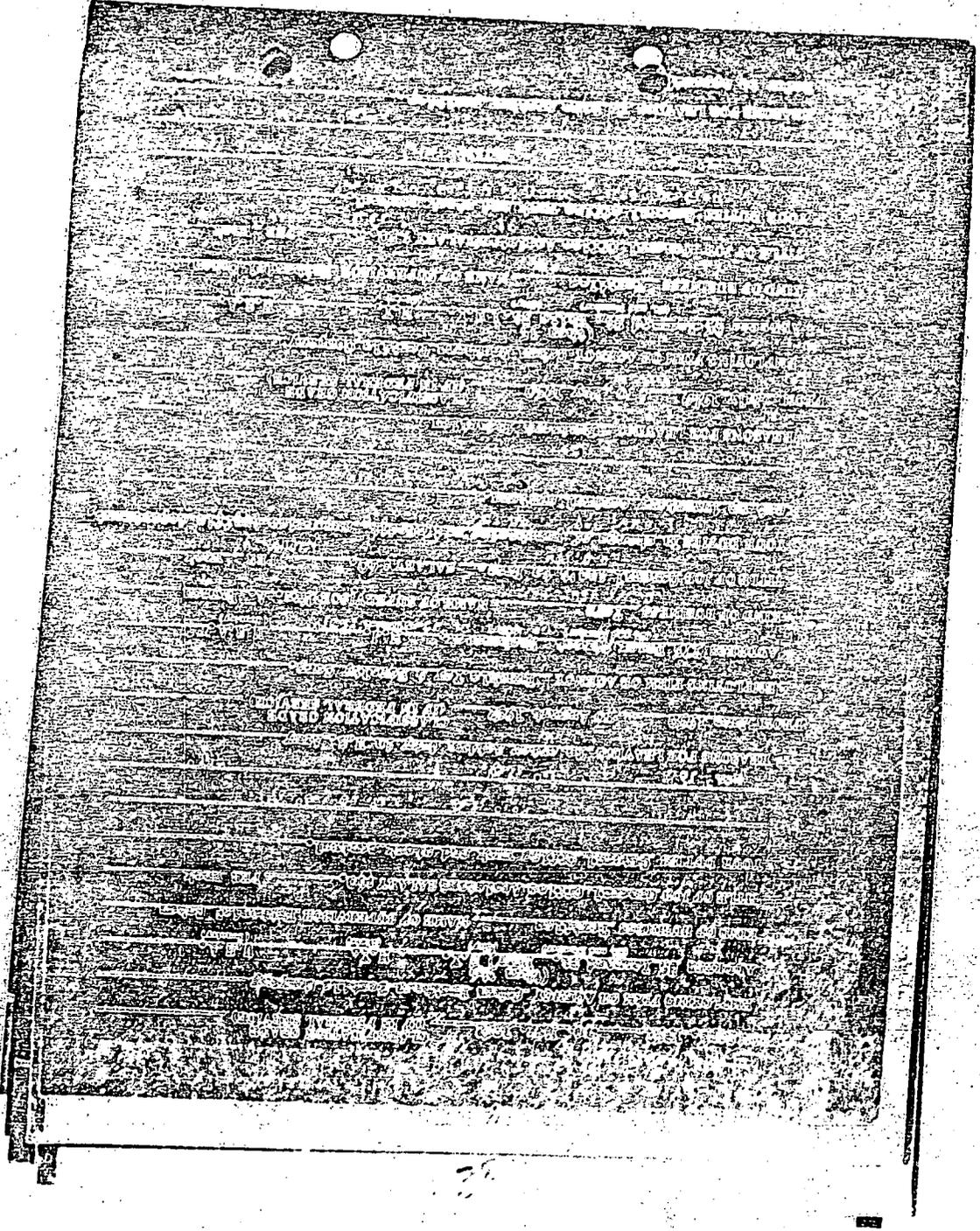
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SECTION 1A ACTIVE U.S. OR FOREIGN MILITARY SERVICE

U.S. ARMY AIR FORCE NAVY MARINE CORPS COAST GUARD
RELATIVE SERVICE BOARD NUMBER 97 ADDRESS 1041
INDICATE MEMBERSHIP IN MILITARY RESERVE CIRCLES

SECTION 1B CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 10 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUALTY EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. GIVE GRADE OR POSITION FOR EACH YEAR OR PART THEREOF.

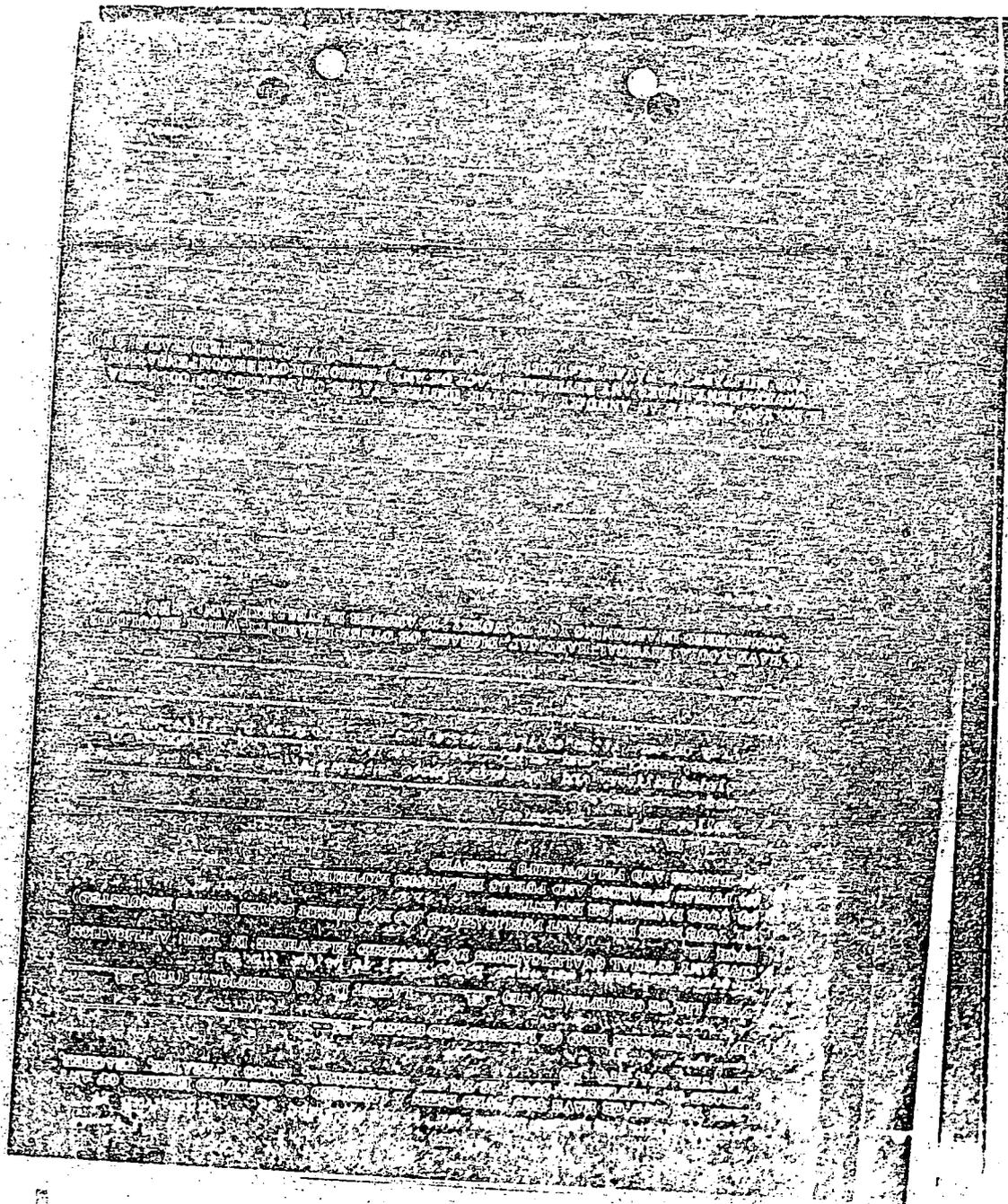
EMPLOYING ORGANIZATION
ADDRESS
GRADE OR POSITION
PERIOD OF EMPLOYMENT
REASON FOR LEAVING
DATE OF LEAVING

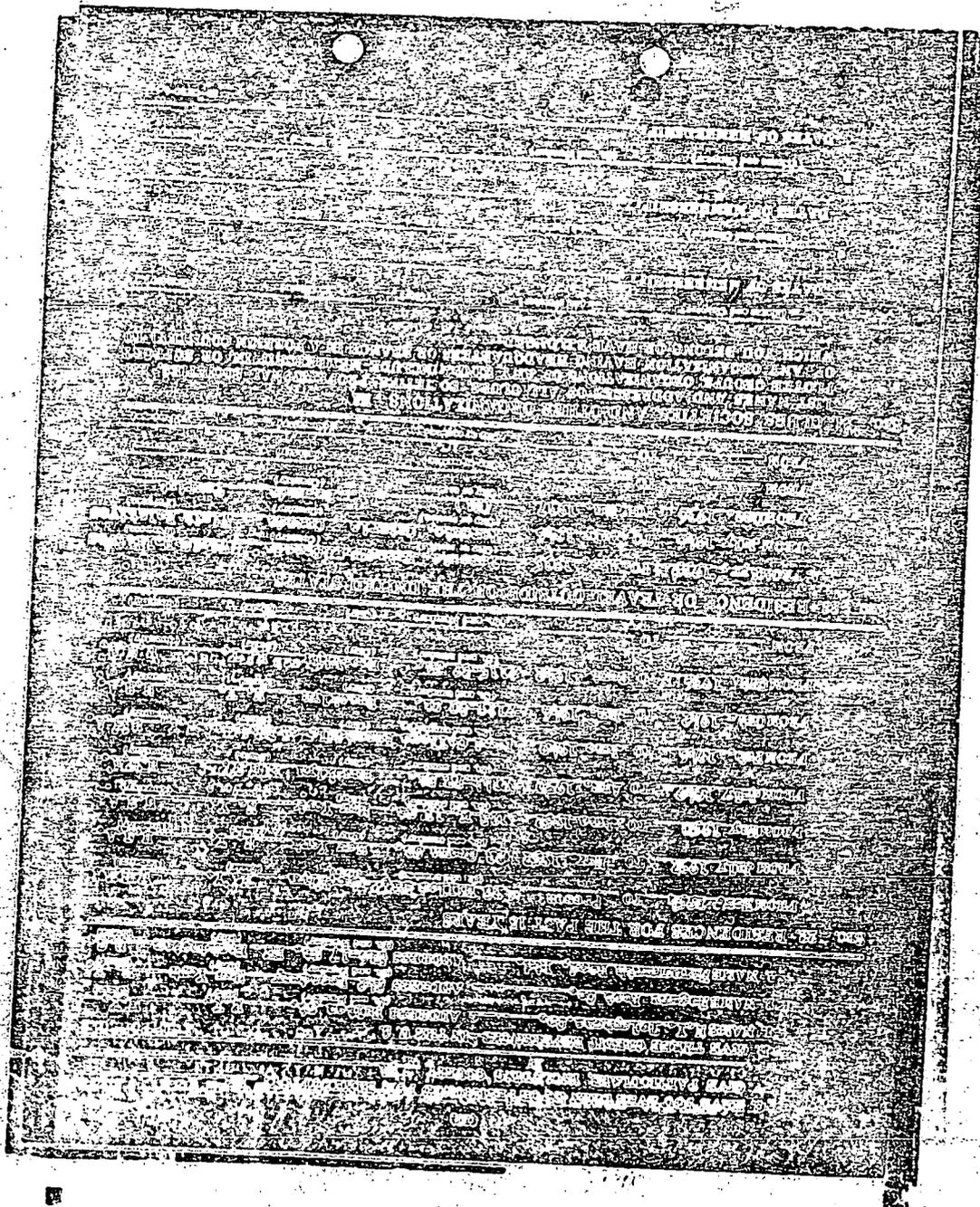


1. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS.

2. CENTRAL QUALIFICATION

FOREIGN LANGUAGE PROFICIENCY - COURSE OF INSTRUCTION AND DURATION
LANGUAGE PROFICIENCY - IN AMERICAN OR OTHER COUNTRIES
LANGUAGE PROFICIENCY - IN AMERICAN OR OTHER COUNTRIES
LANGUAGE PROFICIENCY - IN AMERICAN OR OTHER COUNTRIES
LANGUAGE PROFICIENCY - IN AMERICAN OR OTHER COUNTRIES
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LANGUAGE PROFICIENCY - IN AMERICAN OR OTHER COUNTRIES
LANGUAGE PROFICIENCY - IN AMERICAN OR OTHER COUNTRIES





APPENDIX

1. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

2. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

3. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

4. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

5. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

6. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

7. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

8. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

9. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

10. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

11. Name: [Illegible]
Address: [Illegible]
City: [Illegible]

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CONFIDENTIAL
SECURITY INFORMATION
SECURITY APPROVAL

Date: 2 August 1955

TO: Chief, Records & Services Division
Personnel Office
FROM: Chief, Security Division
Personnel
SUBJECT: FOX, Jerome

Your Reference: SR-9299-A ORR
Case Number: 102815

1. This is to advise you of security action in the subject case as indicated below:

- Security approval is granted the subject person for access to classified information.
- Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
- The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of paragraph H of Regulation 10-9.

- 2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.
- 3. Subject is to be polygraphed as part of EOD procedures.

Ernest P. Geiss
Ernest P. Geiss
M

*Branch advised
8/4/55
mjs*

CONFIDENTIAL

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SECURITY INFORMATION
INTEROFFICE MEMORANDUM

Date: 27 May 1955

TO: Chief, Processing & Records Division
Personnel Office
FROM: Chief, Security Division
Personnel

SUBJECT: FOX, Jerome - #102815

Request No. SR-9299-A - ORR

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position:

Ident. Spec. GS-7, DDI/ORR-Office of the Chief, Washington, D. C.

2. This is to advise you of the following security action:

a. Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity:

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

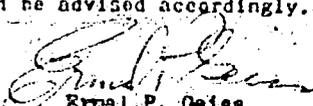
b. Name-checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.


Ernal P. Geiss

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