62-116395

Serial Scope:

348 Only

2 - Mr. J. A. Mintz (1 - Mr. J. B. Hotis)

1 - Mr. W. R. Wannall

1 - Mr. W. O. Cregar

Attorney General

July 32, 1975

Director, FBI

1 - Mr. J. E. Reilly 1 - Mr. H. W. Dare, Jr.

JIII 1 G 1076

SEE NOTE PAGE TWO

UNITED STATES SENATE SELECT COMMITTEE ON INTILLIGENCE ACTIVITIES

Reference is made to memorandum from Senate Select Committee, dated April 30, 1975, and appendices thereto. requesting certain documents and other information from the FBI and subsequent request to this Bureau from Staff Member Mark Gitenstein.

Enclosed for your approval and forwarding to the Committee is the original of a memorandum containing a response to one of the Committee's requests.

A copy of this memorandum is being provided for your records.

anclosures (2)

62-116395

1 - The Deputy Attorney General Attention: K. William O'Connor Special Counsel for //d Intelligence Coordination

HWD: lekick.

(10)

**LENGLOSURA** 

TELETYPE UNIT

GPO: 1975 O - 569-929

isoc. Dir.

7. Dir.:

Inspection Laboratory

.omp. Syst. Ext. Affairs Files & Com.

len. AD Adm. \_

pp. AD Inv. \_

The Attorney General

#### NOTE:

This matter has been coordinated with James E. Reilly, Training Division, who had contacted the various division representatives in an effort to obtain the specific forms requested by captioned Committee. During the canvass of division representatives throughout the Eureau, certain concerns were expressed concerning the furnishing of a few select forms to the Committee. However, after discussion regarding this matter, it was concluded that these specific forms would not endanger any sensitive methods or techniques currently being utilized by this Eureau. SA Howard W. Dare, Jr. has personally reviewed each form requested by the Committee and is in agreement with the above-mentioned conclusion. It should be noted that the Committee in its request for certain forms listed FD-185a - Performance Rating Guide for Clerical Personnel. FD-185a refers to Performance Rating Guide for Investigative Personnel. FD-185b refers to Performance Rating Guide for Clerical Personnel. Therefore, both FD-185a and FD-185b are being made available for the Committee staff, since it is not clear as to exactly which form the Committee desires. following divisional representatives approved making available for review to the SSC attached respective divisional forms.

Division 1 - Frank B. Still

Division 2 - No Forms

Division 3 - Fred Woodworth

Division 4 - Homer Hauer

Division 5 - Howard W. Dare and Robert A. Bermingham

Division 6 - No Forms

Division 7 - Kier T. Boyd & John P. Wilgus

Division 8 - Edward H. Gooderham

Division'9 - No Forms

Division 10 - J. Allison Conley

Division 11 - No Forms

Division 12 - Charles D. Neudorfer

NOTE CONTINUED PAGE THREE

The Attorney General

## NOTE CONTINUED:

After a review of the attached "FD" and "O" forms, by James E. Reilly and SA Howard W. Dare, Jr., it appears that no reason exists to deny the SSC access to these forms.

•

2 - Mr. J. A. Mintz (1 - Mr. J. B. Hotis)

1 - Mr. W. R. Wannall

1 - Mr. W. O. Cregar

1 - Mr. J. E. Reilly

1 - Mr. H. W. Dare, Jr.

UNITED STATES SENATE SELECT COMMITTEE TO STUDY GOVERNMENTAL OPERATIONS WITH RESPECT TO INTELLIGENCE ACTIVITIES

RA: FILING SYSTAN

Reference is made to memorandum from captioned Committee dated April 30, 1975, and the appendices thereto, which contained requests for documents and other information from the FBI. In connection with Part four, concerning the FBI's filing system and printed forms utilized by this Bureau, a response was made to your request by our memorandum dated May 22, 1975, which forwarded to you Tables of Contents setting forth FBI forms currently being utilized.

Pursuant to subsequent request of Staff Member Mark Gitenstein that certain FBI forms be made available for review, please be advised that we currently have such material available for review at FBI Headquarters by appropriately cleared personnel of the Committee.

1 - The Attorney General

62-116395

HWD: lek/ck ORIGINAL AND COPY SENT THE ATTORNEY GENERAL

| Assoc. Dir (9)           |  |
|--------------------------|--|
| Dep. AD Adm              |  |
| Dep. AD Inv              |  |
| Asst. Dir.:              | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \                    |
| Admin.                   |  |
| Comp. Syst               |  |
| Ext. Affairs             |  |
| Files & Com              |  |
| Gen. Inv                 |  |
| Ident.                   |  |
| Inspection               | N 69-  |
| Intell                   |  |
| Laboratory               | $(\mathcal{V}_{0}, n) = (\mathcal{V}_{0}, n)$            |
| Plan. & Eval             |  |
| Spec. Inv.               |  |
| Training                 | ENCLOSURE  |
| egal Coun                |  |
| Telephone Rm             | TELETYPE UNIT [ ] / / 3 / 3 = 348 GPO : 1975 0 = 569-920 |
| Director Sec'y MAIL ROOM | TELETYPE UNIT [ ] ( ) / ) - 34 8 GPO: 1975 O - 569-920   |
| 55033 DocTd:39989613     | Page 5   |

# TELD DIVISION FORMS)

|                      | TELD DIVISION FORMS)  |
|----------------------|---|
| Volume I             |   |
| FD-1c×               | Assignment Card   |
| FD-4 X               | Routing Slip  |
| FD-9 🗡               | Identification Record Request for Sille Marke   |
| FD-29a               | Routing Slip  Identification Record Request  Administrative Report  Explanation of Charge for Information  SSC report  Fun Sign Marke  Much Gatestan  HWD |
| FD-37.               | Explanation of Charge for Information (HW)  |
| FD-56.               | Stop Notice   |
| FD-57.               | Mail Cover Index Card   |
| FD-61                | Identification Order or Check Circular Request  |
| FD-67.               | Acknowledgment of Transfer Orders   |
| FD-122 X             | Recommendation for Preparation of, or change in, ADEX Card  |
| FD-128.              | Letter Changing Office of Origin in Security Cases  |
| FD-132 💥             | Request for Approval of Local Police School and/or Assignment of Bureau Instructors   |
| FD-159               | Record of Information Furnished Other Agencies  |
| FD-160.              | Indices Search Slip   |
| FD-165               | FBI Field Office Wanted-Flash-Cancellation Notice   |
| _FD-1862 (b)         | Performance Rating Guide for Clerical Personnel   |
| FD-186X              | Memorandum re Posting of Information on ADEX Card   |
| FD-190 <b>X</b>      | Interview Form  |
| FD-192 <b>X</b>      | Bulky Exhibit - Inventory of Property Acquired as Evidence  |
| FD-193               | Report of Exit Interview and Separation   |
| FD-65 Y<br>Volume II | Fugitive Form Letter  |
| FD-203*              | Memorandum Requesting Investigation in Security Cases and Extremist Matters   |
| FD-204 X             | Investigative Report  CLASSIFIED BY SPA Pun   MMF  DECLASSIFY ON: 25X 6  MOR-16  (2-1/6-3-7)-348  |
| W 55033 DocTd:3      | 32989613 Page 6   |

FBI Form Book (cont.)

## Volume II (cont.)

FD-209 \( \) Memorandum for Recording Contacts with Criminal, Extremist, and Security Informants

FD-220 Deserter Fugitive Airtel

FD-220aX Deserter Fugitive Airtel (copy for Armed Forces)

FD-221X Confidential Fund Receipt Executed by Special Agent

FD-221a Request for Funds for Payment to Informant

/FD-237X Criminal Informant Review Sheet

/FD-238X Security Informant Review Sheet

FD-251 Film Pack Log

FD-263X Cover Page Accompanying Investigative Report

FD-264 Job Qualification Statement of Position of Radio Maintenance Technician

FD-297% Log for Technical Surveillance

## Volume III

FD-302 Form for Reporting Information That May Become Testimony (preinserted carbon)

\_FD-305X Last Cover Page for ADEX Report

FD-306 Cover Sheet for Informant Report or Material

FD-318X Questionnaire for Applicants for Radio Maintenance Technician Positions

FD-320 FBI Case Status Form

FD-334 Crypto Log

FD-338% Intraoffice Memorandum re Destruction of Channelizing Memoranda after Inclusion in Reports

FD-338a Intraoffice Memorandum re Destruction of Channelizing Memoranda under 1-Year Rule

FD-342 Dissemination Routing Slip - Local Intelligence Agencies

/\_FD-406.\\

FD-432 Photograph Album, Extremist or Arab

FD-432a Cover Letter for Form FD-432

FORT BOOK (CORC.). Volume IV. (cont.) Quarterly Statistical Report of Security Informants \_FD-439 ง SOBIR - INS Record Check FD-449 X Computerized Telephone Number File (CTNF) Entry and Search FD-450J Request /FD-451 Security Informants, Assets, and Sources Monthly Status Report Security Informant and Asset Accomplishments FD-451a 🔊 /FD-451b Areas of Informant and Asset Development FD-460, Request for Advance of Funds FM Radio Installation Data FD-463 FD-464 Identification or Credential Card Request FD-472 Telephone Device Consent FD-473 Body Recorder/Transmitter Consent FD-478 List of Files Destroyed Files and Records Destruction Order

Volume V

Wanted-Flash-Cancellation Notice

## IDENTIFICATION DIVISION

## Volume I

1-39 X Stop Notice

Technical Section

1-40 X Letter Advising Domestic Contributors of Results of Fingerprint

Searches Conducted in Foreign Countries (thin white discontinued -

per Goodwin 5/16/72 - GR/fk)

Recording Section

1-42 X Stop Notice

Card Index Section

## Volume V

Routing Slip to Security Office or Intelligence Unit of Federal Agencies re Sex Perverts and Persons Arrested for Major Crimes

Posting Section

# ADMINISTRATION DIVISION

| Volume II  |  |
|------------|--|
| 3-117      | Analysis of Separation - Field Office and FBIHQ Personnel<br>Section, Personnel Services Unit, Personnel Actions Sub-<br>division  |
| Volume III |  |
| 3-313      | Automobile Sign-in and Sign-out Record (formerly 2-99) and prior to that 3-313) Mechanical Section   |
| 3-339      | Confidential Material Receipt Mechanical Section, Stock Room   |
| Volume IV  |  |
| 3-501      | Credential Work Sheet<br>Exhibits Section  |
| Volume V   |  |
| 3-556      | Car Schedule<br>Front Office, Administrative Review Unit   |
| Volume VI  |  |
| 3-617      | Telephonic Request re Credit or Service Record Inquiry Personnel<br>Section, Personnel Services Unit, Personnel Actions Subdivision  |
| 3-618 🗶 .  | Routine Resignation Acceptance Letter - Employment Agreement Fulfilled (thin white and M&T blocked yellow available) Personnel Section, Personnel Services Unit, Personnel Actions Subdivision     |
| 3-619      | Routine Resignation Acceptance Letter - Employment Agreement Not Fulfilled (thin white and M&T blocked yellow available) Personnel Section, Personnel Services Unit, Personnel Actions Subdivision |
| 3-625 🗶    | Check-off List re Leads in Bureau Applicant Investigations<br>Personnel Section, Personnel Services Unit, Personnel Briefing,<br>SAC Memoranda and Agent Reallocation Unit                         |

## FILE AND COLMUNICATIONS DIVISION

| Volume I                                 |   |
|--|---|
| 4-22                                     | Search Slip Records Section, Name Searching Unit Service Unit   |
| 4-22b                                    | Search Slip (short) Records Section, Name Searching Unit  |
| 4-31 🗡                                   | Stop Card Records Section, Mail Room  |
| 4-50                                     | Serial Charge-Out<br>Records Section, Personnel Records   |
| 4-56                                     | Stop Card Records Section, Personnel Records Routing Unit   |
| 4-91                                     | Mail or Abstract Request Records Section, Consolidation Numbering   |
| Volume III                               |   |
| AOTOME 111                               |   |
| 4-312                                    | Permanent Serial Charge-Out (JUNE Mail) Records Section, Filing Unit  |
| 4-356                                    | Agent Cover Sheet for File<br>Records Section, Personnel Records  |
| 4-508                                    | Individual Record for Work on Expedite Processing Records Section, Routing Unit                               |
|  |   |
| Volume IV                                |   |
| 4-650                                    | Memorandum to Determine Continued Maintenance of File in Special File Room                                    |
| ••                                       | Records Section, Filing Unit  |
| 4-651 <del>\</del><br>4-674 <del>\</del> | Expedite Processing Removal Record Records Section, Routing Unit  |
| 4-674                                    | Serial Removal Charge Out - National Security<br>Electronic Surveillance File<br>Records Section, Filing Unit |
| 4-677                                    | "Expedite Processing" Inquiry Records Section, Routing Unit   |

## Volume I

Memorandum Transmitting Source 3 Material to the National Security Agency (unblocked original) 76

## Volume II

7-50

Frequency Count Form

Technical Equipment Form (thin white and M&T blocked yellow

available)

Technical Experience (Performance Ratings) Engineering Unit, Radio Engineering Section

Letter Requesting Technical Information and Specifications

(bond, thin white with heading, and M&T blocked thin yellow available)

All Sections

## Volume III

COMSEC (Communications Security) Equipment Status Cryptanalysis-Gambling-Translation Section

7-116

Transmittal Letter for Return of Documents to Department of Housing and Urban Development (thin white and M&T blocked yellow available - per Mortimer 8/1/71)

Document Section

Certification Concerning Use of Voiceprint Examination Results (white bond only) Radio Engineering Section, Security - Countermeasures Unit

#### INTELLIGENCE DIVISION

All forms included in this section.

## EXERNAL AFFAIRS DIVISION

## Volume I

8-25

Christmas Card Record Showing Number of Cards for Different Years - Sent, Received, Acknowledged (3x4 13/16 inches - per instructions of Miss Gandy) available in white for Director's personal cards; available in yellow and pink for use in Correspondence and Tours Section, External Affairs Division; formerly 4-406) Director's Office; Correspondence Unit, Correspondence and

Volume II

8-119

Letter to Field Requesting Interesting Cases (I.C.) Publications Unit, Research Section

8-159

Media Contact Card Front Office, Research Section

Tours Section

8-160

Perforated Mail Tag for Director's Office and Mail Room (green) Correspondence Review Unit, Correspondence and Tours Section

## INSPECTION DIVISION

Volume I

Record of Inspection (Field, Foreign Office, or FBIHQ Division) (formerly 2-31) 10-3

10-6a X Inspectors Master Case Sheet (Informants)

10-16 Inspectors' Informant Rating

## PUTER SYSTEMS DIVISION

| Volume I |   |
|----------|---|
| 12-7     | Confidential Voucher Register (Office) (formerly 3064) Data Processing Section, Voucher Unit                                  |
| 12-12    | Letter re Advance of Funds (formerly 3-169) (thin white and unblocked yellow available) Data Processing Section, Voucher Unit |
| 12-19    | Confidential Receipt (formerly 3-308) (white bond and green bond - 25 sets to a book) Data Processing Section, Voucher Unit   |
| 12-20    | Payments to Informants Work Sheet (formerly 3-318) Data Processing Section, Voucher Unit                                      |
| 12-24    | Weekly Divisional Count of Employees (formerly 4-337, 3-392)<br>Data Processing Section, Personnel Statistics Subunit         |
| 12-35    | ADEX Card (formerly 4-590, 3-435) (white, buff, green, yellow, blue - per Mr. Davis 9/19/72) Data Processing Section, ADPU*   |

## Volume II

Agent and Squad Performance (formerly 3-571)
Data Processing Section, ADPU\*

|            | · · // str     |   |
|------------|----------------|---|
|            | Volume I       |   |
|            | 0-2            | Memorandum for Data Processing Section  |
| •          | 0-4            | Invoice of Contents (thin white)  |
|            | 0-4a           | Invoice of Contents (yellow copy of 0-4)  |
|            | 0-7, *         | Routing Slip to the Field (consolidated with 0-24 and 0-25)   |
|            | 0-14           | Routing Slip from Bureau to Other Government Agencies   |
| <u>/</u>   | 0-14e          | Routing Slip to: Director Central Intelligence Agency Attention: Chief, Personnel Security Division |
|            | 0-14f          | Routing Slip to: Director Central Intelligence Agency Attention: Deputy Director for Operations     |
| <u>/</u> _ | 0-14h <b>X</b> | Routing Slip to: Assistant Chief of Staff for Intelligence Department of the Army                   |
| _          | 0-14w          | Routing Slip to: Director, NSA  |
|            | Volume II      | Routing Slip to: US ARMY Intelligence Command DELETED 4/30/75                                       |
|            | 0-41           | Abstract (yellow and pink)  |
| ĺ          | 0-75           | Reply to Department re Technical Coverage Division V and IX $D \in I \in I$ (deleted 4/29/75)       |

This document is prepared in response to your request and is not for dissemination outside your Committee. Its use is limited to official proceedings by your Committee and the content may not be disclosed to unauthorized personnel without the express approval of the FBI.

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#### INTELLIGENCE DIVISION

for sleft mark fresh mark Gatersler

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IS-1, IS-2, IS-3

5-6

ROUTING SLIP (Par. 6/19/75)

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ROUTING SLIP

5-9 **F** 

ROUTING SLIP

5-9a

ROUTING SLIP

5-10 L

ROUTING SLIP

5-15

ROUTING SLIP

5-18 \*

ROUTING SLIP

5-31 / ...

Letter to the Commissioner, RCMP, Requesting Investigation in Canada (thin white letterhead available) CI-3, CI-4

5-32

Publications Subscriptions Record IS-3

5-34 V ....

Letter to Field re Foreign Police Cooperation Cases (RCMP) (thin white available)

CI-3, CI-4

Letter to the Commissioner, RCMP, Transmitting Results of Investigation (thin white letterhead available) CI-3, CI-4

|   | 5-46   | Russian Official Index Card CI-1   |
|---|--------|--|
|   | 5-59 \ | Work Status Report<br>CI-2   |
|   | 5-59b  | Work Status Report CI-1  |
|   | 5-63   | Report Register IS-2   |
|   | 5-78   | ROUTING SLIP   |
|   | 5-80 / | Monthly Statistical Tabulation CI-1, CI-2  |
|   | 5-81   | Monthly Recapitulation CI-1, CI-2  |
|   | 5-86   | Soviet Diplomatic Couriers Arrival - Departure Record CI-1                           |
| - | 5-86a  | Follow-up Sheet for Soviet Diplomatic Couriers<br>Arrival - Departure Record<br>CI-1 |
| • | 5-87   | ROUTING SLIP   |
|   | 5-88   | Stop Notice Deleter 5-14-75  |
|   | 5-90 \ | Mail Count Analysis CI-1, CI-2, CI-3, CI-4, IS-1, IS-2, IS-3                         |
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| 5-113 /      | Informative Note (4x5\frac{1}{4}) CI-1, CI-2, CI-3, CI-4 IS-1, IS-2, IS-3              |
| 5-113a V     | Informative Note (51x8) CI-1, CI-2, CI-3, CI-4 IS-1, IS-2, IS-3  Deliter 5-14-35       |
| 5-118 2.9.1/ | Index Card - Eureau Informant 200 Program CI-1   |
| 5-122 Verf.  | Reevaluation of Cases Concerning Soviet-bloc and Yugoslav Officials in U. S. CI-1      |
| 5-123 V      | Periodic Record - Foreign Folice Cooperation Matters (thin white available) CI-3, CI-4 |
| 5-128/       | Xerox Requisition<br>CI-1, CI-2, CI-3, CI-4<br>IS-1, IS-2, IS-3<br>WFO                 |
| 5-137 \div   | Routing Slip to Defense Intelligence Agency (DIA) CI-1, CI-2, CI-3 IS-1, IS-2          |
| 5-138 /      | Routing Slip to Director, EUR/SES, Department of State CI-1, CI-2 IS-2                 |
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CI-1, CI-2

Data re Soviet-bloc Subjects (for Washington Field Office) (white bond with red ink) CI-1, CI-2 Data re Soviet-bloc Subjects (for San Francisco Office) (white bond with red ink) CI-1, CI-2 Data re Soviet-bloc Subjects (for Chicago Office) (white bond with red ink) CI-1, CI-2 5-163 Transmittal Communication to LEGAT Offices re Information for Extremist Photograph Album IS-1 5-164 Special Records Form IS-3 5-165 Routing Slip to Director, Office of Investigations and Security (Commerce)

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#### INTELLIGENCE DIVISION

SSC reguett from Sliff Parter mark Godersten Aug

(Forms used in Offices of Legal Attaches)

## VOLUME III

LEG-1 .... Foreign Transmittal Card (formerly 5-21) (3x5 card)
CI-4

LEG-2 .... Office Advance and Expenses (formerly 5-43) (white bond CI-4

LEG-2a V.... Expense Account (totals sheet used in connection with LEG-2; formerly 5-5la and 5-43a) (white bond) CI-4

LEG-5 .... Transmittal Letter to Burcau Enclosing Material for Translation (formerly 5-119) (original on thin white; unblocked thin yellow available)

CI-4

LEG-6 .... Routing Slip for Routine Correspondence with Outside Agencies (formerly 5-135) (white bond)
CI-4

LEG-7 .... Letter to Bureau Indicating Dissemination of Security Information to Foreign Agencies (formerly 5-142) (original on thin white; unblocked thin yellow available)

CI-4

LEG-8 .... Report on Funds Spent Abroad (formerly 3-549)
(white bond)

LEG-9 .... Name-Check Request (thin white only)

 $5\text{-}140\,\mathrm{(Rev.\ 1\text{-}21\text{-}74)}$  federal bureau of investigation WASHINGTON, D. C. 20535

| Addressee: SENATE SELECT COMMITTEE 2   |
|--|
| LTR XLHM Memo Report dated 7./25/75 V. S. Senate Select Committee. Re: Filing System. (Part 4, SSC request |
| 4/30/75).  |
| Originating Office: FBT  |
| Delivered by: Richard is raylor, Date: 1/8/75 mi   |
| Received by:   |
| Title: Many  |
| Return this receipt to the Intelligence Division, FBI  |

ALL INFORMATION CONTAINED DATE 16/10/2000 VSP2 PM

File 5-116395-



SEE INSTRUCTIONS ON REVERSE BEFORE COMPLETING.

CLASSIFY AS APPROPRIATE TO: Intelligence Community Staff FROM: ATTN: Central Index Federal Bureau of Investigation SUBJECT: Abstract of Information Provided to Select Committees HOW PROVIDED (check appropriate term. If a document was made available 2. DATE PROVIDED for review but not transmitted, so note.) 7/2/75 DOCUMENT BRIEFING INTERVIEW TESTIMONY OTHER 3. TO WHOM PROVIDED (check appropriate term; add specific names if appropriate) Charity Benz, Office Manager X SSC 4. IDENTIFICATION (provide descriptive data for documents; give name or identification number of briefer, interviewee, testifier and subject) Filing system 5. IN RESPONSE TO (list date and item number if in response to formal request, other-

wise state verbal request of (name), initiative, subpoena, etc.)

SSC letter 4/30/75

6. CLASSIFICATION OF INFORMATION (enter U, C, S, TS or Codeword)

\*\*\*\*\*

KEY WORDS (enter the appropriate key words from the list provided separately; if key words not listed are used underline for emphasis)

## Operating procedures

8. SUMMARY (see reverse side before completing this item)

At SSC request, Committee was furnished for review a representative number of FBI forms used during course of FBI operations from an administrative and investigative standpoint.

ALL INFORMATION CONTAINED HEREIN IS UNCLUSESIFIED
DATEIO/IO/AGOD DYSPAPIM

62-116395

TRATAS VELON

5-75m

TJM:1hb (4)

ORIGINAL VIA LIAISON TO CENTRAL COMMUNITY INDEX IN CONNECTION WITH SENSTUDY 75.

CLASSIFY AS APPROPRIATE

3791 (6.75)

#### INSTRUCTIONS

- Type or print clearly in ink.
- Indicate classification of the abstract top and bottom.
- Date the abstract and put on any internal control numbers required.
- "FROM" entry should clearly identify the organization providing the information.
- If additions (as when a copy of document sent to SSC is later sent to HSC) or changes to a previously submitted form are necessary, submit a copy of the original abstract, with the change indicated.

SPECIFIC ITEM NO. 8. SUMMARY — enter brief narrative statement describing substance of information and showing relationship to Intelligence Community matters if appropriate. Any feedback or evidence of investigatory interests should be noted. Commitments made to supply additional information should be noted. Additionally, certain administrative information may be entered here, e.g., restrictions on review of a document, if document was paraphrased, whether interviewee is current or former employee, etc. If actual document or transcript is provided, that fact should be noted and no summary is required. Additional pages may be attached if necessary.

Title

File No.

Date Rec.:

Buded:

Assigned to (date) Reassigned to (date)

FR-1C (Rev. 1 - 20 - 58)

ALL INFORMATION CONTAINED
HEREIN IS TOCKASSIFIED
DATE 10 05 0000 BYSPA PM / MC

62-116395

55033 DocId:32989613 Page 27

| Routing Slip FD-4 (Rev. 3-1-73) To: Director | Date                                  |
|--|---------------------------------------|
| Att.:  | — FILE                                |
|  |                                       |
| SAC  | Title                                 |
| ASAC   |                                       |
| Supv   | _ I L                                 |
| Agent  | F. 4                                  |
| SE   | +)-                                   |
| □ SC   |                                       |
| CC   | RE:                                   |
| Steno  |                                       |
| Clerk  | Rotor #:                              |
| —  | CTION DESIRED                         |
| Assign Reassign                              | ☐ Open Case<br>_ ☐ Prepare lead cards |
| Bring file                                   | Prepare tickler                       |
| Call me                                      | Return assignment card                |
| Correct                                      | Return file                           |
| Deadline                                     | Search and return                     |
| Deadline passed Delinquent                   | See me                                |
| Discontinue                                  | Post Recharge Return                  |
| Expedite                                     | Send to                               |
| File   | Submit new charge out                 |
| For information                              | Submit report by                      |
| Handle                                       | Туре                                  |
| Initial & return                             |                                       |
| Leads need attention                         |                                       |
| Keturn with explanation or                   | notation as to action taken.          |
|  |                                       |
| ል ቁ ቁ - ምቁምርበ <b>/</b> ንግን እ <i>ኛ ላ</i> የአገን | THE CONTRACTIONS                      |
| ALL INFORMATION HEREIN IS UNCL               | ASSIFIED \ \                          |
| DATE ODS HOW                                 | BXSBY M                               |
| 1 , 2  | DR-16                                 |
|  | SAC                                   |
| Seë reverse side                             | •≯                                    |

| 4 |  |
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| 7 |  |



#### INSTRUCTIONS

- 1. This form may be submitted in legible hand printing.
- 2. Use separate form for each individual on whom record is requested.
- 5. Indicate office for reply in lower right corner only. Also list in lower right corner all offices which should receive copies of available records. Include carbon of FD-9 for each office receiving copies and forward with original to Bureau.

| mil<br>4. Fur<br>onl | enforcement ider<br>itary service num | data and fingerprin<br>er not available.<br>Atte | or<br>t classification<br>ntion:  dentifi | 1                | prward with original to Bureau to block in lower left corner.  Date  Field File No  f the Following: |                                       |
|----------------------|---------------------------------------|--|---|------------------|--|---------------------------------------|
| Aliases              |                                       |  |   | Other No.        |  |                                       |
| Sex                  | Race                                  | Birth Date                                       | Birthplace                                |                  | Residence  | ·                                     |
| Height               | Weight                                | Build  | Hair                                      | Eyes             | Complexion   | Age                                   |
|                      |                                       | Y  |   | ) -              |  |                                       |
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| ldentifi             | cation Divisio                        |  |   | Return Reply to: |  | · · · · · · · · · · · · · · · · · · · |
| On                   |                                       | n's Reply<br>mation furnished                    | 1,  | Return Reply to: |  | <u>-</u>                              |



#### ADMINISTRATIVE REPORT

| DAGE |  |
|------|--|

| Office         |                             |                  |                  |         | T                |                                  | M      | fonth           |         |         | Year        |      |
|----------------|-----------------------------|------------------|------------------|---------|------------------|----------------------------------|--------|-----------------|---------|---------|-------------|------|
|                | 1                           | 2                |                  | 3       | 4                | 5                                |        |                 |         |         | <del></del> |      |
| CLASSIFICATION |                             | ===              |                  |         |                  | MATTERS PENDING AT END OF PERIOD |        |                 |         |         |             |      |
|                | TOTAL<br>MATTERS<br>PENDING | MATTE<br>RECEI   |                  |         | TOTAL            |                                  | HERE   |                 | ОТН     | ER OFFI | CES         |      |
|                |                             | DURING<br>PERIOD | lG               | GRAND   | MAT-<br>TERS     | ACTIVE   INACTIVE                |        | ACTIVE INACTIVE |         |         |             |      |
| ASSI           | BEGIN-                      |                  | (b)              | TOTAL   | CLOSED           |                                  | UN-    |                 |         | UN-     |             |      |
| ٦<br>٦         | NING OF<br>PERIOD           |                  | Other<br>Offices |         | DURING<br>PERIOD |                                  | ASGND. | ASGND.          | .ASGND. | ASGND.  | ASGND.      | TOTA |
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## BLUE SLIP

|   | Date:  |                                       |
|---|--|---------------------------------------|
|   | Place:   |                                       |
|   | !7   | EM NO                                 |
| I certify that \$                             | was p  | aid (per attached Form FD-221)        |
| to  |  |                                       |
| on  | in connection  | with an official investigation        |
|   |  |                                       |
|   |  |                                       |
| and that payment was made as e                | explained below.   |                                       |
| Authority:                                    | <del>1010 to 1700 to 1000 </del> |                                       |
| Period Covered:                               |  |                                       |
| Receipt Attached:                             | Have payments been made by If Yes, list Offices under <u>deta</u>  | other Offices?   Yes   No<br>ills.    |
| Services: \$                                  | Federal Income Tax Withheld \$   |                                       |
| Expenses: \$                                  | _  |                                       |
| Total: \$                                     | <del>_</del>   |                                       |
| Details:                                      | 1  |                                       |
|   | <u> </u>   |                                       |
|   | 15/  |                                       |
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|   |  | · · · · · · · · · · · · · · · · · · · |
| ALL INFORMATION COM                           | TAINED   |                                       |
| DATE 10 DY SOO BYS                            | 33 pm /mt  |                                       |
| 7.1010  |  |                                       |
| Approved:                                     | Signed   |                                       |
| Disapproved:                                  | Title  |                                       |
| Assistant Director<br>Administrative Division | Approveds  | pecial Agent in Charge                |

NW 55033 DocId:32989613 Page 31

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| STOP NOTICE<br>FD-56 (Rev. 11-9-66)  |                     |
|--|---------------------|
| 00   | (File & Serial No.) |
| (Subject or  | Property)           |
|  |                     |
| PLACED BY (Office)   | (File No.)          |
| VIA((Identify communicatio   | n placing stop)     |
| ON Win   | ГН                  |
| ,  |                     |
| ALI, INFORMATION CONT<br>HERE, A IS UNCLASSIFIED<br>DATE 10 04 0016 BY 320<br>MOR - 11 | D \\                |

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|  |               |   | <b>,</b> | :        | •      |  |
|--|---------------|---|----------|----------|--------|--|
| City                                     |               |   | File 8   | z Serial | Number |  |
| Name of Person                           |               |   |          | Secu     | rity   |  |
| Address                                  |               |   | Fugitive |          |        |  |
|  |               |   | [        | Othe     | r      |  |
| Date Cover Placed                        | Period        |   |          |          | la .   |  |
|  | From -        | Т | 'o ~     |          |        |  |
| Placed by                                | <u> </u>      |   |          |          | -11    |  |
|  |               |   | •        | -        |        |  |
| _  | Special Agent |   |          |          |        |  |
| Mail Cover Index Card<br>FD-57 (6-25-73) |               | , |          |          |        |  |

HEREIN IS UNCLASSIFIED

DATE 10 00 A006 BY SPA Rum DMF // >

MOR-16



UNITED STATES GOVERNMENT

# Memorandum

TO

: Director, FBI

DATE:

FROM

: SAC,

SUBJECT:

PD-61

It is requested that an \_ Identification Order \_ Check Circular be issued for

#### Complete the following:

1. Reasons why this action believed desirable:

- 2. A. Has inquiry been made of all Motor Vehicle and Driver License Bureaus for possible information concerning fugitive under his true name and known aliases?
  - B. Have all dispositions of arrests been obtained? If not, what action has been initiated to obtain dispositions?
- 3. Name and aliases (Subject's complete true or legal name should appear first, followed by all aliases in alphabetical order with any nicknames in alphabetical order after aliases):

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE O OY AGO BY SPANM MAC

- 5. Offense (Set out here only character of those offenses for which Federal process outstanding):
- 6. Description:

Age:

Date and place of birth and how verified (Verify through appropriate Bureau of Vital Statistics, wherever possible):

Height:

Weight:

Build:

Hair:

Eyes:

Complexion:

Race:

Nationality:

Occupation(s):

Scars and Marks:

Remarks (Include any characteristics or traits which would assist in identifying subject):

Social Security Number(s) Used:

- 7. Photograph(s), number enclosed and the year taken (Submit negative or original photograph, where available. Clearly label each. Indicate best likeness and basis):
- 8. Caution statement (where applicable), including basis:

#### 9. Federal process:

A. All outstanding process must be accurately described. Set out (1) whether by complaint, indictment or information; (2) date and place filed or returned; (3) name in which process issued; (4) U. S. Code, Title and Section; (5) crime charged, and (6) date and place warrant issued. If more than one Federal process, set out on separate sheet to be attached above information on each additional process.

- B. Date Federal process last checked and found to be outstanding:
- C. Date U.S. Attorney last contacted to insure he would remove and prosecute upon apprehension. If Unlawful Flight to Avoid Prosecution case, show instead most recent date local authorities indicated willingness to prosecute and date local process verified, and in all Unlawful Flight cases, most recent date local authorities indicated willingness to extradite:

10. Interesting Narrative (Set out brief narrative of information concerning the subject's background, including details of the crime for which he is being sought. In case of a check circular, set out, in addition, a specific paragraph under heading "Modus Operandi" which you are recommending for use on check circular).

FD-67 (Rev. 2-14-74) UNITED STATES GOVERNMENT Memorandum TO : Director, FBI Attn.: Movement Unit FROM SUBJECT: OF TRANSFER ORDERS ☐ ACKNOWLEDGEMENT ARRIVAL NOTICE ReBulet \_\_\_\_\_. Transfer From: Transfer To: Social Security Number Title Arrival on Transfer (time & date) Contemplated Departure Date Reported for Duty Annual Leave En Route New Title & Position Number (Non-Agent Personnel) Contemplated Arrival Date Person to be notified in case of an emergency while en route on transfer (to be furnished when such person and address differ from information previously furnished the Bureau; if employee will be traveling with person who normally would be notified in the event of an emergency, he should furnish name and address of some other person) Relationship Name Address ALL INFORMATION CONTAINED Comments: HEREIN IS UNCLAS DATE 6 6 4 00 16 (Destination) NW 55033 DocId:32989613

FD-122 (Rev. 3-12-74)
OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA GEN. REG. NO. 27

UNITED STATES GOVERNMENT

# Memorandum

| ΓΟ : Director, FBI (Bufile )   | DATE:  |
|--|--|
| FROM: SAC, (   | )  |
| UBJECT:  |  |
| Reference:   | (Two copies of FD-366 are enclosed for the Bureau)   |
| Name   |  |
| Also known as:  Supplemental page attached.  | Sex  |
| Date of Birth (Month, day, year)  Residence Address  | Employment Occupation:   |
| - Address  | Firm & Address:  |
| Type of Activity (Check principal activity only)   |  |
| (CMC) Communist (pro-Soviet)  (CMT) Communist (Trotskyist)   | (FRN) Foreign Affiliation - Specify Country  (PRN) Puerto Rican Nationalist  (REV) Revolutionary (MSC) Miscellaneous |
| ☐ Tab Special Interest ☐ Espionage ☐ Foreign Government Employee ☐ U. S. Government Employee ☐ Remove Special Interest Tabbing | ☐ Place in Unavailable Section ☐ Missing ☐ Out of Country ☐ Imprisoned ☐ Remove from Unavailable Section             |
| Key Facility Data (if applicable)  Geographical Reference Number   | Responsible Agency   |

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10 OVEROUS BY SPARUM (M)





# Memorandum

| TO : Director, FBI (Bufile -  | ) DATE:  |
|---|--|
| FROM : SAC,   |  |
| SUBJECT:  |  |
| The captioned individual has beer   | the subject of a security or extremist investigation by this office. The   |
| as residing and working at the addresses list<br>being considered the new Office of Origin.   | ed below. The Division is  |
| Business Address, Name of Employing Con<br>Nature of Employment, and Union Affiliation  | erm and Address, a, if any.  |
| Key Facility Data Geographical Reference Number   | Responsibility   |
| designated for Identification Division.  A security flash on subject has been Pl The following information, therefore, is   | REVIOUSLY placed in FBI #; therefore, copy of this form is REVIOUSLY placed in Identification Division; however, FBI number is NOT KNOWN. being furnished and a copy of this form is designated for Identification Division. |
| Race:   | Other Identifying Numbers:   |
| Date and Place of Birth:  NOTE: Do NOT designate COPY of FI because no fingerprints located   | Fingerprint Classification:  0-128 for Identification Division if FD-165 previously RETURNED to field office on subject.   |
| FBIHQ. The indicated above and the appropriate case Subject is designated a Key Black Extra Subject is designated a Key Activist. Handwriting specimens have been furni A photograph has been furnished to the Subject is included in the Extremist Ph FD-432 showing the new address and C | emist.<br>Shed to the Bureau.<br>Bureau.<br>otograph Album (EPA). The new Office of Origin should submit a new complete  |
| The following pertinent items are being for Adex Cards Serials (specify) Designated Office of Origin in receipt of 2 copies of FD-366 (1 copy for dissemit to local Secret Service)   |  |
| ALL TO ATTO CONTAIN HER DAI 10 000 515 PON MOR - 1  | RUC<br>NED<br>MED Enc.   |

5010-106

#### UNITED STATES GOVERNMENT

### Memorandum

(To be submitted in triplicate)

TO

: DIRECTOR, FBI

DATE:

Attn:

Training Division

FROM

: SAC,

SUBJECT: POLICE TRAINING SCHOOL

Type:

City:

Agency:

Sponsor:

Over-all Dates:

Classroom Location:

Attendance

Estimate:

The following commitments are being made within this Division, except as otherwise indicated, and Bureau approval is assumed unless advised to the contrary.

(List requested Bureau assignments first)

Hour

Date

Subject

Instructor

KD132

18 1

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 10 04 X010 BY 2001

The lectures set forth on this schedule will be given to \_\_\_\_\_(group or groups) of officers, and therefore will be considered as \_\_\_\_\_(school or schools).



| Orallydate                       | By Telephone        |              | Written Communication |      |
|----------------------------------|---------------------|--------------|-----------------------|------|
| Information concerning:          |                     | date         |                       | date |
|                                  |                     |              |                       |      |
| Information furnished fro        | m File, Serial, and | Page Number: |                       |      |
|                                  |                     |              |                       |      |
| Information furnished wa         | s obtained:         |              |                       |      |
| during during                    | course of Bureau in | nvestigation |                       |      |
| from in                          | nformants           |              |                       |      |
| from co                          | omplainants or othe | rsources     | •                     |      |
| Information furnished to:        |                     |              |                       |      |
|                                  |                     |              |                       |      |
| Number of items dissemi          | nated:              | _ /          | 0                     |      |
| Remarks:                         |                     | ١٤           |                       |      |
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| ALL INFORMATI<br>HEREIN IS JINCI | ON CONTAINED        |              |                       |      |
| W. Flolon Barrers                | LBYSPAPINITION IN   | 4            |                       |      |

Special Agent

Indices Search Slip FD-160 (Rev. 3-23-71)

|  |  |   | Date            | <del></del>   |               |                                       |
|--|--|---|-----------------|---------------|---------------|---------------------------------------|
| TO: CHIEF CLERK  |  |   |                 |               |               |                                       |
| Subject  |  |   | Social Security | Account #     | ·             |                                       |
| ,  |  |   |                 |               |               |                                       |
| Aliases  |  |   | <u> </u>        |               |               |                                       |
| Address  |  | Birth Date                                  | Birthplace      |               | Race          | Sex<br>Male                           |
|  |  |   |                 |               | ļ.,           | Fema                                  |
| Exact Spelling All References  | Main Criminal C  | nces Only                                   |                 | Restrict to L | ocality o     | f                                     |
| Main Subversive Case Files ( Subversive References Only  |  | (If no Main, list of<br>f no Main, list all |                 |               |               |                                       |
| File & Serial Number   | Remarks  | File & Seri                                 |                 | ences)        | Remarks       |                                       |
| . He & Belld Number  | remarks  | 1 He & Bell                                 |                 |               | - Tremura     |                                       |
|  |  |   |                 |               |               |                                       |
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|  |  | IU  |                 | -             |               |                                       |
|  | 7/17   |   |                 |               |               |                                       |
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| ALL DIFORMATION OF DATE OF OUR SOLUTION OF STATE | ONTAINED   |   |                 | <del> </del>  |               |                                       |
| MOR  | SPapun   |   |                 | 1             |               |                                       |
| Requested by   | b the state of the | Squad                                       | Extension       | File No.      |               |                                       |
| Searched by  |  |   |                 |               |               |                                       |
| -  | (da  | te)   |                 |               |               |                                       |
| Consolidated by  |  | (a)   |                 |               |               |                                       |
| Reviewed by  | (dat   | se)   |                 |               |               |                                       |
|  | (dat   | e)  |                 |               |               |                                       |
|  | - Not identifiable   |   |                 |               |               |                                       |
| NI - Not identical U   | - Unavailable reference  | ₹ GPO: 1971—O-423-290                       | -               |               |               |                                       |

NW 55033 DocId:32989613 Page 43

| FĎ-165 (Rev. 6- | 17-74)                              | Attention: Identi                 | fication Division     |                      |                    |
|-----------------|-------------------------------------|-----------------------------------|-----------------------|----------------------|--------------------|
| 1               |                                     | Affention: Identi                 | rication Division     | Date                 |                    |
| 'O: DIRECT      | OR, FBI                             | ;                                 | RE:                   |                      |                    |
| 'ROM: SAC,      |                                     |                                   |                       |                      |                    |
| Place, C        | ancel, stop (wanted o               | or flash) in files of Identifica  | tion Division.        |                      |                    |
| lf              | expiration date know                | n, enter here                     | and cancellati        | on will be automati  | с.                 |
|                 |                                     | MAW                               | TED                   |                      |                    |
| Wanted f        | or                                  |                                   |                       |                      |                    |
|                 | IN ORDER TO EST                     | FLA<br>FABLISH FLASH NOTICE FI    |                       | REQUIRED IN FBI      | FILES              |
| ADEX            |                                     |                                   |                       |                      |                    |
| Applicat        | ion for Pardon After                | Completion of Sentence            |                       |                      |                    |
|                 |                                     |                                   | LATION                |                      |                    |
|                 |                                     |                                   | <del> </del>          |                      |                    |
| FURNISH:        | Photograph                          | ☐ Identification Reco             | rd                    |                      |                    |
| Name            |                                     |                                   | Aliaso                | 110`                 |                    |
|                 |                                     |                                   | 1 / 1                 |                      |                    |
| FBI No.         |                                     | Other No.                         | アソ                    | 1                    |                    |
| In all ins      | tances when FBI nur                 | <br>mber is known it should be fu | m shed. When it is r  | not known, furnish f | ollowing:          |
| Date of birth   | Place of birth                      | Occupat                           | idn                   | Marital Stati        | 18                 |
| Residence       |                                     | Race                              | Sex                   | Height               | Nationality        |
|                 | ,                                   | Weight                            | Eyes                  | Hair                 | Complexion         |
| Fingerprint cla |                                     | Scars, m                          | arks and peculiaritie | 98                   |                    |
| AL              | S<br>INFORMATION<br>LLIN IS UNCLASS | Corre                             |                       |                      |                    |
| DAT             | E/O FUNCIAS                         | IFIED IFIED                       |                       |                      |                    |
|                 | MOR-1                               | Stopm link                        |                       | RE                   | TAIN PERMANENTLY I |
| ·               |                                     |                                   |                       |                      | 1#                 |
|                 |                                     | Source To Be Notified             | if Information Receiv | ved                  | 18                 |
|                 |                                     |                                   |                       |                      |                    |
| ₹               |                                     |                                   |                       |                      |                    |

#### INSTRUCTIONS:

If an application for pardon after completion of sentence flash is requested, indicate as source to be notified Employees Security and Special Inquiry Section, Special Investigative Division.

If flash is requested for any reason other than those preprinted on this form, utilize block on line provided and indicate specific type of flash notice desired.

If subject's fingerprints are submitted, they should be securely stapled to this form and forwarded to the Identification Division. Cover memo not necessary.

### PERFURMANCE RATING GUIDE FOR INVESTIGATIVE PERSONNEL CHECKLIST AND NARRATIVE COMMENTS (For use as attachment to Performance Rating Form FD-185)

| M           | 1.  |  |   |  |
|-------------|---|--|---|--|
| Name of En  | ployee<br>those items having pertinent bearing on   | employee's performence should be re  |   | is to be compared                      |
| with<br>RAT | current, existing job description requirent<br>E ITEMS AS FOLLOWS: (See Manual of istanding (To warrant overall +, all rated overall +, al | ents.<br>Rules and Regulations for detailed in                                 | structions.)  | o to oo compared                       |
|             | ellent (Overall E must be supported by E  |  | •   |  |
| Sati        | _   |  |   |  |
| _           | atisfactory (If any item so rated, overall of Unsatisfactory rating must be   | supported in writing.  | ı Satisfactory.) Any unsat                              | tisfactory item or overall             |
| No          | opportunity to appraise. In other respons   | es, use "X."   | **************************************                  | ·                                      |
| (Use INK fo | or Checklist - DO NOT TYPE)   | RESPOND TO EVERY IT  | EM  |  |
| 1.          | Personal appearance.  |  |   |  |
|             | Personality and effectiveness of person   |  |   |  |
|             | Attitude (including dependability, cooper<br>Physical fitness (including health, energy<br>employee used more si<br>amount of sick leave en   |  | ns affecting performance?<br>LWOP for illness) during ( | Yes No. Has                            |
|             | Resourcefulness, ingenuity, and initiative Forcefulness and aggressiveness as required.   |  | 95a   | •                                      |
|             | Judgment, including common sense, abil  |  | bility to define objectives                             | •                                      |
|             | Planning of work.   |  |   |  |
| 9.          | Accuracy and attention to pertinent deta  | n.   |   |  |
| 10.         | Productivity, including amount of accept adherence to deadlines, unless failure to  | able work produced and rate of progre  | ess on or completion of as                              | ssignments. Also consider              |
| 11.         | Knowledge of duties, instructions, rules  |  |   | now how" of application.               |
|             | Performance results (rate if applicable a   | nd mark others O)A. Interns  | al Security;B. Crim                                     | ninal or General                       |
|             | Investigative; C. Fugitive; Comment on type of work handled entire performance:   | rating period, including performance   | in other divisions, and ap                              | praisal of overall work                |
|             | performance.  |  |   |  |
|             |   |  |   |  |
|             |   |  |   |  |
|             | ALL INFORMATION HEREIN IS UNCLAUDED DATE 10 01 2000   | SSIFTED AM MAY  BYSPA AM MAY  MOR-16   |   |  |
|             | Complexity of matters handled: Nor  | e Moderate Most compl  | licated   | 10                                     |
|             | D   |  | inimum None   | <b>.</b> .                             |
| report (    | ee signifies by initialing hereafter that do<br>limit this provision to annual, 60-day or 9<br>n description.   | uring the course of receiving the perf<br>0-day reports) employee has read and | ormance rating d understands                            | Employee's<br>Initials                 |
| B. Is emplo | oyee available wherever needs of service  | require for general assignments  | Vac - No Special co-                                    | immont?                                |
| C. Is emplo | oyee qualified to operate a motor vehicle<br>or is "yes," personnel file must reflect th<br>hysically fit to drive. (c) Past safe drivir  | ncidental to official duties?  | Yes No  | —————————————————————————————————————— |
| D. Specify  | general nature of assignment during most<br>supervisor, instructor, etc.):  |  |   | Accountant, or as Resident             |
| ADJECTIVE   | DATING.   |  | FUDI OVERIC INIT: ::                                    | ^                                      |
| ADJECTIVE   | (Outstanding, Excellent, Sati   | sfactory, Unsatisfactory)  | EMPLOYEE'S INITIAL                                      | 3                                      |

|     | Firearms. Check One:QualifiedQualified InstructorExpert  |
|-----|--|
| 14. | Development of informants and sources of information. Comment on weaknesses or justify limited participation.  |
|     | During rating period developed informants; potential informants.   |
|     |  |
| 15. | Reporting: (Consider conciseness, clarity, organization, thoroughness, accuracy, adequacy and pertinency of leads, and administrative detail.)   |
|     | A. Reports; B. Memos, letters, wires.  |
| 16. | Performance as a witness.   During rating period;  Based on past performance;  No experience.  |
|     | Executive evaluation (approved Supervisors, Relief Supervisors, Alternate Senior and Senior Resident Agents; underline applicable.)  |
|     | A. Leadership F. Devising procedures   |
|     | B. Ability to handle personnel G. Promoting high morale  |
|     | C. Making decisions H. Getting results   |
|     | I. Furthering equal employment opportunity   |
| 10  | E. Training subordinates   |
|     | Raids and dangerous assignments; A. As leader; B. As participant.  Miscellaneous. Specify and rate:  |
| 13. | Dictation; Applicant recruitment; Other  |
| 90  | Police Instruction: Qualified Participated Audited   |
|     | Foreign Language Ability: Proficient inlanguage(s). Can handle typical investigative problems as follows:  |
|     | A. Conversation form Excellent Very Good Good Fair Unsatisfactory  |
|     | B. Written form Excellent Very Good Good Fair Unsatisfactory   |
|     | Frequencylanguage ability used during rating period  |
|     | Anticipated use during ensuing year  |
|     | C. Completed Bureau Language School No Yes Specify language(s)   |
| 22. |  |
|     | Administrative Advancement: (Check block if not interested.)  A. Yes No Agent is completely available for administrative advancement.  B. Yes No No Agent is considered qualified for administrative advancement, including experience, ability, personality |
|     | and appearance.  C. If answer to B is "Yes," Agent's qualifications are considered Very Good Excellent Outstanding Explain if interested but not now qualified.  |
|     |  |
| 00  | Number of Incentive Awards   |
| 45. | Commendations received from Director: Individual Through Superior  |
|     | Suggestions submitted  |
|     | If none, check block .   |
|     | in home, check block [].   |

EMPLOYEE'S INITIALS \_\_\_\_

### PERFORMANCE RATING GUIDE FOR CLERICAL PERSONNEL (For use as attachment to Performance Rating Form FD-185)

| Name     | of Em        | olovee  |   |   |
|----------|--------------|---|---|---|
|          | Only         | •   | on employee's performance should be rated. Actual performance irements.   | is to be compared   |
| +        | RATI<br>Outs | E ITEMS AS FOLLOWS: (See Manua<br>tanding (To warrant overall +, all ra   | of Rules and Regulations for detailed instructions.)<br>ted elements must be +, and justified in writing with one page no                 | errative.)  |
| E        | Exc          | ellent (Overall E must be supported b   | y E or + on majority of items, including important elements.)   |   |
|          | Sati         | sfactory  |   |   |
|          |              | Unsatisfactory rating mus   | •   | satisfactory item or overall                                |
| <u> </u> | No c         | opportunity to appraise. In other resp  | onses, use "X."   |   |
| (Use     | INK for      | r Checklist - DO NOT TYPE)  | CHECKLIST   |   |
|          | 1.           | Personal appearance.  |   |   |
|          | 2.           | Personality and effectiveness of pe   | rsonal contacts.  |   |
|          | 3.           | Attitude (including dependability, c  | ooperativeness, loyalty, enthusiasm, amenability, and willingnes  | ss to equitably share work load).                           |
|          | 4.           | Physical fitness - (including health<br>illness) during t<br>If answer is yes,  | , energy, stamina). Has employee used more sick leave (include the rating period than the amount of sick leave earned during the explain. | ng annual leave or LWOP for h pariod? Tyes No.              |
|          | 5.           | Resourcefulness, ingenuity, and ini   | tiative.  | D   |
|          | 6.           | Forcefulness and aggressiveness a   | s required.   |   |
|          | 7.           | Judgment, including common sense,   | ability to a rive at proper conclusions, ability to define objective  | es.   |
|          | 8.           | Planning of work.   |   |   |
|          | 9.           | Accuracy and attention to pertinent   | detail.   |   |
|          | 10.          |   | occeptable work produced and rate of progress on or completion of<br>are to meet is attributable to causes beyond employee's control.     | assignments. Also consider                                  |
|          | 11.          | Knowledge of duties, instructions,  | rules and regulations, including readiness of comprehension and   | "know how" of application.                                  |
|          | 12.          | Supervisory evaluation:   |   |   |
|          |              | (a) Leadership (b) Ability to handle persor (c) Making decisions (d) Assignment of work (e) Training subordinates     | (f) Devising procedures  mel (g) Promoting high morale  (h) Getting results  (i) Furthering equal employment                              | ent opportunity   |
|          | 13.          | Miscellaneous. Specify and rate:  |   |   |
|          |              | Technical or mechanical sk  | ills  |   |
|          | 14.          | Number of Incentive Awards  |   | •   |
|          |              |   | from Director: Individual Through Superior  | ·   |
|          |              | If none, check block .  |   |   |
|          | 15.          |   | Justification for any Unsatisfactory items. (List items taken int   | o consideration on Checklist.)                              |
|          |              |   |   |   |
|          |              |   | (Use space above for any additional comments)   |   |
| Α.       | Describ      | pe general nature of assignment durin   | g most of rating period (such as typing, stenography, secretarial   | , radio operating, translating):                            |
|          |              |   |   |   |
| В.       | Is desc      | rintion of position to which employed   | e assigned current and accurate as described and as operating?  | (If not, identify   |
|          |              |   | , and explain.)   |   |
|          | report (     | ee signifies by initialing hereafter th<br>limit this provision to annual, 60-day<br>n description.                   | at during the course of receiving the performance rating or 90-day reports) employee has read and understands                             | Employee's<br>Initials                                      |
| D.       | must re      | oyee qualified to operate a motor vel<br>flect the following: (a) Has valid S<br>st safe driving record OK or has pas | tate or local operator's license for type vehicle to be used. (b)   | wer is "Yes," personnel file<br>Is physically fit to drive. |
|          | ADJEC        | TIVE RATING:  | HEREIN IS UNCLASSIFIED EMPLOYE  | E'S INITIALS  |
|          |              | (Outstanding  | Excellent TSATISTE 10 104 100 10 10 10 10 10 10 10 10 10 10 10 10   |   |

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| To:   |  | Date:  |
|---|--|--|
| From:   |  |  |
| Subject:  |  |  |
| photograph<br>subject's fi<br>subject ava             | d be placed on the reverse at the most recent one should the reflects there is initially in the facing with th | ctions, directs that the description and photo-<br>side of the ADEX Card. In regard to the<br>be used if there is a choice. A review of the<br>is not a photograph of the above-captioned<br>DEX Card. (If more than one photograph is<br>tigation should indicate the photograph to be  |
| captioned s   | observed and such fact spec  | ctions, requires that ADEX subjects must be ifically noted in the subjects' case files. Has rved? Tyes No. If so, make appropriate   |
| (1)   | Observed by SA   |  |
| (2)   | Date observed  | <u> </u>   |
| (3)   | Personal observation of sul  |  |
| ADEX only<br>should be n<br>subsequent<br>thereby sho | he reverse side of the ADEX those entries necessitating nade in the blanks below. F to his designation for the A   | ata relating to the subject, which data should be Card. If subject is already included in the changes in the data posted on the ADEX Cards or example, if subject is personally observed DEX, any additional descriptive data developed ate spaces to allow their posting on the reverse |
| (1)   | Name and Aliases:  |  |
| (2)   | Sex:   |  |
| (3)   | Race:  |  |
| (4)   | Birth Date:  |  |
| (5)   | Height:  | PRESTION CONTAINED   |
| (6)   | Weight: HEREIN DATE 10   | S UNCLASSIFIED AND MAKE MOR-16   |

| (7)        | Build:  |
|------------|---|
| (8)        | Hair:   |
| (9)        | Eyes:   |
| (10)       | Complexion:   |
| (11)       | Scars and Marks:  |
| (12)       | Peculiarities:  |
| (13)       | Marital Status:   |
| (14)       | Immediate Relatives (including the number of minor children):           |
|            |   |
| (15)       | Nationality:  |
|            |   |
|            | Birthplace:   |
| (17)       | Fingerprint Classification:   |
| (18)       | FBI or Police Number:   |
| (19)       | Social Security Number:   |
| (20)       | Residence:  |
| (21)       | Occupation:   |
|            | Criminal Record, showing sources:                                       |
|            |   |
|            |   |
| (23)       | Seamen's Certificate Number:  |
| Check foll | owing, where applicable:  |
|            | The subject is exceedingly dangerous. The following statement should be |
| :          | added to the reverse side of geographical card.                         |

| 1. Name of applica   | ant   | (b) W   | osition applied fill accept clerk-<br>ils to qualify fo   | typist or clerk i   | if no vacanc  | y exists and/or<br>es  |
|--|---|---|---|---|---|--|
| 3. Field Office  | 4. Interviewing official  |   | view date 6. Pla  |   |   | 7. Recommenda Favorab Unfavora   |
| Special Agent - (  | a) Is applicant willing to serve b) Does applicant have any pe parents, which will prevent Yes No (if "Yes e) Applicant is completely ava and whenever services are three years. Yes d) The demanding requirement thoroughly discussed and a nature involving applicant, which would preclude acce, is offered. Yes N | rsonal problems at hor<br>continuous employmer<br>sile to the details under<br>uilable for general and<br>needed and is willing<br>No<br>s, including overtime,<br>pplicant has no physic<br>family members or me | ne such as ill het at at office of as General Commen special assignmento serve a minim transfers, etc., leal or other problembers of spouse | No saith of signment? ts.) tent wherever um of the lems of any s family | (b) Minim   | st date applicar<br>port for work<br>um number of de<br>required prior<br>ing for work |
|  | telephone numbers   | o (ii No. explain.)   | 16  | 1-1- <i>1</i> -   | Dalanhana   |  |
| Business   |   |   |   | I   | refeptione<br>Felephone                               |  |
| 11. Sex 12. U  | S. citizen 13. Age 14.Height (u) Yes Out shoe   | oith 17. Weig t 16. Ph<br>Sie   | vsical defects(in<br>cial Agent Appl  | luding hearing  | g, vision, co   | lor vision; for  |
| 17. Extent of, and   | degrees   | EDUCATIO  |   | de average and  | class stand   | ing  |
|  | F17.1.111.1.1   |   |   |   |   |  |
| 19. Law Accounting SA Oral   | Other (specify)   | TION GRADES  Typing Shorthand   | Spelling Vocabulary Composite   |   | ). Typing   | raphic   |
| <ol> <li>Does applicant No</li> <li>Has applicant ness, insanity, If confined, na</li> </ol> | Yes To what extent? or any member of the family e epilepsy, been mentally retai me and address of institution   | 23. Has applicant heroin, LSD over suffered from, or had psychiatri   | or any member or<br>marijuana with<br>een treated for,<br>c consultation o  | of the family evout a doctor's p<br>any form of mer<br>f any kind?      | er used drug<br>rescription?<br>ntal ill- 25<br>YesNo | s of abuse such Yes Has applicant any member of family ever be declared bank Yes       |
| the overthrow o U.S. or any gro or controlled by   | tion should be read verbatim to way with, or a member of the fthe U.S. Government, any grup or doctrine which could be to a foreign power?" Applicant   | e Communist Party, an<br>oup whose purpose is<br>construed as being su<br>t's answer:Yes  | y Communist or<br>to deprive perso<br>ubversive, oppos<br>\to No  | Fascist group,<br>ns of their right<br>ed to the best i                 | any group or<br>ts under the<br>interests of t        | doctrine advoces constitution of the U.S., in fav                                      |
| the applicant aw   | vare of any incident or informa<br>reputation, morals, character  | , ability or loyalty to t   | he United States  | ? Yes   | i to reflect to No                                    | infavorably upo  |
| 28. Special Agent  | Applicant (amplify, if necessa  | SPECIAL AGENT AP<br>cry, items b, c, and d u  | nder General Co   |   |   |  |
| a. Drives auton b. Has had execute Yes c. Has appeara d. Does applica                        | nobile TYes No: has v<br>cutive, professional, investiga  | valid licenses in State<br>ative or specialized ex<br>l professional person<br>including any which  | s of<br>perience for whi  | ich the Bureau<br>unrestricted, reg                                     | gular particij<br>If "yes" exp                        | pation in all<br>lain under  |
| e. Has applicar  | nt in the past or does applicants No (If "yes," describe  | nt now participate in a   | ny athletic activ   |   | amauni Camu   | 1  |
| 2. Does applica  | tion of applicant (amplify unde<br>tion of applicant's obligated s<br>ant actively participate in cam<br>interested in more active part   | ervice?Ye   | 4. If app<br>s ☐No appli<br>No 5. What  | olicant had an c<br>cant do so? [                                       | option to res<br>7 Yes 🦳 1                            | ign, would<br>No   |
| Overa  | E DURING SIMULATED INTE   | RVIEW good, fair, poo   | ·   |   |   |  |
| ACTION: (For FB  | IHQ use only)   | TOTAL THE   | ROUTERS   | BLOCK   | २२  |  |

|      | EVALUATION - ALL APPLICANTS   |
|------|---|
| МО   | TE: Interviewer underline adjective best describing applicant. If none applicable, insert appropriate descriptive terms.  |
| 31.  | PERSONAL APPEARANCE   |
|      | a. Initial Impression: Outstanding, excellent, very good, good, fair, poor  |
|      | b. Dress: Businesslike, casual, bizarre, careless   |
|      | c. Neatness: Well-groomed, neat, untidy, dirty  |
|      | d. Build: Large, medium, small, stocky, frail, obese  |
|      | e. Complexion: Very healthy, normal, defective (specify)  |
|      | f. Photograph: Good likeness (if not, explain)  |
|      | Overall Evaluation: Outstanding, excellent, very good, good, fair, poor   |
| 32.  | EVALUATION OF APPLICANT AS RESULT OF INTERVIEW  |
|      | a. Approach: Impressive, friendly, quiet, ingratiating, hesitant, unimpressive, garrulous   |
|      | b. Handshake: Firm, weak  |
|      | b. Handshake: Firm, weak  |
|      | d. Voice: Well-modulated, clear, too low, harsh, high-pitched   |
|      | e. Accent: None, foreign, regional, slight, very noticeable   |
|      | f. Nervousness: None, slight, very nervous  |
|      | f. Nervousness: None, slight, very nervous g. Assurance: Self-confident, average, cocky, timid  |
|      | h. Enthusiasm: Enthusiastic, average, undemonstrative, indifferent  |
|      | i. Force: Forceful, aggressive, sufficient, vacillating, lacking  |
|      | i. Amenability: Amenable, self-centered, stubborn, resentful  |
|      | k. Alertness: Alert, responsive, lackadaisical, dull  |
|      | I. Tact: Tactful, average, blunt, lacking   |
|      | n. Answers Questions: Definitely, deliberately, impulsively, vaguely, incompletely  |
|      | o. Resourcefulness: Above average, average, lacking   |
|      | p. Self-expression: Above average, average, below average, poor   |
|      | •   |
| 24   | Overall Evaluation: Outstanding, excellent, very good, good, fair, poor   |
| 33.  | Does applicant have unusual hair style or sideburns, dress, gestures, mannerisms or demeanor which detract from overall appearance and impression?   Yes  No (If "Yes," explain under General Comments.)  |
| 34   | SELECTIVE SERVICE STATUS - registered Yes No  |
| U-T. | Classification - Has applicant requested or does he intend to request special selective service classification, such as   |
|      | I-A-O, I-O, IV-D, IV-F, etc.? Yes No (If so, explain under General Comments.)   |
|      | — — — — — — — — — — — — — — — — — — —   |
| 35.  | How did applicant become interested in Bureau employment, i.e., career days, Bureau acquaintances, friends, relatives, etc?   |
|      |   |
| 36.  | In event applicant desires to enter on duty the same date as a classmate, friend, or relative who has also applied for FBI  |
|      | employment, will he or she enter on duty alone in event the other person(s) does not receive an appointment? Tyes No  |
| 37   | If applicant enters on duty with spouse or friend, is he or she agreeable to working in a different section or a different shift?   |
| 57.  | If applicant enters on daty with spouse of mend, is he of she agreeable to working in a different section of a different single.  Yes No  |
|      | , 🗀 200 🗀 100   |
| 38.  | Based on interviewer's composite evaluation of applicant, is applicant recommended as one who would develop into a capable  |
|      | and creditable FBI employee? Yes No. If yes, applicant is considered Outstanding Above Average.   |
| 30   | General comments, including comments to supplement the adjectives underlined and to aid in overall evaluation of applicant.   |
| J7.  | Insure that all information included on application or developed during interview which may be of a derogatory nature or requires consideration or resolution has been commented upon in your write-up. Also set forth observations to support your |
|      | recommendation. (Use supplemental sheet if necessary.)  |

| Bulky Exhibit - Inventory o<br>FD-192 (Rev. 10-6-65) | F Property Acqu                       | ired as Evidence                  | Date                |                            |
|--|---------------------------------------|-----------------------------------|---------------------|----------------------------|
|  |                                       | ·                                 |                     |                            |
| Title and Character of Case                          | :                                     |                                   |                     |                            |
|  |                                       |                                   |                     |                            |
|  |                                       |                                   |                     |                            |
|  |                                       |                                   |                     |                            |
| Date Property Acquired                               | Source From                           | Which Property Acquired           |                     |                            |
|  |                                       |                                   |                     |                            |
| Location of Property or Bul                          | ky Exhibit                            | Reason for Retention of           | Property and Effort | ts Made to Dispose of Same |
|  |                                       |                                   |                     | -                          |
| Description of Property or I                         | Twhihit and Td                        | ative of Agent Sub-itting S-      |                     |                            |
| Description of Property of E                         | and 1dei                              | itity of Agent Submitting Sa      | me                  |                            |
|  |                                       |                                   | _                   |                            |
|  |                                       |                                   | <b>7</b>            |                            |
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| CEMIANNIIAI INVE                                     | ENTODY CEDI                           | VEICATION TO MISTIEV F            | ETENTION OF D       | ODEDTY (Taikiel and Trees) |
| SEMIANNUAL INVE                                      | INTORT CERT                           | IFICATION TO JUSTIFY R            | CETENTION OF PE     | ROPERTY (Initial and Date) |
|  | · · · · · · · · · · · · · · · · · · · |                                   |                     |                            |
|  |                                       |                                   |                     |                            |
|  |                                       |                                   |                     |                            |
|  | HEREIU I                              | rmation contained<br>3 unuarement | <b>)</b>            |                            |
|  | DATE                                  | in 1900 Pizzeg bru                | Field File #        |                            |
|  | •                                     | mor-16                            | , i loid tile #     | ,                          |

| المنتفئ المنتفع  |  |                |  |  |
|--|--|----------------|--|--|
| Report of Exit and Separation FD-193 (Rev. 4-11-75)  | • .  |                |  |  |
| TO:  |  |                |  |  |
| FROM:  | DATE:  |                |  |  |
|  | EOD Date Title   |                |  |  |
| Name of Employee   | EOD Date Title   |                |  |  |
| Last Local Address   | Forwarding Address (include Zip Code, if known)  |                |  |  |
| Cease-active-duty Date (hour and last day physically at work)  | Working Hours (include workweek if other than Monday - Fri   | iday)          |  |  |
| Interview Conducted By (Signature)   | Title  |                |  |  |
| LEAVE DATA Leave category 7 4  | C 6 C 8  |                |  |  |
| Hours of accrued leave employee will have at close of business of the last day physically at work. Do NOT add accruals if effect Hours of annual leave carried over at beginning of current leave y Leave to be used prior to cease-active-duty date  Note: Public Law 93-181 provides employees are paid for all an of separation.  | on cease-active date which is the last hour tive date of separation is at a later date. ALSL vear, AL  |                |  |  |
| If employee has been granted advanced leave, indicate number   | urs owed at clos of lease-active-duty date. AL SL  |                |  |  |
| READ BEFORE INTERVIEWING  Purposes:  1 - Obtain real, motivating reason for resignation  2 - Save a valuable employee if possible  3 - Serve as basis for (1) information supplied by Burgau upon request by Stale Unemployment Compensation Boards, (2) accurate analysis of turnover, (3) determining necessary or desirable organizational improvements, and (4) permitting a recorded recommendation regarding future reinstatement.  When and Where Conducted: As promptly as possible after receipt of resignation in adequate privacy with adequate time.  By Whom Conducted: Clerical employee - by immediate Agent supervisor; Agent - by SAC or in his absence by official acting for  |  |                |  |  |
| him.   |  |                |  |  |
| Reasons Given for Separation: First, carefully weigh reasons for exit interview to determine real motivating reason for resigning. job, leave city where assigned, or otherwise just return home, exists show resigning to seek employment closer to home meaning motivother, execute reason(s) under B. Explain all under Item M. Com   | If such reason was because of employee's desire to leave B<br>ecute a reason under Item A below. (For instance employee<br>ating reason is to return home, not seek other employment.)<br>ments. | ureau<br>might |  |  |
| A.   | _  |                |  |  |
| <ol> <li>Return to Home Area</li> <li>Homesick for Family and Friends</li> </ol>   | 8. Dissatisfaction With Assignment 9. Dislike of Production or Work Standards  |                |  |  |
| 3.  Unable to Adjust to City Environment 4. Living Costs   | 10. Dislike Performing Overtime 11. Dislike Shift Assignment   |                |  |  |
| 5. Transportation  | 12. Working Conditions - Physical Plant (i.e., no a  | air            |  |  |
| 6. Housing   | condition  | ing)           |  |  |
| 7. Concern Over City Life (Crime, etc.)  | <ul><li>13.  Working Conditions (other than physical plant)</li><li>14. Lack of Promotional Opportunity</li></ul>  |                |  |  |
| В  | 3.   |                |  |  |
| 15. Military 16. Other Employment (Show this as reason only where employee otherwise satisfied with Bureau employment) Check both reason and type. Reason: a. Promotional b. Enter different field   | 22. Change of Residence (husband or family movin 23. Housewife or Child Care 24. Resignation requested 25. Removal All involuntary separations Abandonment of position - failed to               | g)             |  |  |
| Type:  a. Other Government employment  b. Private industry   | submit resignation  26. Resigned during administrative inquiry  27. Retirement   |                |  |  |
| C. Self-employment  17. Poor Health (Self)   | Optional (including liberalized);  |                |  |  |
| 18. Poor Health (Family) 19. Marriage 20. Maternity  | Disability  28. Other (Explain under comments)   |                |  |  |
| 21. Attend School; locally; other area   |  |                |  |  |
| C. 1. Did employee violate terms under transfer agreement, 3-34 FD-382 Yes No; Government Employees Training agreement, 12-69? Yes No  | b Yes No; Foreign Assignment, g Act, FD-375 Yes No; transportation expense   |                |  |  |
| <ol> <li>Did employee resign prior to expiration of any agreement r following initial appointment or following special training and explain under Item M. Comments.</li> </ol>   | nade not covered in #1 such as to remain a specific period ?   |                |  |  |
| 3. If FBIHQ clerical employee, did employee resign within 10   | 00 days of entrance on duty?  Yes  No  |                |  |  |
| 4. If answer to either question 1 or 3 above is "yes":   | evance until determination is made as to any indebtedness  | _              |  |  |
| DATE OF THE PROPERTY OF THE PR | SSIFIED  | (over)         |  |  |

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| D. | Does employee have any specific suggestion for improving the organization?  No Yes If so, explain. (In the event the suggestion is new, it should be presented to the Bureau for consideration. If previously considered by Bureau and adopted or turned down the employee should be so advised.)  |
|----|--|
| E. | Has employee been cautioned about divulging confidential information acquired in job?  Yes No Failure to abide by this provision violates Department of Justice regulations and may violate certain statutes providing maximum severe penalties of a \$10,000 fine or 10 years' imprisonment, or both.   |
| F. | All Government property, documents made or received while in the FBI's service, including FBIRA card, will be collected on date employee ceases active duty (exceptions: Honorary FBIRA card, commendation, censure or promotion letters or copies of expense vouchers, etc.).   Yes No  |
| G. | If employee is resigning for maternity purposes, appropriate block must be marked:  Employee is not entitled to payment for accrued sick leave as she will not be incapacitated for duty after indicated cease-active-duty date.   |
|    | Doctor's certificate attached indicating (1) employee is incapacitated for duty after indicated cease-active-duty date, and (2) expected date of confinement.  |
|    | Doctor's certificate attached indicating employee can safely continue working to date specified. (Applicable to those cases where the employee desires to work up to less than 6 weeks before expected date of delivery.)  |
| н. | Was employee instructed that if enrolled in a health benefits plan coverage continues temporarily for 31 days from the termination of health benefits enrollment and during that time employee is eligible to convert to an individual contract? If employee converts to an individual plan there is no waiting period for any benefits.   Yes No  |
| l. | Was employee instructed that if enrolled under the Special Accident and Travel Insurance (SATI) coverage under the Accident Protection Benefit Plan continues for 31 days from the last day of pay period in which a deduction was made? This is not necessarily the last day on duty of employee but invariably two weeks prior since the termination of payrol! allotments differs according to notice given of resignation. Employee is eligible to continue this coverage at the same rates and amounts to age 65. If employee desires to continue this coverage he/she should immediately contact Wright & Company, 1001 Connecticut Avenue, N. W., Suite 1222, Washington, D. C. 20036. Yes No |
| J. | Was employee instructed to furnish forwarding address to all firms with which accounts or business transactions have been established? Yes No Was employee urged to satisfactorily pay his (her) just debts? Yes No  |
| κ. | Was employee advised that any inquiries concerning his (her) FBI employment should be directed to FBI, Justice Building, Washington, D. C. 20535, as such information is not available elsewhere?   Yes No   |
| L. | The retiring employee is qualified and desires the 20-year plaque 25-year plaque 30-year plaque.   |
| м. | Comments: (Please state specific individual reason in explanation of check on other side of form. Set out if it can possibly be obtained, (1) re employment - information as to where the other employment will be, its nature, the salary that will be paid and when it will begin; (2) re school - date employee proposed to enroll.)  |
|    |  |
| Ν. | Has there been any substantial change in employee's work performance record since submission of last performance rating?  No Yes If "Yes" give current adjective rating and basis for change.  |
| ο. | For SA Employees Only. Have reason(s) for resigning been thoroughly discussed with employee? Does employee understand that favorable consideration may not be given for reinstatement unless reason(s) for resigning were compelling and beyond employees control? Yes No  |
| Ρ. | Recommendations re reinstatement: Yes No (If No, explain why.)   |
|    |  |
|    |  |
|    |  |
|    |  |
|    |  |

| Director,                   |                 |  |       |            |              |                     |             |          |        |               |         |
|-----------------------------|-----------------|--|-------|------------|--------------|---------------------|-------------|----------|--------|---------------|---------|
| Att: Spe                    | ecial Investiga | tive Division                                    |       |            |              | Initial Sub         | missio      | n        |        |               |         |
| SAC,                        |                 |  |       |            |              | Supplemen           |             |          | d      |               |         |
| ·                           |                 |  |       |            |              | ☐ Photograph        |             |          |        |               |         |
|                             |                 | •  |       |            |              | Indicate follow     | wing:       |          |        |               |         |
|                             |                 | カ<br>I   | - 1   |            |              | Extremist           |             | :)       |        |               |         |
|                             | 1 /             | ハトコ  | n'    | <b>つ</b>   |              | $\square$ Extremist | (White)     | )        |        |               |         |
|                             |                 | 1 / 1  |       |            |              | Rev. Act.           |             |          |        |               |         |
|                             |                 |  | 7     |            |              | Other Secu          |             | ackgrou  | nd     |               |         |
|                             | MKE Jame        |  |       |            |              |                     |             | NAM      | Sex    | SEXR          | ace RAC |
| Dlass (CD) (I               |                 |  |       |            | BOB          |                     | DODI-       |          | UCT    |               | WOT     |
| Place of Birth              |                 |  |       |            | POB          | Birth Date          | บบเ         | leight   | поі    | Weight        | WGT     |
| Eye Color E                 | YE Hair Colo    | r  | HAI   | FBI No.    | . !          | FBI                 | Skin '      | Tone     |        |               | SKN     |
| Scars, Marks, Tattoos, etc. |                 |  |       |            |              |                     | 1           |          |        |               | SMT     |
| NCIC Fingerprint Classific  | ation           | FPC  | Other | Identifyi  | ng Number    |                     | МИИ         | Social   | Secu   | ırity#        | SOC     |
| Operator's License Number   | r               | OLN  | Opera | tor's Lice | ense State   | <del> </del>        | OLS         | Year E   | Expire | <del></del> ; | OLY     |
| Offense Charged <b>OFF</b>  |                 |  |       |            |              |                     |             | <u> </u> |        |               |         |
| U. S. Code, Title and Secti |                 |  |       |            |              |                     |             |          |        |               |         |
| Warrant Issued By           |                 |  |       |            | On           |                     | ī           | 00W F.   | 0. F   | ile#          | 0C/     |
| Date PBV or Bond Default    |                 |  |       |            | _ 011        |                     |             | _        |        |               |         |
| Miscellaneous Including Bo  |                 |  |       |            | MIS          | Fingerprint         | Classi      | ication  | (Hen   | ry Syst       | em)     |
|                             |                 |  |       |            |              |                     |             |          |        |               |         |
|                             |                 |  |       |            |              |                     |             |          |        |               |         |
|                             |                 | LICENSE PLA                                      | TE AN |            |              |                     |             |          |        |               |         |
| License Plate Number L      | IC State        |  |       | LIS        | Year Expir   | es LIY              | Lice        | nse Pla  | te Ty  | ре            | LIT     |
| Vehicle Identification #    | VIN Year        | VYR Make   | ;     | VMA        | Model        | VMO                 | Style       | , V:     | STC    | olor          | VC0     |
| Aliases                     |                 |  |       | Addit      | ional Identi | ifiers              | <del></del> |          |        |               |         |
| <b>1</b> 2.7                | EREIN IS UI     | ATION CONT.<br>NCLASSIFIEI<br>NOV BYSP<br>NOR-14 | y en  | ી          | ?            |                     |             | Chin     | X      |               |         |
| NCIC #                      |                 | NIC  |       |            |              |                     |             |          |        |               |         |

#### INSTRUCTIONS

- Caution (MKE) Insert "C" in block if caution statement indicated. Basis for caution statement must appear in Miscellaneous block, e.g. armed and dangerous.
- 2. Name (NAM) Place name in this block. Aliases are not to be entered in this block but are to be placed in Aliases block.
- 3. Sex (SEX) Sex will be designated by one letter, M (male) or F (female).
- 4. Race (RAC) Race will be described by one letter, W (white), N (Negro), I (Indian), C (Chinese), J (Japanese), O (all other). Mexicans who are not definitely Indian or other nonwhite should be described as "W".
- 5. Place of Birth (POB) Indicate city and state or, if foreign born, city and country. Where multiple birthplaces are reported, list verified birthplace or that which appears most logical in this block.
- 6. Birth Date (DOB) Enter as month, day and year. Where multiple birth dates are reported, enter verified birth date or that which appears most logical in this block. Place other dates of birth in Additional Identifiers block.
- 7. Height (HGT) Express in feet and inches, e.g., 6'0". Round off fractions to nearest inch.
- 8. Weight (WGT) Express in pounds. Omit fractions.
- 9. Eye Color (EYE) Use appropriate three character symbol.
- 10. Hair Color (HAI) Use appropriate three character symbol.
- 11. Skin Tone (SKN) Use appropriate three character symbol.
- 12. Scars, Marks, Tattoos, etc. (SMT) Place in this block only appropriate NCIC coding for scars, marks, tattoos, birthmerks, deformities, missing body parts and artificial body parts as defined in NCIC Operating Manual. If more than one SMT is to be entered, use Additional Identifiers block for additional appropriately coded items. Use Miscellaneous block to describe all scars, marks, tattoos, etc. which are not defined in the NCIC Operating Manual and to more fully describe SMT's which have been entered in SMT block. For example, an appendent scar, not being readily visible, would be described in the Miscellaneous block. A tattoo on right arm, shown as TAT R ARM in block, might be further described in Miscellaneous block as a rose tattoo on inside of lower right arm.
- 13. NCIC Fingerprint Classification (FPC) Enter NCIC fingerprint classification.
- 14. Other Identifying Number (MNU) Miscellaneous numbers may be entered with appropriate identifiers (prefixes) as shown below. For first miscellaneous identifying number, use MNU block. When military service number is in fact Social Security Account Number, the number should be entered in both MNU and SOC blocks. Additional identifying numbers are placed in Additional Identifiers block. The identifier (prefix) should precede the number and be separated from the number by use of a hyphen.
  - AF Air Force Serial Number
  - AR Alien Registration Number
  - AS Army Serial Number, National Guard Serial Number or Air National Guard Serial Number (regardless of State)
  - CG U. S. Coast Guard Serial Number
  - MD Mariner's Document or Identification Number
  - MC Marine Corps Serial Number
  - MP Royal Canadian Mounted Police Identification Number
  - NS Navy Serial Number
  - PP Passport Number
  - PS Port Security Card Number
  - \$\$ Selective Service Number
  - VA Veterans Administration Claim Number
- 15. Fingerprint classification (Henry System) The Henry System fingerprint classification is to be placed in this block, when available. Do not enter in NCIC.
- 16. Social Security Number (SOC) Place subject's Social Security Account Number in this block.
- 17. Operator's License Number Place subject's operator's license number in OLN block. Also show licensing state (OLS) and year license expires (OLY).
- 18. Warrant Issued By-On-(DOW). In Escaped Federal Prisoner cases enter date of escape in DOW block.
- 19. Miscellaneous (MIS) Enter additional pertinent information in this block. If caution statement used, basis for statement must be set forth as first item in this block.
- 20. License Plate and Vehicle Information Place information concerning license plate and/or vehicle known to be in the possession of subject in appropriate blocks under License Plate and Vehicle Information heading.
- 21. Additional Identifiers Enter information concerning additional license plates (number, state, year expires, and where applicable, type); Social Security Numbers; operator's license number, state and year expires; vehicle information (VIN, VYR, VMA, VMO, VST, VCO); MNU's (see list in item 13 above); visible scars, marks, tattoos, etc.; and dates of birth. Clearly identify what data is being set forth; e.g. Social Security # 423-56-3294; Michigan operator's license 234567, expires 1972; DOB's 4/5/32, 5/3/32; etc.
- 22. Changes and deletions should be so indicated in the appropriate blocks.

| TO: S      | AC RA   | , 19                    |
|------------|---|-------------------------|
| Auch       |   |                         |
|            | RE:   |                         |
|            | The continued subject was remoted as siding at  |                         |
|            | The captioned subject was reported residing at, and employed as a   | at the                  |
| Subjec     | t's spouse is, as of  | , 19                    |
| •          | The subject has been reported in the following subversive as  | nd extremist activity o |
| the dat    | tes shown:  |                         |
|            |   |                         |
|            | 1) 200  | <i>)</i>                |
| ٥          |   |                         |
| □ A.       | It is requested the following investigation be conducted: (Check where Verify current employment and residence. | re applicable.)         |
| □ B.       | Determine current criminal record, it being noted the subject's crimina reviewed, 19                            | al file was last        |
| □ C.       | Obtain background, and dates, from subject's employment record.   |                         |
| □ D.       | Check subject's marriage record at Probate Court, it being noted subjective married, 19, at                     |                         |
| □ E.       | Check official birth record at Bureau of Vital Statistics, it being noted born on, 19, at                       |                         |
| □ F.       | Determine whether subject has access to classified or restricted mate   |                         |
| □ G.       | Conduct neighborhood investigation; the following specific information  | n is desired:           |
| <b>п</b> н | Check informants, it being noted,,  |                         |
| 11.        | and have given information in the   | he past.                |
| □ I.       | Review INS records.   |                         |
| □ J.       | Determine if subject has military service.  |                         |
| □ К.       | Obtain photograph of subject description handwriting s  | specimen.               |
| □ L.       | Determine subject's education; check school or college records, it be reported attending in 19 _                | _                       |
| ·····      | Determine subject's status of health.   |                         |
| and in     | The agent conducting the investigation will be alert for any evidence addition will                             | of subversive activity  |
|            |   |                         |
|            | (use reverse side, if necessary)  |                         |
|            |   |                         |
|            | Serial/s Special ALL INFORMATION CONTAINED  | Agent                   |
| 1 110 11   | DATEIO 104 1000 BYSPARIM IMPERIOR -11   |                         |





## UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION

Copy to:

Report of:

Date:

Office:

Field Office File #:

Bureau File #:

Title:

Character:

Synopsis:

JD-204

ALL HIFORMATION CONTAINED

HEREIN IS UNCLASSIFIED

DATE 10 04 00 BY 582 pm 1 m (

FD-209 (Rev. 4-1-74) OPTIONAL FORM NO. 10 MAY 1962 EDITION GSA GEN. REG. NO. 27



UNITED STATES GOVERNMENT

# Memorandum

: SAC

DATE:

FROM : SA

SUBJECT:

| Dates of Contact  |
|---|
| File #s on which contacted (Use Titles if File #s not available or when CI provides positive information)   |
|   |
|   |
|   |
|   |
|   |
| Purpose and results of contact  |
| □ NEGATIVE  |
| POSITIVE STATISTIC  |
| - STATISTIC   |
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| $oldsymbol{J}$  |
|   |
|   |
| POSITIVE ASSIGNMENT GIVEN   |
| Has informant shown any indication of emotional instability, unreliability or furnishing false information? |
| Informant certified that he has furnished all information obtained by him                                   |
| since last contact, including information concerning narcotics.   |
| PERSONAL DATA   |
| ALL INFORMATION CONTAINED   |
| DATE & OU ACO DE STARM IMA  |
| muk-16  |

| DATE:                                 | I   | MMEDIATE                                 | ATTENTION:                 | DESERTER DESI | <sup>°</sup> AIRTEL               |
|---------------------------------------|---|--|----------------------------|---------------|-----------------------------------|
| TO:                                   | Director (BUF<br>Federal Bureau                                 | TLE: 42-<br>of Inves                     |                            |               |                                   |
| FROM:                                 | SAC,  |  | (42-                       | Ş             | STATUS:                           |
| SUBJECT:                              |   |  |                            | [             | REPORT FOLLOWS                    |
|                                       | Social Securit<br>Serial #:<br>FBI #:<br>DESERTER FUGIT<br>0.0. |  | #:                         |               |                                   |
|                                       |   | been cle                                 | ared as ind                |               | nded, located, or is Bureau's in- |
| Located By                            | <b>7:</b>   | 24                                       | 1                          |               | ) <i>U</i>                        |
| Date and I                            | Place:  | T  |                            | 1             | <b>7</b>                          |
| Wearing Ap                            | pparel:   | - 1                                      | ノレ                         |               |                                   |
| Unempl                                | oyed; Place of  | Employmen                                | nt:                        |               |                                   |
| Confined:                             |   | J  |                            |               |                                   |
|                                       | printed or phot<br>and photograph:                              |  | or with wh                 | om arrangemen | ts made to finger-                |
| Name, titl                            | le, location ar   | d date mi                                | litary advi                | sed and by wh | om:                               |
| Remarks:                              |   |  |                            |               |                                   |
| Description                           | on:   |  |                            |               |                                   |
| Copies:                               | ALL INFORMATHEREIN IS UNO DATE(0) O O                           | TON CONTA<br>LASSIFIED<br>LEYSPA<br>L-16 | EM PM                      |               |                                   |
| COPIES RE                             | FERRED BY FBI F   |  | BI Headquarters<br>ERS TO: | Use Only)     |                                   |
| Army [ Data Proc Ident Div. Card Date | essing Section  | Marine Corps                             | ☐ Navy                     |               |                                   |

| DATE:       | C  | OPY          |
|-------------|--|--------------|
| FROM:       | Director Federal Bureau of Investigation   |              |
| SUBJECT:    |  |              |
|             | Social Security Account #: Serial #: FBI #: DESERTER FUGITIVE 0.0.   |              |
|             | The above-captioned individual has been apprehended, as has otherwise been cleared as indicated and this Burnon has been discontinued. |              |
| Located B   | Dy:  | <b>1</b> .   |
| Date and    | Place:   |              |
| Wearing A   | apparel:   |              |
| ☐ Unempl    | loyed; Place of Employment:  |              |
| Confined:   |  |              |
|             | printed or photographed; or with whom arrangements mad and photograph:   | e to finger- |
| Name, tit   | cle, location and date military advised and by whom:   |              |
| Remarks:    |  |              |
| Description | on:  |              |
|             | ALL INFORMATION CONTAINED HERRING IS UNCLASSIFIED AM JAAC DATE 10 04 00 EYSPA AM JAAC MOR-16   |              |
| COPIES RE   | FERRED BY FBI HEADQUARTERS TO:   |              |
| Army [      | Air Force Marine Corps Navy  |              |

|                            | Y リ                   | CITY         |      |
|----------------------------|-----------------------|--------------|------|
| Received from Special A    | gent in Charge, FBI,_ |              |      |
|                            | dol                   | lars, and    | <br> |
| `(\$), which               | money was actually pa | aid by me on | <br> |
| to                         |                       |              | <br> |
|                            |                       |              |      |
| for information concerning | ng the case entitled  |              |      |
| for information concerning | ng the case entitled  |              |      |
| for information concerning | ng the case entitled  |              |      |
| for information concerning |                       |              |      |

|                                | CITY   |       |
|--------------------------------|--|-------|
|                                | DATE   |       |
| Request of Special Agent in    | Charge, FBI,                                   |       |
|                                | 1.11   |       |
|                                | dollars, and                                   | cents |
| (\$), which mon                | ney is to be paid by me on                     |       |
| to                             | ·  |       |
| for information concerning the | he case entitled                               |       |
| ·                              |  |       |
|                                |  |       |
| Services: \$                   | Federal Income Tax Withheld \$                 |       |
| Expenses \$                    |  |       |
|                                | Signed:Special Agent                           |       |
| Have payments been made by     | y other Offices?  No Yes (List Offices below.) |       |
| Authority (date)               |  |       |
| Period Covered by Payment      |  |       |
| Authorization Checked          |  |       |
| Check Number                   |  |       |
| Receipts Received              |  |       |
| Voucher Prepared               | Item   |       |
| Date of Actual Payment         |  |       |
| By whom                        | ALL INFORMATION CONTAINED                      |       |
| Informant's File No.           | DATE 10 by 1000 BYSED MAC                      |       |
| Approved                       | SAC  |       |





Mark opposite each item the number of the serial or serials in which the information appears. Although these items are regarded as nonvariable, changes may be noted by adding the new serial number and crossing out the old. When form is complete as to all applicable items, the Agent and Field Supervisor should initial the form at the end.

| Symbol Number  | Office File |
|--|-------------|
| Type of Informant: CI PCI CS C-TE PC   | Bureau File |
| 1. Name  |             |
| 2. Aliases   |             |
| 3. Informant Index Card Made   |             |
| 4. Description   |             |
| 5. Background Developed  |             |
| 6. Photograph  |             |
| 7. Local Criminal Check  |             |
| 8. Bureau Identification Record  | 75          |
| 9. Past Criminal Activities  |             |
| 10. Criminal Associates  | 1           |
| 11. Availability To Other Divisions  |             |
| 12. Advised of FBI Jurisdiction  |             |
| 13. Advised of Confidential Relationship   |             |
| 14. Advised Not Employee of Bureau   |             |
| 15. Advised to Furnish Information Only to Bureau  |             |
| 16. Advised Payments are Incoming  |             |
| 17. Advised Not to Contact Office Personally   |             |
| 18. When Designated Approved Informant   |             |
| 19. Indices Search Slip (FD-160) Summarized  |             |
| 20. Statement of Willingness to Aid Bureau   |             |
| 21. Arrangements for Payment   |             |
| 22. Symbol Number Assigned   |             |
| 23. Bureau Advised of Symbol   |             |
| 24. Service Record Checked, if any   |             |
| 25. Flash Notice Placed or Removed   |             |
| 26. Alternate Agent  |             |
| 27. Coverage   |             |
| 28. Statistical Accomplishments  |             |
| 29. NCIC Test (Z) Inquiry  |             |
| 30. Inspector's Rating at Time of Last Inspe <u>ction INFORMATION CO</u> HEREIN IS UNCLASSIF DATE 10 OV 3000 LIS | Parm/mt     |
| Completed:   |             |

NW 55033 DocId:32989613 Page 65

NO SERIAL NUMBER KEEP ON TOP OF OTHER SERIALS IN FILE

Approved: \_





Date . Mark opposite each item the number of the serial or serials in which the information appears. Although these items are regarded as nonvariable, changes may be noted by adding the new serial number and crossing out the old. When form is complete as to all applicable items, the Agent and Field Supervisor should initial the form at the end. Symbol Number Office File . Type of Informant SI ☐ PSI Bureau File ... Serial No. Date Approved and Serial No. \_\_ 1. Name Aliases \_ Code Name Bureau Advised of Symbol \_\_\_\_\_ 5. Date and Place of Birth \_\_\_\_\_ Description \_ 7. Photograph\_ Background Investigation: (a) File References Checked\_\_\_\_\_ (b) Local Criminal Check \_ (c) Bureau Identification Record \_\_\_ (d) Selective Service Check \_\_ (e) Check of Armed Services Record \_\_\_\_ Informants Canvassed \_ (g) Reliability Check \_ (h) Patriotism \_ (i) Reputation Informant Advised of: (a) Not Bureau Employee \_\_\_ (b) Activities Voluntary \_\_\_\_ (c) Relationship Confidential (d) Bureau Labor Policy \_ (e) Not to Retain Copies of Notes - Reports \_\_\_ (f) Report to be Submitted Under Code Number and in Third Person \_\_\_\_ (g) Payments are Income (h) Use Public Telephones \_\_\_ (i) No Office Contact Personally \_\_\_ 10. Statement of Cooperation \_ 11. Post Office Box Number Assigned \_\_\_\_\_ 12. Informant Indices Card Made \_ Agent Who Handles Information \_\_\_\_\_ 13. 14. Alternate Agent. Concealment and Characterization Guide \_\_\_ 16. Flash Notice Placed \_\_\_\_\_\_ or Removed \_ ALL TUFORMATION CONTAINED 17. Coverage 18. NCIC Test (Z) Inquiry \_\_\_ 19. Inspector's Rating at Time of Last Inspection . Initials . No Serial Number: Supervisor Keep on Top of Other Serials in File.

|    |   |  |  | Photo-                                    |
|----|---|--|--|---|
|    | Person Photographed                     | Date and Place<br>Photo Taken  | File No.   | graphers<br>Initials                      |
| 1. |   |  |  |   |
| 2. | •                                       |  |  | 1   |
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|    | ATT TOTAL                               |  |  |   |
| •  | ALL INFORMATION C<br>HEREIN IS UNCLASSI | FIED A   |  | š   |
|    | DATE 10/04/2000 BY                      | Storm Inc  |  |   |
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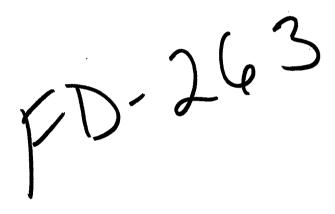
TD-251





# FEDERAL BUREAU OF INVESTIGATION

| REPORTING OFFICE | OFFICE OF ORIGIN | DATE           | INVESTIGATIVE PERIC | D D      |
|------------------|------------------|----------------|---------------------|----------|
| TITLE OF CASE    |                  | REPORT MADE BY |                     | TYPED BY |
|                  |                  | CHARACTER      | OF CASE             |          |
|                  |                  |                |                     |          |
| ****             |                  |                |                     |          |



|               | ACCOMPLISHMENTS CLAIMED |   |              | ☐ NONE    | ACQUIT-                      | CASE HAS BEEN:  |  |  |  |
|---------------|-------------------------|---|--------------|-----------|------------------------------|---|--|--|--|
| CONVIC.       | FUG.                    | FINES   | SAVINGS      | RECOVERIE |                              | ]   |  |  |  |
|               |                         |   |              |           |                              | PENDING OVER ONE YEAR YES NO PENDING PROSECUTION OVER SIX MONTHS YES NO |  |  |  |
| APPROVED      |                         |   | SPECIAL A    |           | DO NOT WRITE IN SPACES BELOW |   |  |  |  |
| COPIES MADE   | ALL INF                 | CORMATION C<br>IS UNCLASSI<br>OF SOOD BY<br>MAR | SPA run lina | £         |                              |   |  |  |  |
| 1             | Dissemination           | Record of Attac                                 | hed Report   | Nota      | tions                        |   |  |  |  |
| Agency        |                         |   |              |           |                              |   |  |  |  |
| Request Recd. |                         |   |              |           |                              | <u>~</u>  |  |  |  |
| Date Fwd.     |                         |   |              |           |                              | 46  |  |  |  |
| How Fwd.      |                         |   | ,            |           |                              |   |  |  |  |
| Ву            |                         | Ţ.  |              |           |                              |   |  |  |  |

## Job Qualification Statement of Position of Radio Maintenance Technician in the Federal Bureau of Investigation

Entrance Salaries \$8.500 (Grade GS-5) and \$10,520 (Grade GS-7)

Applicants must be citizens of the United States, be in excellent physical condition and have satisfactory vision in view of the nature of the work.

Applicants also must have attained at least a high school education and some type of formal training in basic electronics; have a valid automobile operator's permit and pass a spelling test.

Applicants for the GS-5 position must be capable of assisting in ordinary repair and maintenance of electronic and FM radio equipment, and be proficient in the use of basic hand tools and electronic test equipment.

Applicants for the GS-7 position must possess a thorough knowledge of the fundamental principles of electronics and FM radio theory, and must be capable of performing corrective and preventive maintenance on electronic and FM radio communications equipment. To indicate previous training and experience, applicants should submit certification of the following, as applicable:

- 1. Commercial, government and/or military experience in maintenance of (a) electronic equipment for other than communications use, (b) communications equipment other than FM radio and (c) FM radio equipment.
- 2. Current or expired FCC First Class or Second Class Radiotelephone and/or Radiotelegraph License.
- 3. Commercial, government and/or military experience in electronic equipment design and/or construction.
- 4. Educational background in electronics theory and/or engineering.

Radio Maintenance Technicians must be willing to travel and accept assignments in any part of the United States or in Puerto Rico, and to work on a day, evening or midnight shift, as required. Promotional opportunities exist consistent with qualifications and proficiency. Appointments to these positions are not under Civil Service regulations and are strictly probationary for the first year.

Application forms may be obtained on request from any FBI field office or by communication addressed to the Federal Bureau of Investigation, Washington, D. C. 20535. Applicants may be required to proceed at their own expense to the nearest field office for interview and examination, and to their first office of assignment if employed.

FD-264

The Federal Bureau of Investigation is an equal opportunity employer.

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| Time | Initial | IC<br>OG | Activity Recorded                                       |
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#### FEDERAL BUREAU OF INVESTIGATION

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FD 302

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Interviewed on \_\_\_\_\_ at \_\_\_\_\_ File # \_\_\_\_\_

by \_\_\_\_\_ Date dictated \_\_\_\_

This document contains neither recommendations nor conclusions of the FBI. It is the property of the FBI and is loaned to your agency; it and its contents are not to be distributed outside your agency.

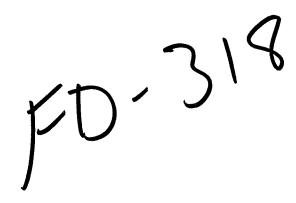
| FD-305 (Rev. 2-13-75)   |              |
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| . 2 330 (titev. 2-10-13)  | ;            |
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|   |              |
| 1. Subject's name is included in the ADEX.  |              |
| 2. The data appearing on the ADEX Card are current.   |              |
| 3. Changes on the ADEX Card are necessary and Form FD-122 submitted to the B  | ureau.       |
| 4. A suitable photograph is is not available.   |              |
| Date photograph was taken   | charged with |
| security responsibility. Interested agencies are  |              |
|   |              |
| 6. Reason for classification where exemption category does not provide a self-evi   |              |
| a. Details of Report:   |              |
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| b. Cover Pages:   |              |
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| 7. Subject previously interviewed (dates)   |              |
| Subject was not interviewed reinterviewed because (state reason)  | •            |
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| 8. This case no lorger meets the ADEX criteria and an FD-122 with succinct sum  |              |
| 8. This case no lorger meets the ADEX criteria and an FD-122 with succinct sum has been directed to the Bureau recommending cancellation. | ımary,       |
| 9. This case has been reevaluated in the light of the ADEX criteria and it continues.   | ues to       |
| fall within the criteria because (state reason)   | 405 00       |
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| 10. Security Flash Notice (FD-165) to Identification Division:  |              |
| Submitted Placed Yes No   |              |
| (date)  |              |
| 11  Subject designated and/on included in   |              |
| 11.  Subject designated and/or included in:  Arab Terrorist Photograph Album  Extremist Photograph Album                                  |              |
| Weatherman Photograph Album   |              |
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| Cover Sheet for Informant Report or Material FD-306 (Rev. 9-30-69)   |  |
|--|--|
| 1 D-000 (110). 5-50-05/  | <b>.</b>                                       |
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|  |  |
| Date received Received from (name or symbol number)  | Received by                                    |
| Method of delivery (check appropriate blocks)  |  |
| in person by telephone by mail orally  | recording device written by Informant          |
| If orally furnished and reduced to writing by Agent:   | Date of Report                                 |
| <u>Date</u>  |  |
| Dictatedto   | Date(s) of activity                            |
|  |  |
| TranscribedAuthenticated   |  |
| by Informant Brief description of activity or material   |  |
| Biter description of activity or material  |  |
|  | <del></del>                                    |
|  | File where original is located if not attached |
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| * INDIVIDUALS DESIGNATED BY AN ASTERISK (*) ONLY ATTENDED A VIOLENCE OR REVOLUTIONARY ACTIVITIES WERE NOT DISCUSSED. | MEETING AND DID NOT ACTIVELY PARTICIPATE.      |
| Information recorded on a card index by  | on date  |
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### QUESTIONNAIRE FOR APPLICANTS FOR RADIO MAINTENANCE TECHNICIAN POSITIONS

Note: Questions are intended to elicit answers which will provide basis for evaluation of your background and knowledge as pertinent to your application for employment. All questions are to be answered by the applicant as briefly as clarity will permit. Answers should be included in the space provided, if possible, although they may be continued on a separate sheet of paper if necessary.

1. List formal training received in theory, repair and/or design of electronic equipment, including names of schools, dates attended, courses completed and certificates obtained.



2. List dates of employment, nature of work performed and degree of supervision received in repair of:
(a) electronic equipment for other than communications use, e.g., computers, radar, etc.,

(b) communications equipment other than FM radio, (c) FM radio equipment.



| 3. List electronic communication and radio equipment with which you have worked and degree of actual maintenance performed.   |  |
|---|--|
| <ol> <li>Explain maintenance procedures, both corrective and preventive, performed on above, including<br/>frequency of performance and test equipment used.</li> </ol>       |  |
| 5. List the types of electronic test equipment with which you are familiar and how often and over what period of time you have used each type listed.                         |  |
| 6. Have you ever constructed any electronic equipment by assembling the basic components?  Yes No If so, describe such equipment and discuss briefly its theory of operation. |  |

- 2 -

| 7.  | Have you ever tuned any radio transmitters? The No If so, describe the transmitters as to type of emission and power output (indicating make and model if known) and state the degree of supervision you received in such work.   |
|-----|---|
| 8.  | Have you ever aligned any radio receivers?  Yes No If so, state what type of receivers, what equipment was used in the alignment process and what degree of supervision you received in such work.  |
| 9.  | Have you ever installed any two-way radio communications equipment in automobiles?  Yes No If so, state the approximate number of such installations you have made and indicate the degree of supervision you received in performance of such work.                       |
| 10. | Have you ever had any responsibilities for the work of others in connection with communications and/or radio maintenance? Yes No If so, state the types of maintenance involved, the number of personnel for which you were responsible and the degree of responsibility. |
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| ŕ | 11.                         |   | Commission licenses you now hold. Include both amateur ense identifying data and date license obtained.   |
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|   | 12.                         | State briefly any other facts bearing on you with preventive and corrective maintenance   | our technical qualifications for a position concerned see of communications and FM radio equipment.   |
|   |                             |   |   |
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|   | on-the<br>person<br>I fully | technical qualifications which have been executed training in the FBI under the supervisoral effort in the study of radio theory. If I is | understand I must acquire within two years, the GS-7 xplained to me; that this may be accomplished through tion of an experienced technician coupled with my fail to acquire these qualifications within two years, technical maintenance duties and not necessarily to a |
|   |                             |   |   |
|   |                             |   |   |
|   |                             |   | (Signature of Applicant)  |
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In Reply, Please Refer to

File No.

#### FBI CASE STATUS FORM

| Date:                           |
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| Signature of Official in Charge |
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Facts on which complaint authorized declined and other pertinent information about case:

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| Message No.<br>or TWX                   | File Number  | Alignment &<br>Addressees | Serial Nos. &<br>Msg. Rotor Align. | Encoding Checking  | Message<br>D-T-G | Accounted for (Initials)                         |
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### UNITED STATES GOVERNMENT

# Memorandum

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### UNITED STATES GOVERNMENT

## Memorandum

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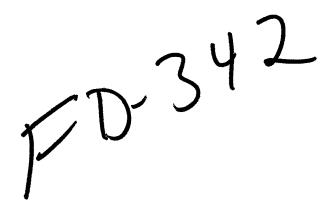
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NW 55033 DocId:32989613 Page 83

FD-342 (Rev. 3-15-73)

United States Department of Justice Federal Bureau of Investigation



Dear Sir:

For your information, I am enclosing communications which may be of interest to you.

Very truly yours,

Official in Charge

Enc.

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| Request for Agency Check   |                                       |   |                                  |            |            |        |                                       |              |
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| FD-356 (Rev. 7-24-74)  |                                       |   |                                  |            | <i>:</i>   |        |                                       |              |
|  | INSTRUCT                              |   |                                  |            |            |        |                                       |              |
| 1. Submit form in duplicate (unl   | ess used only to request              | 5.  | Indicate office                  | for repl   | y in lowe  | r left | corner. A                             | Also list in |
| . check of State automated mo  | tor vehicle records).                 | j   | same corner al<br>reply. Include | l office:  | s which si | hould  | receive c                             | opies of     |
| 2. This form may be submitted in   | in legible HAND PRINTING.             | 1   | With regard to                   |            | •          |        | _                                     | •            |
| <ol> <li>Use separate form for each perform requested.</li> </ol>                  | erson on whom record is               |   | de serters.                      |            |            |        |                                       |              |
| 4. Date & place of birth imperat   | ive for passport check.               | I ''  | Reverse side o<br>needed.        | )   form n | iay be us  | ea foi | r recording                           | results, if  |
| TO: SAC,  Alexandria   | San Antonio RE: [                     |   | IA r                             | □ Othe     | Dat        | e      |                                       |              |
| Baltimore  | St. Louis                             |   | _                                | Out        | "          |        |                                       |              |
| ☐ Denver   | □ WFO                                 |   | ILITARY                          |            |            |        |                                       |              |
| 🥅 Indianapólis   |                                       | P   | ASSPORT                          |            |            |        |                                       |              |
| Name   | · · · · · · · · · · · · · · · · · · · |   | Aliases:                         |            |            |        |                                       |              |
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| 1/   |                                       | Military Passport INS CIA   |                                  |            |            |        | IA                                    |              |
|  |                                       | No pertinent identifiable information  Available information attached |                                  |            |            |        |                                       |              |
|  |                                       | -   | Photo: Attached Unavailable      |            |            |        |                                       |              |
|  |                                       | Handwriting specimen attached   |                                  |            |            |        |                                       |              |
| Specific information desired:  |                                       | _   | Inquiry made                     |            |            |        |                                       |              |
| HEREUVIS TATE  | מיס או                                |   | 24                               | -5.        |            |        |                                       |              |
| Specific information desired:  HEREIN IS UNCLASSIVED  MOR-III  Also furnish: Photo |                                       |   | Date:                            | ,          |            |        |                                       |              |
| 7  | 23 23 May 1 M                         |   | Date:                            |            |            |        |                                       | -            |
|  | R-11, Mark                            |   |                                  |            |            |        |                                       |              |
|  | · 9                                   |   |                                  |            |            |        |                                       | •            |
|  |                                       |   |                                  |            | Block      | Stan   | np and Not                            | ations       |
| Handwriting sp   | pecimens                              |   |                                  |            |            |        |                                       |              |
| Return reply to:   |                                       |   |                                  |            |            |        |                                       |              |
| SAC)   |                                       |   |                                  |            |            |        |                                       |              |
| File No. Attention SA  |                                       |   |                                  |            |            |        |                                       |              |
| Attention SA   |                                       |   |                                  |            |            |        |                                       |              |
| Send copies to:  |                                       |   |                                  |            |            |        |                                       |              |
|  |                                       |   |                                  |            |            |        |                                       |              |
|  |                                       |   |                                  |            |            |        |                                       | •            |

### F B I

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|                        |   | Date:                                       |
| nsmit the fol          | llowing in  | (Tune in plaintagt or code)                 |
|                        |   | (Type in praimext or code)                  |
| AIR                    |   | (Precedence)                                |
|                        |   | ·   |
| To:                    | Director, FBI   | ATTENTION:  GENERAL INVESTIGATIVE DIVIS     |
| _                      |   | CIVIL RIGHTS SECTION                        |
| From:                  | SAC,  | CRIMINAL SECTION  INTELLIGENCE DIVISION     |
| <b>.</b>               |   |   |
| Subject                | :   |   |
|                        |   |   |
|                        |   |   |
|                        | - an - Fr - Di  | CP A C4                                     |
|                        | CR EL DIH   | CRA-64 PA PE PF E                           |
|                        | □ DAMV □ DAMV-FR  | CAA   |
|                        | EID Bomb Threats  | ☐ AP ☐ IWFC ☐ CWAA ☐ FI ☐ Extremist Matters |
|                        | Summany of Complaints   | ☐ White Hate ☐ Black                        |
|                        | Summary of Complaint:   |   |
|                        |   |   |
| l                      | 1   | $\mathcal{L}_{0}$                           |
|                        | Y /   |   |
|                        |   |   |
|                        |   |   |
|                        | 1   |   |
|                        | •   |   |
|                        | INDICES:  Negative  | See Summary                                 |
|                        | ACTION: UACB:   |   |
| ):D>                   | ☐ No further a ☐ LHM enc  | ction being taken and Copy to: USA          |
| S UNITON C             | □ FD-3  | 76 (Enc. to LHM) Secret Service             |
| DEMATION OF SUNCLASSIL | No further a  LHM enc  FD-3  LHM bei  Report b  Preliminary  Limited inv  Investigation | ng submitted ATF<br>eing submitted          |
| moe.                   | Preliminary   | investigation instituted                    |
| •                      | 6 Limited inv   | estigation instituted<br>n continuing       |

NW 55033 DocId:32989613 Page 89





### UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to File No.

| CILI | 1) |    | $\operatorname{CT}$ : |  |
|------|----|----|-----------------------|--|
| · 71 | D. | н. |                       |  |
|      |    |    |                       |  |

CHARACTER:

REFERENCE:

Referenced communication contained subject's residence and/or employment address. A recent change has been determined and is being set forth below (change only specified): D-366

Residence:

Employment:

This document contains neither recommendations nor conclusions of the FBI. It is the property of the FBI and is loaned to your agency; it and its contents are not to be distributed outside your agency.



#### UNITED STATES GOVERNMENT

## Memorandum

то

: Director, FBI

DATE:

Attention: Data Processing Section

FROM : SAC,

SUBJECT: DISSEMINATION OF CRIMINAL INFORMATION

TO OTHER AGENCIES

| RE  | SAC   | Letter 59-30 dated 5/5/59.   | All Matters | Narcotics<br>Matters |
|-----|-------|--|-------------|----------------------|
| Α.  |       | l number of items disseminated to local and law enforcement agencies |             |                      |
|     |       | nformation obtained during course of Bureau                          |             |                      |
|     | 2. I  | nformation furnished by all informants                               |             |                      |
|     | 3. I  | nformation from complaints and any other sources                     |             |                      |
| В.  |       | l number of items disseminated to other Federal                      |             |                      |
|     |       | nformation obtained during course of Bureau                          |             |                      |
|     | 2. In | nformation furnished by all informants                               |             |                      |
|     | 3. I  | nformation from complaints and any other sources                     |             |                      |
| 3 - | Bur   | reau 1731  |             |                      |

FD-374 (2-4-65) OPTIONAL FORM NO. 10 MAY 1962 EDITION GSA GEN, REG. NO. 27



UNITED STATES GOVERNMENT

## $\it Aemorandum$

TO

Director, FBI

DATE:

**FROM** 

SAC,

Note: Items 1 thru 10, list total numbers; Items 11 thru 13, list dollar value:

or indicate none if applicable.

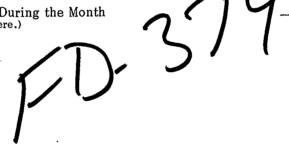
SUBJECT:

CRIMINAL INFORMANT PROGRAM MONTHLY PROGRESS LETTER

#### **Administrative Accomplishments**

- 1. Informants Listed at Beginning of Month
- 2. Informants Added During the Month (List Symbol Numbers here.)

3. Informants Deleted During the Month (List Symbol Numbers here.)



- 4. Informants Listed at End of Month
- 5. Potential Informants Being Developed

#### Statistical Accomplishments

- 6. Subjects Arrested, FBI Cases
- 7. Bureau Fugitives (included in Item 6)
- 8. Subjects Located, FBI Cases (not included in Items 6 or 7)
- 9. Subjects Arrested, Other Federal Agencies
- 10. Subjects Arrested, State and Local
- 11. Merchandise Recovered, FBI Cases

13. Merchandise Recovered, Other Federal Agencies

12. Merchandise Recovered, State & Local

ALL INFORMATION CONTAINED HEREIN IS UNCL

DocId:32989613 Page 92







#### UNITED STATES DEPARTMENT OF JUSTICE

#### FEDERAL BUREAU OF INVESTIGATION

In Reply, Please Refer to File No.

Date:

Director Federal Bureau of Investigation Washington, D. C. 20535

| TRAINING AGREEMENT   |
|--|
| In consideration for the following specialized training which will result in considerable time and expense   |
| to the Federal Bureau of Investigation (FBI), I,, agree to remain in the service of the FBI (or Department of Justice, as to final item below) for the time specified, contingent upon my maintaining a satisfactory work record.  |
| So that I may receive training in classifying, searching, and filing of fingerprints, I agree to remain in the service of the FBI performing fingerprint duties for at least one year from this date. I understand that I may be assigned, consistent with the demands of the service, to work at night. |
| So that I may receive training in stenographic typing skills, I agree to remain in the FBI for a minimum of one year after completion of training. In addition, I agree to accept any assignment in any division at FBIHQ or Washington Field Office consistent with such needs for my services.         |
| So that I may receive training in automatic data processing equipment cryptanalytics, I agree to remain in the FBI one year after completion of formal training.   |
| So that I may receive training in a foreign language, I agree to remain in the FBI for three years after I successfully complete this training.  |
| So that I may receive advanced training in maintenance and repair of FM radio equipment, I agree to remain in the service of the FBI for at least one year following completion of the training.   |
| So that I may receive training under the Government Employees Training Act to be given me at   |
| after completion of training. If I voluntarily leave the Department before expiration of that period, I will pay the Government the amount of the additional expenses paid by it for the above-mentioned training.   |
| JD-375   |
| MOR-16  MOR-16  MOR-16  MOR-16   |



| Doto |  |  |  |
|------|--|--|--|

Mark opposite each item the number of the serial or serials in which the information appears. Although these items are regarded as nonvariable, changes may be noted by adding the new serial number and crossing out the old. When form is complete as to all applicable items, the Agent and Field Supervisor should initial the form at the end.

| Symbol Number   | Office   | e File          |               |
|---|--|-----------------|---------------|
| Type of Informant: PEI EI C   | S-E Bur  | File            |               |
| Date Approved and Serial No.  |  |                 | Serial Number |
| 1. Name   |  |                 |               |
| 2. Aliases  |  |                 |               |
| 3. Bureau advised of Symbol   |  |                 |               |
| 4. Cover name assigned and Bureau advised   | <del></del>  |                 |               |
| 5. Background developed   |  |                 |               |
| 6. Description  |  |                 |               |
| 7. Photograph   |  |                 |               |
| 8. Local criminal check   |  |                 |               |
| 9. Bureau Identification Record (FD-9)  |  |                 |               |
| 10. Armed Service record check  |  |                 |               |
| 11. Informants canvassed  | <del></del>  |                 |               |
| 12. Past extremist activities   |  |                 | ) / /         |
| 13. Extremist associates  |  | \ <u>/</u>      | /             |
| 14. Informant advised of:   |  |                 |               |
| (a) Not Bureau employee   |  |                 |               |
| (b) Activities voluntary  |  |                 |               |
| (c) Relationship confidential   |  |                 |               |
| (d) FBI jurisdiction  | <i></i>  | <del> </del>    |               |
| (e) Furnish information only to Bureau _  |  |                 |               |
| (f) Payments are income   |  |                 |               |
| (g) Report to be submitted under code na  | me and in third person.  |                 |               |
| (h) Not to contact office personally  |  |                 |               |
| (i) Not to retain copies of notes or repor  | ts   |                 |               |
| 15. Reliability check   |  |                 |               |
| 16. Statement of cooperation  |  |                 |               |
| 17. When removed from probation   |  |                 |               |
| 18. Informant indices card made   |  |                 |               |
| 19. Agent who handles informant   |  |                 |               |
| 20. Alternate Agent   |  |                 |               |
| 21. Flash notice placed   | or re  | moved           |               |
| 22. Coverage  | ALLITOTAN  | C STAINED       |               |
| <ul><li>23. NCIC Test (Z) Inquiry</li><li>24. Inspector's rating at time of last inspecti</li><li>Completed</li></ul> | The same of the sa | 77. 374         | Non           |
| 24. Inspector's rating at time of last inspecti   | mais 10 for flow   | x <u>s/dalm</u> | Thut,         |
| Completed   |  | MOR-16          |               |
| Approved  |  |                 |               |
| No Serial Number K  | eep on Top of Other Seri   | als in File     |               |

NW 55033 DocId:32989613 Page 94

FD-379 (Rev. 7-1-74) optional form no. 10 may 1962 edition gsa gen. reg. no. 27



5010-10

#### UNITED STATES GOVERNMENT

## Memorandum

то

DATE:

FROM

SUBJECT:

Bureau authority is requested to interview subject in accordance with existing instructions relating to interviews of security subjects. Care will be exercised to protect the original source in this matter. No direct questions will be asked during the interview which will disclose to the subject the identity of the official or the establishment contacted, the method used in the contact, or the fact we are aware of the contact. The interview will be conducted in a manner so that the subject will volunteer the details of the contact. If this subject is cooperative, no affirmative steps will be taken during the initial interview to direct his activities, but a separate communication will be directed to the Bureau setting forth the results of the interview and requesting authority to recontact the subject to determine his asset potential.

| ``                          |                         | I PERSONNEL     | RECORI        | ).                | sex          | RACE    |
|-----------------------------|-------------------------|-----------------|---------------|-------------------|--------------|---------|
| ₩                           | TYPE OR PRINT LAST NAME | FIRST NAME      | MIDDL         | E NAME            | HT.(Inches)  | WT.     |
|                             |                         |                 |               |                   | HAIR         | EYES    |
| MPLOYEE'S SIGNATURE         | <del>,</del>            |                 |               |                   | DATE OF      | BIRTH   |
|                             |                         |                 |               | •                 | PLACE OF     | BIRTH   |
| CARS AND MARKS - AMPU       | TATIONS DATE FIN        | IGERPRINTED     | LEAVE THIS    | S SPACE BLANK     |              |         |
|                             |                         |                 | CLASS         |                   |              |         |
|                             | FINGERP                 | RINTED BY       |               |                   |              |         |
| 1. RIGHT THUMB              | 2. RIGHT INDEX          | 3. RIGHT MIDD   | REF.          | RIGHT RING        | 5. RIGHŤ     | LITTLE  |
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|                             |                         |                 |               |                   |              |         |
|                             | •                       |                 |               |                   |              |         |
|                             |                         | ALL             | INFOR LATIO   | N CONTAINED       |              |         |
|                             |                         | DAT             | etologia on   |                   | 14           | ,       |
| \$<br>FD-380 (REV. 7-27-65) |                         | -               | nok-14        |                   |              | •       |
| 7 55033 DocId:32            | 989613 Page 96          | ı               | •             |                   | GP 0         | 90 4-22 |

GPO 904-225 .

### FBI

Date:

|                | mit the foli | lowing in(Type in plaintext or code)  |      |
|----------------|--------------|---|------|
| ı              | Airte        | el  | ļ    |
| <del>,</del> : |              | (Precedence)  |      |
|                | To:          | Director, FBI   | 294  |
|                | From:        | SAC,  | 7511 |
|                | Subject:     | CRIMINAL INTELLIGENCE PROGRAM DIVISION  |      |
|                |              | MONTHLY SUMMARY OF ACCOMPLISHMENTS  |      |
|                | ,            | Re my airtel  | •    |
|                |              | er of agents assigned exclusively to the Criminal Intelligen<br>cam in this Division:   | ce   |
|                |              | umber of man days expended on this program during the ecently concluded month:  |      |
|                |              | umber of man days expended on this program during the revious month:  |      |
|                |              | otal number of Top Echelon Criminal Informants now ctive in this Division:  |      |
|                |              | umber of Top Echelon Criminal Informants developed uring the recently concluded month:  | -    |
|                |              | otal number of La Cosa Nostra members identified to ate in this Division:   |      |
|                |              | umber of La Cosa Nostra members identified as such uring the recently concluded month:  |      |
|                |              | ALL INFORMATION CONTAINED  DATE(0) O VIOLOGICA STAINED  DATE(0) O VIOLOGICA STAINED  OR O |      |

Sent \_

\_\_ M

Per.

Approved: \_

### VERIFICATION OF INFORMATION CONCERNING BOMBING SUSPECTS

| MEMORANDUM RE:  |
|---|
| Office File:  |
| The following is the most recent place of residence, employment, employment address, organizational position, or description of automobile of subject as contained it the files of this office.   |
| Residence:  |
| Employment:   |
| Address:  |
| Key Facility Data (if applicable)   |
| Geographical Reference Number Responsible Agency  |
| Description of Automobile:  |
| It is requested the place of employment, address of employment, residence address, organizational position of subject or description of automobile be verified and the proper notation made below. It should also be determined if the subject still meets the criteria for investigation as set forth in Section 23E of the Manual of Instructions regarding Bombing Suspects. |
| Date:   |
| Verified by SA:   |
| An LHM should be submitted to Bureau & interested agencies Yes No   |
| File Reviewed   |
| Subject does does not meet above criteria   |
| (For office use only)   |
| Status  |
| DateALL INFORMATION CONTAINED   |
| Approved  |

NW 55033 DocId:32989613 Page 98

FD-401 (Rev. 7-11-73)

OPTIONAL FORM NO. 10

MAY 1962 EDITION
GSA GEN. REG. NO. 27

UNITED STATES GOVERNMENT

# Memorandum

| тó       | :                     | DATE:  |
|----------|-----------------------|--|
| <b>*</b> |                       | 22.  |
| FROM     | :                     |  |
| SUBJECT  | <b>`</b> :            |  |
|          |                       | Re: EXTREMIST OR SECURITY INFORMANT PROGRESS/JUSTIFICATION LETTER  |
|          | I.                    |  |
|          | II.                   | Membership:  |
|          |                       | Amount paid for services and expenses:  Number of activities and persons on whom coverage is provided:   |
| ;        | AII.<br>Pieri<br>Date | TOPOLIA CONTIATION  JOPOLIA CONTIATION  JOPOLI |
|          |                       | Number of statements (written and oral) submitted:   |
|          |                       | Considered stable and reliable Yes No (Explain in "Miscellaneous.")  Indoctrinated against disclosure Yes  Percentage of information verified  |
|          |                       | All necessary action taken on information furnished Yes No (Explain in "Miscellaneous.")   |
|          |                       | Advised navments for services are to be considered as income for tax nurnoses.   |

Summary of information furnished: (If more space needed, add addendum.)

Miscellaneous: (Furnish steps being taken to advance informant, and any other pertinent information which should be brought to Bureau's attention.)



#### UNITED STATES GOVERNMENT

## Memorandum

| to |  |
|----|--|
| 1  |  |

Director, FBI

DATE:

FROM

SAC.

NOTE: Items 1 through 8 list total numbers; items 9 through 11 list dollar value; furnish details FD-405b

SUBJECT:

STATUS REPORT

EXTREMIST INFORMANTS

EXTREMIST GROUPS (WHITE-BLACK-INDIAN)

EXTREMIST MATTERS

Re: \_ 1. Informants

- - a. Listed at beginning of month
  - b. Added
  - c. Deleted
  - d. Listed at end of month
- 2. Potential Informants
  - a. Listed at beginning of month
  - b. Added
  - c. Deleted
  - d. Listed at end of month
- 3. Number of Agents assigned exclusively to the development of extremist informants

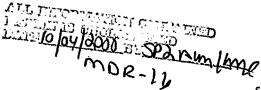
All extremist informants

Confidential Sources

White Extremist

Black Extremist

Indian Extremist



STATISTICAL ACCOMPLISHMENTS

- 4. Subjects Arrested, FBI Cases 5. Bureau Fugitives (included in Item 5) 6. Subjects Located, FBI Cases (not included in Items 5 or 6) 7. Subjects Arrested, other Federal Agencies 8. Subjects Arrested, State and Local 9. Merchandise Recovered, FBI Cases
- 10. Merchandise Recovered, State and Local
- 11. Merchandise Recovered, other Federal Agencies

Furnish complete listing quarterly - by the 10th of January, April, July, October; remaining months furnish only pertinent changes.

| Name, location and number members of black, white, & Indian extremist groups including identities of ocal chapters & extremist groups on college campuses. | Identities of informants providing coverage who are members of organization. Do not list nonmember informants. If no member informant, attach addendum and explain why you do not have member informants. Indicate specific action being taken to develop member informants and date such coverage is anticipated for each group. | Identities of individuals or groups who have participated in or are active in planning acts of extremist violence.   | Identities of informants and sources providing coverage of the individual or groups in preceding column. If no member informant, attach addendum and explain why you do not have member informants. Indicate specific action being taken to develop member informants and date such coverage is anticipated for each group. | Furnish the number of informants and sources furnishing coverage of each area. |
|--|---|--|---|--|
|  |   |  |   |  |
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|  |   | 7  |   |  |
|  |   | The state of the s |   |  |
|  |   | MATION CONTAINED   |   |  |
|  | ALL INFOR<br>HEREIN IS<br>DATE(1)   | MATION CHASSIFTED AVM W  | <b>h</b> f  |  |





#### EXTREMIST INFORMANT ACCOMPLISHMENTS

(Summarize Informant Accomplishments for Previous Month re Extremist Intelligence Information. Specifically identify those major accomplishments attributable to Confidential Sources.)

PD-4056

DETAILS FOR STATISTICAL ACCOMPLISHMENTS LISTED ON FD-405

(Include (1) Corresponding Item # from FD-405; (2) Identity of Case; (3) Field or Bufile #; (4) Type of Accomplishment.)

Date of poly of the poly of th





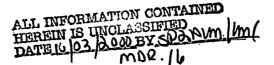
#### AUTHORITY TO RELEASE INFORMATION

#### TO WHOM IT MAY CONCERN:

Full Name:

I hereby authorize any Special Agent or other authorized representative of the Federal Bureau of Investigation bearing this release, or copy thereof, within one year of its date, to obtain any information in your files pertaining to my educational records including, but not limited to, academic, achievement, attendance, athletic, personal history, and disciplinary records; medical records; and credit records. I hereby direct you to release such information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the Federal Bureau of Investigation. Consent is granted for the FBI to furnish such information, as is described above, to third parties in the course of fulfilling its official responsibilities. I hereby release you, as the custodian of such records, and any school, college, university, or other educational institution, hospital, or other repository of medical records, credit bureau or consumer reporting agency, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below.

|          | (Signature)                                     |   |
|----------|---|---|
|          | Full Name: (Type or Print Name)                 |   |
|          | Parent or Guardian: (If required)               |   |
|          | Date:   |   |
|          | Current Address:                                | _ |
|          | Telephone Number:                               |   |
| Witness: |   |   |
|          | (Special Agent) Federal Bureau of Investigation |   |



| FD-417 (9-12-69)   | (Copies to Offices Checked)  | ```.  |
|--|--|---|
| To: Director, Att.:  |  | <del></del>   |
| Albany Albuquerque Alexandria Anchorage Atlanta Baltimore Birmingham Boston Buffalo Butte Charlotte Chicago Cincinnati Cleveland Columbia Dallas Denver Detroit El Paso Honolulu | Houston Indianapolis Jackson Jacksonville Kansas City Knoxville Las Vegas Little Rock Los Angeles Louisville Memphis Miami Milwaukee Minneapolis Mobile Newark New Haven New Orleans New York City Norfolk | Oklahoma City Omaha Philadelphia Phoenix Pittsburgh Portland Richmond Sacramento St. Louis Salt Lake City San Antonio San Diego San Francisco San Juan Savannah Seattle Springfield Tampa Washington Fiel |
| RE:  | Date   |   |
|  |  |   |
| REMARK S:  | 7041   |   |
| REMARKS:  INFORMATION CON REIN IS UNCLASSIFI FEL 03 800 BYSE  OOR. )   | Brulm(   |   |

| Extremist Photograph Album  | Arab Photograph Album                      |
|---|--|
| . Name  |  |
| 2. Aliases  |  |
| 3. Date and Place of Birth  |  |
| 4. Citizenship 6. Race 7. Height 8. Weight white  |  |
| 5. Sex  | РНОТО                                      |
| 11. Build small medium large thin athletic obese  | ·  |
| 12. Characteristics  glasses dark glasses mustache beard Afro clothes Afro hairdo bushy short long  |  |
| others:  13. Scars and marks  | 117)                                       |
| 14. Tattoos   | 17452                                      |
| 15. Marital status  single married separated divorced  16. Education (check highest) elementary junior high school high school college other: |  |
| . Military  Army Navy Marine Corps Coast Guard  | Date taken                                 |
| 18. Residence   | 21. Relatives (list name and city)  Father |
| 19. Occupation  | Mother                                     |
| 20. Employer  | Others                                     |
|   |  |
| 22. Identifying Numbers   | Social Security Alien Registration         |
| FBI No Military No  |  |
| Passport No.  | issuedOthers                               |
| 23. Known to carry weapons  No Yes Type   | 25. Fingerprint Classification             |
| 24. Previous Felony Conviction  |  |
| □ No □ Yes Offense  |  |
| 26. Extremist Activities Arab Activities  | Official                                   |
| Affiliated with   |  |
| if none, succinct characterization  | (use other side if necessary)              |
| ALL INFORMATION File No.  ALL INFORMATION IS WICE DATE 16 103 A016  | Bufile No. Date prepared                   |

MOR-16

FD-432a (Rev. 3-29-73)
OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA GEN. REG. NO. 27

UNITED STATES GOVERNMENT

# Memorandum

| 10      | : Director, FBI (157-23582)  | DATE:                            |   |
|---------|--|----------------------------------|---|
| FROM    | : SAC,   |                                  |   |
| SUBJECT | EXTREMIST PHOTOGRAPH ALB EXTREMIST MATTERS                                   |                                  | PRIST PHOTOGRAPH ALBUM (APA)<br>ECURITY - MIDDLE EAST |
| C       | heck applicable statement:   |                                  |   |
|         | Enclosed for Bureau are  FD-432, regarding  for inclusion in Extremist Photo |                                  | ivision, one copy of                                  |
|         | Enclosed for Bureau are  | copies and for each Field D      | ivision, one copy of amended                          |
|         | Enclosed for Bureau are  | copies and for each Field D      | ivision, one copy of new                              |
|         | Bureau authority has been granted from the EPA APA. Rem                      | to delete<br>ove FD-432 from EPA | APA and destroy.                                      |

J 432 a

- 1 Bureau (Enc.)
- 1 All Offices (Enc.)

mor-10 som spamfing

UNITED STATES GOVERNMENT

## Memorandum

TO

: Director, FBI

DATE:

FROM

SUBJECT:

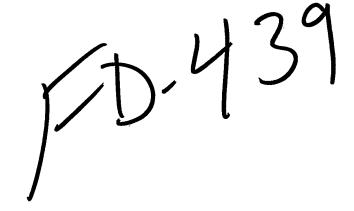
SECURITY INFORMANTS AND ASSETS

1. Security Informants and Assets

Note: Submit quarterly, in each instance to reach the Bureau by the 15th day of submitting month without fail.

(January, April, July, October)

|     |                                      | PSI | SI | IA | OA |
|-----|--------------------------------------|-----|----|----|----|
| (a) | Total number at beginning of quarter |     |    |    |    |
| (b) | Total number added during quarter    |     |    |    |    |
|     | (symbol number of each below)        |     |    |    |    |
| (c) | Total number deleted during quarter  |     |    |    |    |
|     | (symbol number of each below)        |     |    |    |    |
| (b) | Total number at end of quarter       |     |    |    |    |





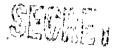
2 - Bureau

FD-449 (11-18-71) OPTIONAL FORM NO. 10 MAY 1962 EDITION GSA GEN. REG. NO. 27



UNITED STATES GOVERNMENT

# Memorandum



| T/1 |  |
|-----|--|

SAC (105-

IS - IS - CHINA, CUBA (OO:

) (P)

(SOBIR)

DATE:

FROM

SUBJECT:

| INS,, advised that                  |                                      |                        |
|-------------------------------------|--------------------------------------|------------------------|
| ARN A                               | _, entered the United States on      | ,                      |
| at                                  |                                      | , and was destined for |
| (City                               | and/or Name and Address of Sponsors) |                        |
| The INS file further reflected      | the following:                       |                        |
| Date and Place of Birth:            |                                      |                        |
| Occupation:                         | -                                    |                        |
| Education or Professional Training: | ,                                    |                        |
| Residence (current):                |                                      |                        |
| Residence (prior to entry):         |                                      |                        |
|                                     |                                      |                        |

A new 105- case should be opened on this memo for a complete review of subject's INS file to determine

Indices of this office reflect the following re subject and sponsors:

CLASSIFIED BYSPARM LMT DECLASSIFY ON: 25X L MOR-IV

, Clerk,

Date last left communist country:

if further inquiry should be conducted re subject.

FD-450 (Rev. 10-23-73)
optional form no. 10
may 1992 Edition
gsa gen. reg. no. 27



UNITED STATES GOVERNMENT

# Memorandum

| COMPUTERIZED TELEPHONE NUMBER FILE (   | CTNF) - ENTRY AND SEARCH REQUEST   |
|--|--|
| TO : Director, FBI Att.: Data Processing Section   | DATE:  |
| FROM : SAC,  |  |
| SUBJECT:   | 450  |
| 1. Subject's Name  | _ Field File #   |
| Field Office Te Action: Add to file Area Code Te   | lephone #  |
| ☐ Modify Record (Indicate modifications under "☐ Delete from file Area Code  | Remarks" below; always list current CTNF telephone number.)                                  |
| Telephone Subscriber's:  | Telephone H Telephone Located at: (If different from subscriber)                             |
| Name   |  |
| Address  |  |
|  |  |
| Telephone data for period (including month and year)  Billing number(s) including area code, city and state  | phone toll tickets other (specify) numbers to be searched against CTNF, insure area code and |
| Remarks:   |  |
| ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE(0)03 3000 BYSPO DATE(0)03 BYSPO DATE(0)04 BYSPO DATE(0)05 BYSPO BY | ERS' USE ONLY  |
| RETURN TO SAC,   | Date   |
| HIT LIST - Attached Forwarded under sepa "TO AND BILLING NUMBER" LISTINGS - Atta   |  |
| TELEPHONE NUMBERS MARKED BY "*" ON BILL  | NG STATEMENT not processed because   |
| COLCTION TAKEN CO. A33 CO. Doloto Co. Doloto   | ☐ ILLEGIBLE ☐ INSUFFICIENT DATA  |
| ☐ ACTION TAKEN - ☐ Add ☐ Delete ☐ Reco<br>☐ BILLING NUMBER - ☐ Included ☐ Not included   | rd modified Telephone data analysis<br>in CTNF   |
| W 55 <del>03</del> Doc1d:32989613 Page 110   |  |

FD-451 (Rev. 1-14-75) OPTIONAL FORM NO. 10 MAY 1962 EDITION GSA GEN. REG. NO. 27



5010-106

UNITED STATES GOVERNMENT

# $\it 1emorandum$

| T  |  |
|----|--|
| 10 |  |

: Director, FBI

DATE:

**FROM** 

: SAC,

NOTE: Items 1 through 9 list total numbers; items 10 through 12 list dollar value; furnish details FD-451a.

INCLUDE ALL SECURITY IN-FORMANTS, ASSETS AND SOURCES. DO NOT INCLUDE BLACK

EXTREMIST OR WHITE HATE INFORMANTS OR SOURCES.

SUBJECT: STATUS REPORT (MONTHLY)

SECURITY INFORMANTS, ASSETS AND SOURCES

| 1. | Informants | (Approved) |
|----|------------|------------|

- a. Listed at beginning of month
- b. Added
- c. Deleted
- d. Listed at end of month

## 2. Informants (Under Development)

- a. Listed at beginning of month
- b. Added
- c. Deleted
- d. Listed at end of month

| h<br>h   | Security<br>Informants | Potential Security Informants | Confidential<br>Sources | Panel<br>Sources | Operational<br>Assets | Informative<br>Assets |
|----------|------------------------|-------------------------------|-------------------------|------------------|-----------------------|-----------------------|
|          |                        |                               |                         |                  |                       |                       |
| .)<br>.h |                        |                               |                         |                  |                       |                       |
| ••       |                        |                               |                         |                  |                       |                       |

- 3. Number of Agents assigned exclusively to the development of security informants, assets, confidential sources and panel sources
- 4. Total amount of money paid to security informants, assets, confidential sources and panel sources for information concerning subversive organizations and individuals under SAC authority.

Services

Expenses

Total

## STATISTICAL ACCOMPLISHMENTS

- 5. Subjects Arrested, FBI Cases
- 6. Bureau Fugitives (included in Item 5)
- 7. Subjects Located, FBI Cases (not included in Item 5 or 6)
- 8. Subjects Arrested, other Federal Agencies
- 9. Subjects Arrested, State and Local
- 10. Merchandise Recovered, FBI Cases
- 11. Merchandise Recovered, State and Local
- 12. Merchandise Recovered, other Federal Agencies

ALL TIFOE MATHON CONTAINED

A.





SECURITY INFORMANT AND ASSET ACCOMPLISHMENTS

(Summarize Significant Informant Accomplishments for Previous Month.)
(Do not Include any Information that would Divulge the Identity of any Informant or Asset.)

FD451a

B. DETAILS FOR STATISTICAL ACCOMPLISHMENTS LISTED ON FD-451
(Include (1) Corresponding Item # from FD-451; (2) Identity of Case; (3) Field or Bufile #; (4) Type of Accomplishment.)

HEREIN IS UPICLABELIADO DATE 10 03 6000 LY 520 pm /m/

| Furnish complete listing quarter | ly - b | y the 10th of Januar | y. April. July. October: | remaining months furnish only | pertinent changes. |
|----------------------------------|--------|----------------------|--------------------------|-------------------------------|--------------------|
|----------------------------------|--------|----------------------|--------------------------|-------------------------------|--------------------|

| Furnish complete listing quarterly - by the  | 10th of January, April, July, October; remainin  |  |   |
|--|--|--|---|
| A. Name, location and number of subversive groups including identities of groups on college campuses, exclusive of those in black extremist, white hate, or espionage matters. | B. Symbol numbers of member informants or assets providing coverage who are members of organizations. Do not list nonmember informants. If no member informant, attach addendum and explain why you do not have member informants. Indicate specific action being taken to develop member informants and date such coverage is anticipated for each group. | C. Identities of individuals or groups who have participated in or are active in planning subversive acts of violence, exclusive of those in black extremist, white hate or espionage matters. | D. Symbol numbers of informants, assets and sources providing coverage of individuals or groups shown in Column C. If no member informant, attach addendum and explain why you do not have member informants. Indicate specific action being taken to develop member informants and date such coverage is anticipated for each group. |
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|  | moe-11   |  |   |
|  |  | }  |   |





# UNITED STATES GOVERNMENT

# Memorandum

| го     | : DATE:  |     |
|--------|--|-----|
| FROM   | :  |     |
|        |  |     |
| UBJECT | Γ:   |     |
|        | Name of Employee REQUEST FOR ADVANCE OF FUNDS  |     |
|        | The following information, along with the completed Standard Form 1038, is submitted to request advance of funds for   |     |
|        | Mileage Per Diem Temporary Quarters  |     |
|        | relative to official transfer fromto   |     |
|        | •  |     |
|        | 1. Rand McNally mileage between transfer points is   |     |
|        | 2. Names and ages of dependents who will accompany employee are:   |     |
|        | CHECK and COMPLETE Item 3 or Item 4, as appropriate.   |     |
|        | 3. (a) Employee and family will depart WDC Old Duty Station  |     |
|        | on via POA.  |     |
|        | (b) Employee and family will requiredays per diem. The maximum amount to be advanced is based upon one day for each 300 miles or ¼ day for each 75 miles or fraction thereof for the Rand McNally mileage between transfer points.   |     |
|        | 4. (a) Employee will depart WDC onvia POA Common Carrier (date)  |     |
|        | to pick up family at residence in  Employee and family will travel to new duty station via POA.  |     |
|        | (b) Advance mileage and per diem are allowed for miles actually traveled by POA; employee is entitled to allowance for miles.  miles.  miles: The Company of | Mb. |
|        | (c) Based upon the 300 miles-a-day rule, allowed days peridiemy (c) (1) (1)  |     |
|        | for employee for family  | TNU |

| FIELD OFFICE | DATE |
|--------------|------|
|              |      |

# FM RADIO INSTALLATION DATA

| NOITATS      |                   |                                  |                 | ASSOCIATED EQUIPMENT |                |                     |      |
|--------------|-------------------|----------------------------------|-----------------|----------------------|----------------|---------------------|------|
| Location Nam | e                 | Call Sign                        | i M             | fg                   |                |                     |      |
| Transmits    | s to              |                                  | 1 M             | ombination<br>lodel  |                | CombinationSerial # |      |
| Receives     | from              |                                  |                 |                      |                |                     |      |
| ilse Be      | se ECC Reneater   |                                  | eater , M       | ransmitter<br>odel   |                | Receiver<br>Model   |      |
|              | 400/T167 Repeater |                                  |                 |                      |                |                     |      |
| Frequenci    | ies T             |                                  | <b>)</b> i      | war - mianian T in a | Time           |                     |      |
|              |                   |                                  | 1 '             | tansmission Dine     | - <del>-</del> |                     |      |
|              |                   |                                  | 1               | Ouplexer             | Mfg.           | ·                   |      |
|              |                   |                                  | 1               |                      | Model          |                     |      |
| Lat. & Long. |                   | N                                | WIC             | Control              | Landline #s    |                     |      |
| • ;          | DECHIDED ANTENNA  | D174                             | ) ;             |                      |                |                     |      |
|              | REQUIRED ANTENNA  | _                                |                 |                      | Squelch keyed  |                     |      |
| <b>(T)</b> Y | agi Omni          | Ground elevation above sea level | i r             | Distance from Field  |                | AIR M               |      |
|              |                   | •                                |                 | •                    | or             | road m              | iles |
| Gain         | Bearing           | Antenna Height above Ground      | i s             | tructure             |                |                     |      |
| (R) Y        | agiOmni           | <del></del>                      | 1 (             | pole, tower, bldg.)  |                |                     |      |
|              |                   | Ground Elevation above           | 1               | lemarks              |                | ORMATION CONTAIN    | ED   |
| Gain         | Bearing           | Sea Level                        |                 | temarks              | ALL INC        | OBMATION CONTACTOR  | W W  |
|              |                   | Antenna Height                   | 1               |                      | DATE           | MDR-16              |      |
|              |                   | above Ground                     | <del></del> ¦ - |                      |                | 11.55-10            |      |

A SEPARATE FORM SHOULD BE PREPARED FOR EACH UNIT

FD-464 (Rev. 3-12-74) OPTIONAL FORM NO. 10 MAY 1962 EDITION GSA GEN. REG. NO. 27

TO



UNITED STATES GOVERNMENT

# Memorandum

| то      | : Director, FBI  | DATE:                 |                                      |
|---------|--|-----------------------|--------------------------------------|
| FROM    | : SAC,   |                       | ment and Administrative<br>s Section |
| SUBJECT | : CLERICAL IDENTIFICATION CARD   |                       |                                      |
|         | There is enclosed the negative as with a request that a new repared for the above employee. This request | ☐ Identification Card | Credential Card be                   |
|         | New Employee (EOD:   | )                     |                                      |
|         | Lost Identification Card (See  | emarks below.)        |                                      |
|         | Married - Payroll Name   |                       |                                      |
|         | Damaged (See remarks below.)   |                       |                                      |
|         | Reassignment from  | to                    |                                      |
|         | Return to duty from Military Se  | rvice                 |                                      |
|         | Other (Example: Not a good li  | keness.)              |                                      |
| Re      | Enclosed is signed property reconstruction of the following employed emarks:                             |                       | Identification Card                  |
|         | 1/1/   | 101                   |                                      |

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 10 03 600 BY 50 ALM MAR-16

| <b>/</b> ▼                                      |  |
|---|--|
|   | (Date)                                       |
|   |  |
|   | (Location)                                   |
|   |  |
| I,(Name)  |  |
|   |  |
| (Address)                                       | , hereby                                     |
| ) 1   | <b>`                                    </b> |
| authorize                                       | and  |
| 1111  | 1  |
|   | , Special Agents of the                      |
| I   |  |
| Federal Bureau of Investigation, United States  | Department of Justice, to install a          |
|   |  |
| recording device on a telephone located at      | (Location)                                   |
|   |  |
| for the purpose of recording any conversation I | may have on that telephone with              |
|   |  |
| (Name of Subject(s))                            | on or about(Date)                            |
|   |  |
| I have given this written permis                | ssion to the above-named Special             |
| Agents voluntarily, and without threats or prom | nices of any kind                            |
| Agents voluntarily, and without threats of pro- | nises of any kind.                           |
|   |  |
|   | (Signature)                                  |
| Witnesses:                                      |  |
|   |  |
|   | -  |
|   |  |
|   | -<br>-<br>シ <sub>*</sub>                     |
|   |  |

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10 03/3010 BY 500 Pum/um(

| <i>γ.</i> <b>Æ</b>   | •  |
|--|--|
| -  | (Date)   |
|  |  |
|  | (Location)   |
|  |  |
| I,(Name)   | ,  |
|  | <b>~ ~ ~</b>   |
| hereby authorize   | and  |
| Federal Bureau of Investigation, United States D           | , Special Agents of the epartment of Justice, to place a |
| ☐ Body Recorder on my person for the purpose ☐ Transmitter | of recording any conversations                           |
| with   |  |
| (Name of Subject(s   | ))   |
| which I may have on or about(Date)                         | •  |
| I have given this written permiss                          | ion to the above-named Special                           |
| Agents voluntarily and without threats or promis           | es of any kind.  |
|  |  |
|  | (Signature)  |
| Witnesses:   |  |
|  |  |
|  | 7  |
|  |  |

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10 03 2000 BY 5PO PLM / IM C

# IST OF FILES DESTROYED



Files crossed off on this list have been reviewed and destroyed per MRR-II, Section 3, and SAC Memorandum 52-74 (A) dated 11-5-74. Index cards to be retained 20 years and then destroyed as encountered.

### CLASSIFICATION -

|             |           | <del></del>                     |          | Date      | FICATION -  | 1            |           | Date        |
|-------------|-----------|---------------------------------|----------|-----------|-------------|--------------|-----------|-------------|
| File Number | 00        | 00 File                         | #        | Destroyed | File Number | 00           | OO File # | Destroyed   |
| 01          |           |                                 |          |           | 51          |              |           |             |
| 02          |           |                                 |          |           | 52          |              |           |             |
| 03          |           |                                 |          |           | 53          |              |           |             |
| 04          |           |                                 |          |           | 54          |              |           |             |
| 05          |           |                                 |          |           | 55          |              |           |             |
| 06          |           |                                 |          |           | 56          |              |           |             |
| 07          |           |                                 |          |           | 57          |              |           |             |
| 08          |           |                                 |          |           | 58          |              |           |             |
| 09          |           |                                 |          |           | 59          |              |           |             |
| 10          |           |                                 |          |           | 60          |              |           |             |
| 11          |           |                                 |          |           | 61          |              |           |             |
| 12          |           |                                 |          |           | 62          |              |           |             |
| 13          |           |                                 |          |           | 63          |              |           |             |
| 14          |           |                                 |          |           | 64          |              |           |             |
| 15          |           |                                 |          |           | 65          |              |           |             |
| 16          |           |                                 |          |           | 66          |              |           |             |
| 17          |           |                                 |          |           | 67          | <u> </u>     |           |             |
| 18          |           |                                 |          |           | 68          |              |           |             |
| 19          |           |                                 |          |           | 69          |              |           |             |
| 20          |           |                                 |          |           | 70          |              |           |             |
| 21          |           |                                 |          |           | \( \)       | *            |           | <u> </u>    |
| 22          |           |                                 |          |           | 1 2         | <del></del>  |           | -           |
| 23          |           |                                 |          |           | 73          | <del>U</del> |           |             |
| 24          | -         |                                 | -        |           | 74          | <del></del>  |           |             |
| 25          |           |                                 |          |           | 75          |              |           |             |
| 26          |           |                                 | <u>`</u> |           | 76          |              |           | <del></del> |
| 27          | ,         |                                 | 1 -      |           | 77          |              |           | :           |
| 28          |           |                                 |          |           | 78          |              |           |             |
| 29          |           |                                 |          |           | 79          |              |           |             |
| 30          |           |                                 |          |           | 80          |              |           |             |
|             |           |                                 |          |           |             |              |           |             |
| 31          |           |                                 |          |           | 81          |              |           | <del></del> |
| 32          |           |                                 |          |           | 82          |              |           |             |
| 33          |           | ļ                               |          |           | 83          |              |           |             |
| 34          |           |                                 |          |           | 84          |              |           |             |
| 35          |           |                                 |          |           | 85          |              |           |             |
| 36          |           |                                 |          |           | 86          |              |           |             |
| 37          |           |                                 |          |           | 87          |              |           |             |
| 38          |           |                                 |          |           | 88          |              |           |             |
| 39          |           |                                 |          |           | 89          |              |           |             |
| 40          |           |                                 |          |           | 90          |              |           |             |
| 41          |           |                                 |          |           | 91          |              |           |             |
| 42          |           |                                 |          |           | 92          |              |           |             |
| 43          |           |                                 |          |           | 93          |              |           |             |
| 44          |           |                                 |          |           | 94          |              |           |             |
| 45 ALL      | INFORMA   | TION COI<br>CLASSIFI<br>OOOBY_S | TATATATE | n         | 95          |              |           |             |
| 46 HER      | ELV IS U  | CLASSIFI                        | ED       | T         | 96          |              |           |             |
| 47 DAT.     | E10 103 / | OOOBYS                          | Panu     | line      | 97          |              |           |             |
| 48          | m         | DR-16                           |          |           | 98          |              |           |             |
| 49          | - ' '     | W1 10                           | ······   |           | 99          |              |           |             |
| 50          |           | <del> </del>                    |          |           | 00          |              |           |             |

This page contains file numbers from \_\_\_\_\_\_ thru \_\_\_\_\_ thru

# FILES AND RECORDS DESTRUCTION ORDER

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10 103 1000 BYSPA AM/M (
MDR-)6

| Wanted-Flash-Cancellati<br>I-12 (Rev. 6-17-74)<br>TO: DIRECTOR, FBI<br>Washington, D. C. |                    | Attention: Ide   | entification Division                     | •             | Date       |              |                |
|--|--------------------|------------------|---|---------------|------------|--------------|----------------|
| Dear Sir:  Instructions on t Fingerprint Record of su                                    | he reverse side of | this form have b | een read. Please plac                     |               |            |              |                |
|  |                    |                  | Your Case or File N                       | umber         |            |              |                |
| WANTED FOR   |                    |                  | Date of                                   | Warrant or E  | scape      |              |                |
| FLASH:<br>MANDATORY RELEAS   | SE19E              | XPIRES           | 19; PAROLE                                | 19 EXE        | PIRES      | 19;          |                |
|  |                    |                  | VTENCE EXPIRESING INFORMATION:            | 19; SI        | PT EXPIRE  | ES1          | 9              |
| Date and Place of Sente  | ence               |                  | Final Disposit                            | ion           |            |              |                |
| Charge   |                    |                  |   |               |            |              |                |
| Contributor of Fingerprin  | nts                |                  |   |               |            |              |                |
| CANCEL Because _   |                    |                  |   |               |            |              |                |
| Name   |                    | 1                | Residence                                 |               |            |              |                |
| Aliases  | Numbers            | · l              |   | Occupat       | ion        |              | Marital Status |
|  |                    |                  |   | Race          | Sex        | Height       | Nationality    |
| FBI #  | Military           |                  |   | Weight        | Eyes       | Hair         | Complexion     |
| Date of birth  | Alien              |                  |   | Scars, m      | arks and p | eculiarities | <u> </u>       |
| Pl ace of birth  | Social Secu        | rity             |   |               |            |              | MANENTLY IN    |
| Fingerprint class  |                    |                  | PLEASE F                                  | URNISH IDEN   |            |              | D.             |
| •  |                    |                  | Will ex                                   | tradite 🗀     | Will not e | extradite    |                |
| Agency and Address of I notified of apprehension   | Parties to be      |                  | Name and Addr                             | ess of Contri | butor      |              |                |
| ALL THE<br>HEF WIN<br>DALL 10  | OFMATION CO        | NTALIED          |   |               |            |              |                |
| ,  | mur-               | 16               | S. J. |               |            |              | •              |
| 3  | 89613 Page         | See over:        | for Instructions                          |               |            |              |                |

Request WANTED notice when subject's apprehension or location is desired.

Request FLASH notice when subject is placed on parole or probation and you desire to be advised if he is arrested while in this status. Fingerprints for offense must be in Identification Division files or FBI number furnished when requesting flash notice.

Request CANCELLATION when subject's custody is secured or you no longer desire information concerning him.

The Name, Number, and Agency should be exactly the same as they appear on the Fingerprint card in the files of the FBI. In all instances when the FBI number is known, it should be indicated.

In the event a Law Enforcement Agency is not certain there is a previous Fingerprint Record for the subject in the files of the FBI and desires a Wanted Notice posted, the descriptive data indicated on this form should be completed. If a possibly identical record is located by the FBI, it will be furnished in order that the Law Enforcement Agency may determine whether or not this record is identical with the subject wanted. Wanted or Flash Notices are not posted in our files unless positive identifications can be effected. Therefore, if an identification with a particular Fingerprint Record is made by you after receipt of possibly identical information from us, it will be necessary to resubmit this form so that the notice can then be posted in your behalf.

| 39 (Rev. 2-21-56)  |                       |
|--|-----------------------|
| ;<br>**  | #<br>*                |
| •  |                       |
|  |                       |
|  | Date                  |
|  |                       |
| 0:   |                       |
| Card Index Section - Specie                                      | ri Desk               |
| Fingerprint Correspondence                                       | e Section - Room 1311 |
| Recording Section - Special                                      | l Desk                |
| Technical Section - Special                                      | l Desk                |
| ACE A STOP ON:   |                       |
| Incoming fingerprint card  |                       |
| "Recorded" fingerprint card                                      | - a                   |
| ame  |                       |
|  | , )                   |
| ontributor   |                       |
| rrest #  | FBI #                 |
| ingerprint classification  | ·                     |
| ate recorded   | Date charged out      |
|  |                       |
| andled   | 1.                    |
| ALL INFORMATION CO<br>HEREIN IS UNCLASSIF<br>DATE 10 103 JAM PUR | NTAINED               |
| DATE 10/03 JAMA BY   | TED .                 |
| Requested by   | mountait              |
| •  |                       |
| Section  | Room Number           |





## UNITED STATES DEPARTMENT OF JUSTICE

# FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

In Reply, Please Refer to File No.

The fingerprints of the person or persons named below have been forwarded to the officials at the point or points indicated. A search of their files disclosed the following:

Name

Officials at

No Record

Record Attached

140

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE(0)03 6000 BY 500 Aum (Im (

Identification Division FBI

|           |   |               | ,      |
|-----------|---|---------------|--------|
| NAME-     |   | DATE /        | 1      |
| NO        | STOP Date                                       | of Birth / /  |        |
| BUR. FUG. | LETTE   | R             |        |
| PRINT     | WIRE  | •             |        |
| 1-42 M    | ALI, INFORMA<br>DATE 10 0 3 0<br>613 Page 12906 | mi ba 269 div | alloc_ |

1-42

4

1-381 (Rev. 5-23-72) FENERAL BUREAU OF INVESTIGATION WASHINGTON, D. C. 20537

| Date | <b>)</b> |
|------|----------|
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TO:

Enclosed is a copy of one or more Identification Records, or data without an enclosure, concerning

This information is being brought to your attention for any action you may wish to take. If it relates to a civilian employee of the Government, the Civil Service Commission is being separately advised.

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| easons Given for Separation  1 - Return to Home Area  2 - Homesick for Family and Friends  3 - Unable to Adjust to City Environment  4 - Living Costs  5 - Transportation  5 - Housing  7 - Concern over City Life (Crime, etc.)  3 - Dissatisfaction with Assignment  2 - Dislike of Production or Work Standards  3 - Dislike Performing Overtime  1 - Dislike Shift Assignment  2 - Working Conditions — Physical Plant (e.g. no air conditioning)  3 - Working Conditions (other than physical plant)  4 - Lack of Promotional Opportuni  5 - Military  1 - Other Employment  31 - Promotional Prospects or Better Salary —   | Albany   | Albuquerque | Alexandria     | Anchorage | Atlanta  | 3050 Baltimore | 3070 Birmingham | ston        | Buffalo       | Charlotte  | Chicago  | Cincinnati     | Cleveland | Columbia | Dallas  | Denver          | troit        | El Paso  | nolulu        | Indianapolis | Jackson  | Jacksonville | 3350 Kansas City | Knoxville | 3380 Las Vegas | Little Rock | 3410 Los Angeles | Louisville   | Memphis      | Miami<br>Milwankee | Minneapolis | Mobile           |              |
| 2-Homesick for Family and Friends 3-Unable to Adjust to City Environment 4-Living Costs 5-Transportation 6-Housing 7-Concern over City Life (Crime, etc.) 8-Dissatisfaction with Assignment 9-Dislike of Production or Work Standards 0-Dislike Performing Overtime 1-Dislike Shift Assignment 2-Working Conditions — Physical Plant (e.g., no air conditioning) 3-Working Conditions (other than physical plant) 4-Lack of Promotional Opportunit 0-Military 0-Other Employment 31-Promotional Prospects or Better Salary — Other Government 32-Promotional Prospects or Better Salary — Private Industry 33-Promotional Prospects or Better Salary — Self Employment 34-Enter Different Field - Other Government 35-Enter Different Field - Private Industry 36-Enter Different Field - Self Employment 0-Poor Health (self) 1-Poor Health (family)   | 3010 Alb |             |                | 3030 An   | 3040 Atl | 50 Ba          | 70 Bir          | 3090 Boston | 3110 Bu       |  |  | 3160 Cir       | 3170 Cle  | 3180 Co  | 3190 Da | 3210 De         | 3220 Detroit | 3240 El  | 3280 Honolulu | 3310 Ind     | 3320 Jac | 3330 Jac     | 50 Kaı           | 3370 Kn   | 80 La          | 3390 Lit    | 10 Los           |              |              | 3460 Mia           |             |                  |              |
| 22-Homesick for Family and Friends 33-Unable to Adjust to City Environment 44-Living Costs 55-Transportation 66-Housing 77-Concern over City Life (Crime, etc.) 88-Dissatisfaction with Assignment 99-Dislike of Production or Work Standards 10-Dislike Performing Overtime 11-Dislike Shift Assignment 12-Working Conditions — Physical Plant (e.g. no air conditioning) 13-Working Conditions (other than physical plant) 14-Lack of Promotional Opportunit 19-Ohlitary 10-Other Employment 11-Promotional Prospects or Better Salary — Private Industry 13-Promotional Prospects or Better Salary — Private Industry 13-Promotional Prospects or Better Salary — Self Employment 14-Enter Different Field - Other Government 15-Enter Different Field - Private Industry 16-Poor Health (self) 1-Poor Health (family) 12-Marriage   | 8        | 8           | 30             | 30        | 30       | 8              | က               | 8           | <u> </u>      | <u> </u>   | 3 2  | 3              | <u>.</u>  | 31       | 3.1     | 32              | 3            | 33       | 33            | 3 8          | 33       | 33           | 33               | 33        | 33             | 33          | 34               | 34           | 34           | 34                 | 34          | \frac{\kappa}{2} | 1            |
| 3-Unable to Adjust to City Environment  4-Living Costs  5-Transportation  6-Housing  7-Concern over City Life (Crime, etc.)  8-Dissatisfaction with Assignment  9-Dislike of Production or Work Standards  0-Dislike Performing Overtime  1-Dislike Shift Assignment  2-Working Conditions — Physical Plant (e.g., no air conditioning)  3-Working Conditions (other than physical plant)  4-Lack of Promotional Opportunit  0-Military  0-Other Employment  31-Promotional Prospects or Better Salary — Other Government  32-Promotional Prospects or Better Salary — Private Industry  33-Promotional Prospects or Better Salary — Self Employment  34-Enter Different Field - Other Government  35-Enter Different Field - Private Industry  36-Enter Different Field - Self Employment  0-Poor Health (self)  1-Poor Health (family)  |          | <u> </u>    | L              |           | _        | L              |                 |             | _             | 1  | $\downarrow$                                     | _              |           |          |         |                 | _            | 4        | $\bot$        | -            | <u> </u> |              |                  |           | _              |             |                  | _            | 4            | $\downarrow$       | ļ           | ـــــ            | 1            |
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| 16 - Housing 17 - Concern over City Life (Crime, etc.) 18 - Dissatisfaction with Assignment 19 - Dislike of Production or Work Standards 10 - Dislike Performing Overtime 11 - Dislike Shift Assignment 12 - Working Conditions — Physical Plant (e.g. no air conditioning) 13 - Working Conditions (other than physical plant) 14 - Lack of Promotional Opportunit 19 - Military 10 - Other Employment 11 - Promotional Prospects or Better Salary — Other Government 12 - Promotional Prospects or Better Salary — Private Industry 13 - Promotional Prospects or Better Salary — Self Employment 14 - Enter Different Field - Other Government 15 - Enter Different Field - Private Industry 16 - Proor Health (self) 16 - Poor Health (family) 17 - Concern over City Life (Crime, etc.) 18 - Dissatisfaction with Assignment 19 - Concern over City Life (Crime, etc.) 19 - Concern over City Life (Crime, etc.) 10 - Other Standards 10 - Dissatisfaction with Assignment 10 - Poor Health (self) 11 - Poor Health (family) 12 - Marriage |          |             | Щ              |           |          | _              |                 | _           | _ _           | -  | 1  | <u> </u>       |           |          |         |                 | _            | 4        | _             | _            | L        |              | <u> </u>         | _         |                | Ш           |                  | 4            | 4            | $\perp$            | <u> </u>    | <u> </u>         | ļ            |
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| 0-Dislike Performing Overtime  1-Dislike Shift Assignment 2-Working Conditions — Physical Plant (e.g., no air conditioning)  3-Working Conditions (other than physical plant)  4-Lack of Promotional Opportunit  0-Military  0-Other Employment  31-Promotional Prospects or Better Salary — Other Government  32-Promotional Prospects or Better Salary — Private Industry  33-Promotional Prospects or Better Salary — Self Employment  34-Enter Different Field - Other Government  35-Enter Different Field - Private Industry  36-Enter Different Field - Self Employment  0-Poor Health (self)  1-Poor Health (family)  2-Marriage  |          |             | Ц              |           |          |                |                 | $\dashv$    |               | _  | _  |                |           |          |         |                 | _            | _        | $\perp$       |              |          |              |                  |           |                |             | _                | _            | 4            |                    | L           | L                | $\downarrow$ |
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| 0-Military  0-Other Employment  31-Promotional Prospects or Better Salary — Other Government  32-Promotional Prospects or Better Salary — Private Industry  33-Promotional Prospects or Better Salary — Self Employment  34-Enter Different Field - Other Government  35-Enter Different Field - Private Industry  36-Enter Different Field - Self Employment  0-Poor Health (self)  1-Poor Health (family)  2-Marriage   |          |             | П              |           |          |                |                 | 一           | $\neg$        | 1  | Τ  | T              |           |          |         |                 | $\exists$    |          |               | 1            |          |              |                  |           |                | П           |                  | T            | T            |                    |             | Г                | T            |
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| 31 - Promotional Prospects or Better Salary — Other Government 32 - Promotional Prospects or Better Salary — Private Industry 33 - Promotional Prospects or Better Salary — Self Employment 34 - Enter Different Field - Other Government 35 - Enter Different Field - Private Industry 36 - Enter Different Field - Self Employment 0 - Poor Health (self) 1 - Poor Health (family) 2 - Marriage   | 1        |             | <del>ا</del> ا | П         |          | $\vdash$       |                 | $\dashv$    | $\dashv$      | $\dagger$  | +-   |                |           |          | _       | $\Box$          | 7            | 1        | +             | ╁            |          | -            |                  |           |                |             |                  | 7            | $\dagger$    | $\top$             | T           | $\vdash$         | t            |
| Private Industry  33 - Promotional Prospects or Better Salary — Self Employment  34 - Enter Different Field - Other Government  35 - Enter Different Field - Private Industry  36 - Enter Different Field - Self Employment  0 - Poor Health (self)  1 - Poor Health (family)  2 - Marriage   |          |             |                |           |          |                |                 | _           | 1             | _  |  |                |           |          |         |                 | $\dashv$     |          |               | +            |          |              |                  |           |                |             |                  | 1            | 1            | -                  |             | F                | t            |
| 35-Enter Different Field - Private Industry 36-Enter Different Field - Self Employment 0-Poor Health (self) 1-Poor Health (family) 2-Marriage   |          |             |                |           |          |                |                 |             |               |  |  |                |           |          |         |                 |              |          |               |              |          |              |                  |           |                |             |                  | $\downarrow$ | $\downarrow$ |                    |             |                  | +            |
| 36 - Enter Different Field - Self Employment 0 - Poor Health (self) 1 - Poor Health (family) 2 - Marriage   |          |             |                | _         |          |                |                 |             |               | $\perp$  | $oxed{\bot}$                                     |                |           |          |         |                 |              | $\perp$  | $\perp$       |              | Ш        |              |                  | L         |                |             |                  | _            | 4            |                    | L           | L                | $\downarrow$ |
| 0 - Poor Health (self) 1 - Poor Health (family) 2 - Marriage  |          |             |                |           |          |                |                 |             |               | L  |  |                |           |          |         |                 |              |          |               |              |          |              |                  | L         |                | Ш           |                  | _            | $\perp$      | ┸                  |             |                  | 1            |
| 1 - Poor Health (family) 2 - Marriage   |          |             |                |           |          |                |                 |             |               |  |  | L              |           |          |         |                 |              |          |               |              |          |              |                  |           |                |             |                  |              | $\perp$      |                    | L           | L                | L            |
| 2 - Marriage  |          |             |                |           |          |                |                 |             |               |  |  |                |           |          |         |                 |              |          |               |              |          |              |                  |           |                |             |                  |              |              |                    |             | L                |              |
|   |          |             |                |           |          |                |                 |             |               |  |  |                |           |          |         |                 |              |          |               |              |          |              |                  |           |                |             |                  |              |              |                    |             | L                |              |
|   |          |             |                |           |          |                |                 |             |               |  |  | П              |           |          |         |                 |              |          |               |              |          |              |                  |           |                |             |                  |              |              |                    |             |                  |              |
| o - modernity   |          |             | П              |           |          |                |                 |             |               | Τ  | Τ  |                |           |          |         |                 |              |          |               |              |          |              |                  |           |                |             |                  |              | $\top$       |                    | Π           | Г                | T            |
| 4 - Attend School - Locally   |          |             | П              |           |          |                |                 | $\neg$      |               | T  |  |                | ,         |          |         | $\exists$       |              |          |               |              |          |              |                  |           |                | П           |                  |              | T            | T                  |             | Г                | T            |
| 5 - Attend School - Other Area  |          |             |                |           |          |                |                 |             | $\neg$        | Τ  | Γ  |                |           | П        |         |                 |              |          |               |              |          |              |                  |           |                | П           |                  |              |              |                    |             | Γ                | T            |
| 6-Change of Residence (husband or family moving)  |          |             | П              |           |          |                |                 |             |               | Τ  | Γ  | Γ              |           | П        |         |                 |              | T        |               |              |          |              |                  |           |                |             |                  |              |              |                    |             |                  | T            |
| 7-Housewife or Child Care   |          |             | П              |           |          |                |                 |             |               | T  |  | Г              |           |          |         |                 |              |          |               | Τ            | П        |              |                  |           |                | П           |                  | T            | T            | 1                  |             | Г                | T            |
| ,   |          |             | П              |           |          |                |                 |             | +             | $\top$   | T  | Г              |           |          |         |                 | 7            | 1        | 1             | 1            |          |              |                  |           |                | П           |                  | 寸            | T            | $\top$             |             | Г                | t            |
|   |          | Н           | П              |           |          |                |                 |             | ┪             | †  |  | $\vdash$       |           | П        |         |                 | $\dashv$     | 1        | $\top$        | 1            |          |              |                  | П         |                |             |                  |              | $\dagger$    | 1                  | Ţ           |                  | t            |
| 2 - Resignation Requested   |          |             |                |           |          |                |                 |             | $\neg \vdash$ | T  | T  | Г              |           | П        |         |                 |              | 7        | 十             | T            |          |              |                  |           | _              | П           |                  | 7            | $\top$       | $\top$             |             | Г                | t            |
| 4 - All Involuntary Separations   |          | -           | Н              |           |          |                |                 |             | $\dashv$      | ╁┈   | <del>                                     </del> | T              | _         |          |         |                 |              | $\dashv$ | $\top$        | $\top$       | П        |              |                  |           |                |             |                  | 7            | $\top$       | 1                  |             | T                | t            |
| Abandonment of Position — Failed to Submit Resignation  |          |             | Н              |           |          | _              |                 |             | +             | $\dagger$  | $\dagger$  | 十              |           |          |         |                 |              | $\dashv$ | $\top$        | +            | Н        |              |                  |           |                | Н           |                  | 7            | +            | $\top$             | T           |                  | t            |
| 71 - Resigned during Administrative Inquiry   |          | $\vdash$    | Н              |           |          |                |                 |             | 十             | 十  | +  | 一              |           | Н        |         |                 | 7            | $\dashv$ | $\top$        | $\dagger$    | Н        |              |                  |           | -              | Н           |                  | 十            | $\top$       | 十                  | $\vdash$    | $\vdash$         | t            |
|   |          | H           | $\vdash$       | _         | Н        |                |                 | $\dashv$    | +             | ╁  | $\dagger$  | $\vdash$       | $\vdash$  | Н        |         |                 | $\dashv$     | +        | +             | +            | $\vdash$ |              |                  |           |                |             |                  | +            | +            | +                  | ┢           | -                | t            |
| 0 - Optional Retirement (include liberalized)   |          |             | Н              | -         |          |                |                 |             | +             | ╁  | +-   | ┢              | -         |          | _       | $\dashv$        | $\neg$       | $\dashv$ | $\dashv$      | +            | H        |              |                  |           | _              |             |                  | 十            | +            | +                  | $\vdash$    | _                | t            |
| 1-Disability Retirement 0-Death   | -        | $\vdash$    | Н              |           | H        |                | -               | $\dashv$    |               | +  | +  | <del> </del>   | H         | H        | -       | $\vdash$        | $\dashv$     | +        | +             | +            | $\vdash$ |              | -                |           | -              | $\vdash$    | $\vdash \mid$    | $\dashv$     | +            | +                  | $\vdash$    | $\vdash$         | $\dagger$    |
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| 9 - Other   |          | _           | Н              |           | -        |                |                 |             | +             | ┼╴   | +  | ╁              | -         | Н        |         | $\vdash$        | $\dashv$     | +        | +             | ╁            | H        |              | $\vdash$         |           | _              | Н           |                  | 十            | +            | +                  | -           | $\vdash$         | t            |
|   |          |             | H              |           |          | -              |                 |             |               | ╁  | ╁  | ╁              |           |          |         | $\dashv$        | $\dashv$     | +        | $\dashv$      | +            | $\vdash$ |              | H                | -         | _              | Н           |                  | -            | +            | +                  | -           | ├                | t            |
|   | $\dashv$ | -           | Н              | $\vdash$  | Н        |                | -               | $\dashv$    | -             | +  | +  | $\vdash$       | <u> </u>  | Н        | -       | $\vdash \vdash$ | -            | $\dashv$ | +             | +            | ┝        | $\vdash$     | $\vdash \mid$    |           |                | Н           | $\dashv$         |              | +            | +                  | +-          | +                | +            |
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|   |          | Ļ.,         | Н              | _         | ,        |                | _               | $\dashv$    | -             | +  | +  | <del>  -</del> | <u> </u>  |          |         |                 | _            | $\dashv$ | +             | +            | -        | -            | _                | _         |                | Н           | Н                | +            | +            | +                  | -           | ├                | ł            |
| TOTAL   |          |             |                |           |          |                |                 |             |               | ľ  |  |                | 3         |          |         | <b>*</b> .      | ,            |          |               |              |          |              |                  |           |                |             |                  |              |              |                    |             |                  |              |
| }<br>}  | اسسا     | <u> </u>    | ا              |           |          |                | <b></b>         | !           | 1             |  | 1  |                | To        | otal     | Ser     | oara            | t            | Fie      | eld C         | ffice        | ·        |              |                  |           | ,              |             | ·                | <br>_        | т            | otal               | Sep         | ara              | ti           |

| 1999    | ` v .          | 7            | T        |                 | T T  |                 |          | 7               |                |  |          |                 |                |               |               |                 |              |                 |   | 7- |  |                | _        |  |          |    |  | <sub>1</sub> | T:                 |                |     |                | -,1             | -,          | -  |          |          | 3520 New Haven          |
|--|----------------|--------------|----------|-----------------|--|-----------------|----------|-----------------|----------------|--|----------|-----------------|----------------|---------------|---------------|-----------------|--------------|-----------------|---|----|--|----------------|----------|--|----------|----|--|--------------|--------------------|----------------|-----|----------------|-----------------|-------------|--|----------|----------|-------------------------|
| 3548   Perry Prob. CHE   | Soc            | •            | ╁┼       |                 | ╁╼┼  |                 | +        | +               |                | -  |          |                 | +              | 1             | $\dashv$      |                 |              |                 |   |    | ++   |                |          |  | $\dashv$ | -  | -  | -            |                    |                | ++  |                | $\dashv$        |             | 1-1  |          |          |                         |
| See North   See  | <b>i</b> 1     | <b> </b>     | ╆┼       |                 | ++   |                 |          | +-              | -              |  |          |                 | <del></del>    | +-            |               |                 | -            |                 | _   | -  | +  | _              | -        | $\vdash$   |          | +- | ++   | _            |                    | -              | +-  |                |                 |             | 1-1  | _        |          |                         |
| 1990   Contact   |                |              | ╀╌┼      |                 | 1  |                 |          | <del>- </del> - | $\vdash$       | -  | -        | $\dashv$        |                | +-1           |               | -               | _            | ┝╼┼             | _   | +  | ++   |                | +        | <del>                                     </del> |          | +- |  | -            | -1                 | _              | +   | _              |                 |             | 1  | _        | -        |                         |
| 1985   Principal   |                |              | ++       |                 | ++   |                 | -        | ┧               | $\vdash$       | $\vdash$   |          |                 |                | +-            |               |                 | +            |                 | +   | +- | + +  |                | +-       |  |          |    | -  | -+           | <del>-   :</del>   | +-             | 1 1 |                |                 | +           | 1  | -        | $\neg$   |                         |
| 360 Presided   360  |                |              | ╁╌┼      |                 | ┼─┼  | -               |          |                 | -              | -  |          | -               | _              | +-            | $\dashv$      |                 | +            | -               | _   | +  | +  |                | -        | -  | _        | +  | $\vdash$   |              | <del>-   ; :</del> | -              | 1   |                |                 |             | <del>                                     </del> |          | $\dashv$ |                         |
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| 1  |                | <u> </u>     | ╄╼┼      |                 | +-+  |                 | - -      |                 | $\vdash$       | -  |          | -               |                | -             | <del></del> + |                 | -            |                 | <del>-                                     </del> |    | +-+  |                | +        | ┝╌┼  |          | +  | -  | -+           | +                  | +              | +   |                |                 |             | ┼─┤  | -+       | $\dashv$ |                         |
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| 1460 Cannative Communications   1700 Cannative Communications   1700 Rechammed   1700 Rec | '              | <u> </u>     | +        |                 | ╂┼   | -               | -        |                 |                | -  |          | -               |                | +-            |               |                 |              |                 |   |    | ╁╌┼  | <del>- -</del> | -        |  |          |    | <del>                                     </del> |              | -#-                |                | +   | -+-            |                 | +-          | ┼╌┼  | -+       |          |                         |
| 3   3700 Quantino Trailling   1778 Richamous   1778 Ric |                |              | ╂─┼      |                 | +  | -               | _ _      |                 | <del>  </del>  | -  |          |                 |                | -             |               | -               |              |                 |   |    | ┼┼-  |                | -        |  |          |    |  | }            | <del>-  :</del> -  |                | +   | -+             |                 | +-          | ╁  | -+       |          |                         |
| 3750 St. Louis   3776 St. Autorio   3778 St. Autorio   3778 St. Autorio   3778 St. Autorio   3778 St. Proprieto   3779 St. St. Proprieto   3779 St. Proprieto   3779 St. Proprieto   3770 St. Propri | Gra            | ļ            | ╂┷┼      |                 | +-+  |                 |          | -               | $\vdash$       |  | $\dashv$ |                 |                | -             | -             |                 |              |                 |   | +  | ╁┼   |                | +-       |  |          | ┿  | -  | -            | <del> :-</del>     |                | + + | ╌┼╴            |                 | -           | ╂  |          |          |                         |
| 3750 St. Louis   3776 St. Autorio   3778 St. Autorio   3778 St. Autorio   3778 St. Autorio   3778 St. Proprieto   3779 St. St. Proprieto   3779 St. Proprieto   3779 St. Proprieto   3770 St. Propri | a.             | ļ            | 1-+      |                 | <del>} - }</del>                                 |                 | -        | -}              |                | -  |          |                 |                |               | $\dashv$      |                 | -            |                 | $\dashv$  |    | <del>   </del>                                   |                | +-       | <del>  -</del>                                   |          | -} | ┝┯┼  |              | <del> :</del> -    |                | ╅   | $\dashv$       |                 |             | ╂╌┦  |          |          |                         |
| 3750 St. Louis   3776 St. Autorio   3778 St. Autorio   3778 St. Autorio   3778 St. Autorio   3778 St. Proprieto   3779 St. St. Proprieto   3779 St. Proprieto   3779 St. Proprieto   3770 St. Propri | T of           |              | $\vdash$ |                 | ++   | -               |          |                 |                |  | -        |                 |                | +             |               |                 | _            |                 |   |    | ┼┼   |                |          | $\vdash$   |          | ┼  | ┼┼   | -            |                    |                | ╫   |                |                 |             | 1-1  |          |          |                         |
| 3799 Sat Lake City   3770 Sat Diego  | <u>-</u>       |              | +        |                 | +-+  |                 | - -      | +-              | <del> </del> - | $\dashv$   |          | _               |                | -             |               |                 |              |                 |   |    | ╁┷┼  |                |          |  |          |    |  | $\dashv$     | <del> :</del> -    |                | +   |                | $\dashv$        |             | ╁─┼  |          |          |                         |
| 3779 San Diego   3790 San Diego   3890 San Jane   3990  |                | ļ            | +        |                 | ╢  |                 |          | ┼               |                |  | _        |                 | -              | -             |               | _               | _            |                 |   | -  | ╂╼┼  | <del>- -</del> |          |  |          |    | ╁╾┼  |              |                    |                | + + | <del>-</del> + |                 |             | <del>  </del>                                    |          |          |                         |
| 3790 Sas Pinegino   3790 Sas Pinegino   3990 San Facelino   3990 San Facelino   3990 San Facelino   3990 San Jean   3840 Seattle   3840 Seattle   3840 Seattle   3840 Seattle   3850 Taught   3970 Washington Field   1870 Seattle   3970 Seattle   397 |                | ļ            | +        |                 | <del>                                     </del> |                 |          | -               |                | -  |          |                 |                |               |               |                 | _            | ┞─┼             | _   | +- | ╀  |                |          | ┝┈┝  |          |    | $\vdash$   |              | — ÷                |                | +-+ |                |                 |             | 1  |          |          |                         |
| 3799 San Pencelisco   3800 San Julia   |                |              | ╀        |                 | -  |                 |          | -               | ┈              |  |          | -               |                |               |               | -               |              |                 | -   |    | ++   |                |          |  |          |    |  |              |                    |                | ++  | -              |                 |             | ╂  | -        |          |                         |
| 3800 Savamah   3820 |                |              | ╂┯┼      |                 | ╂  | -               |          |                 | -              |  |          | -               |                | -             |               | <del>-</del>  - | _            | ├ -             | _ _   | -  | ╂┷┼  |                | +-       |  |          | -  | $\vdash$   |              |                    |                | +   | -+             |                 |             | ╅  |          | $\dashv$ |                         |
| 3202 Savannah   340 Sastate                   |              | ╂┷┼      | _               | ┼  |                 |          | -               | -              | <b>-</b>   |          |                 |                | $\vdash$      |               |                 |              |                 |   | +  | ┼─┼  |                | -        | -  |          | -  |  | -            |                    |                | +   | -              |                 |             | ╂╾╼  |          | $\dashv$ |                         |
| 3840 Seattle   3850 Tamps   3 |                |              | 1        |                 | -  |                 | +        |                 |                |  |          | -               |                |               |               |                 |              | ┝─┼             |   |    |  |                |          |  |          | -  |  | $\dashv$     | <del> -</del>      |                | ╁   | _              | -               | -           | -  |          | $\dashv$ |                         |
| 3860 Springfield   3890 Tamps   3890 Tamps   3890 Tamps   3890 Tamps   3990 Weshington Field   3990 Weshington Field   3990 New Agenta' Class    |                | ļ            | -        | -               | +  | -               |          | -               |                | <del></del>                                      |          |                 |                | -             | $\dashv$      |                 |              |                 | -   |    |  |                | -        | <del></del>                                      |          | +  |  |              |                    |                | +   |                | <del>-</del>  - |             | -  |          | $\dashv$ |                         |
| 3880 Trainle.   3920 Washington Field  | '              | ļ            | ╂        |                 | ╂╌╌╂   |                 |          | -               | $\vdash$       | $\dashv$   |          | <del> -</del> - |                | +             |               | -               |              |                 |   | +- | ╂╼╾╂   |                | -        | $\vdash$   |          |    | -  |              |                    |                | ╂   | -              |                 |             |  | -        | $\dashv$ |                         |
| 3926 Washington Field Office   Total Field Office   Total Field Office   3956 New Agents' Class   0010 Director's Office   0020 Associate Director's Office   0020 Associate Director's Office   0020 Associate Director's Office   0020 Assic To The Dir. Off. Admin.   0030 Assic To The Dir. Off. Admin.   0030 Assic To The Dir. Off. Admin.   0030 Assic To The Dir. Off. Invest.   1 Indirector   1  |                |              | ╂┷┼      |                 | ++   | -               |          |                 |                | -  | -        |                 |                |               | $\dashv$      |                 |              | $\vdash$        |   |    | +  |                | +        |  |          | -  | ╁  | -+           |                    | +              | +   | -              | -               | +-          | ┤╌┤  | $\dashv$ | $\dashv$ |                         |
| Total Field Office 3969 New Agents' Class 0010 Director's Office 0020 Associate Director's Office 0030 Assi, To The Dir. Off. Admin. 0040 Assi, To The Dir. Off. Invest. 1 Identification 2 Training 2 Training 4 Files and Communications 5 Donessic Inciligrance 5 Donessic Inciligrance 6 General Investigative 7 Laboratory 7 Laboratory 8 Special Investigative 10 In Especial 11 Office of Legal Counsel 12 Computer Systems 11 Office of Legal Counsel 12 Computer Systems 11 Office of Legal Counsel 13 Computer Systems 14 Computer Systems 15 Spoc Clerks in Class 16 Spoc Clerks in Class 17 Total SpG 18 CRAND TOTAL   |                |              | +        | -               | +-+  |                 |          | -               |                | $\vdash$   | -        |                 |                | +             |               |                 |              | ├├-             |   |    | +-+  |                | +-       |  |          |    |  |              |                    |                | 1   | $\dashv$       |                 |             |  |          |          |                         |
| 3990 New Agents' Class   |                |              | +        |                 | ┦—┤  |                 |          | <del> </del>    | $\vdash$       | -  |          | -               |                | -             |               | -               | +            |                 | _   | +- | +  | $-\!\!\!\!-$   | +        |  |          | +- |  | -+           |                    |                |     |                |                 |             | ╅╼┪  |          |          | 3920 Washington Field   |
| 3990 New Agents' Class   |                |              | ╂┷┼      |                 | ┼─┼  |                 |          |                 | -              | -  |          | -               |                |               |               | _               |              | ├─┼             | $\dashv$  |    |  |                |          | $\vdash$   |          | -  | ╁  | -            |                    |                | +   | -              | _               | -           | ╂╌╾╏   |          |          | Tabel Eleld Office      |
| 0010 Director's Office   0020 Associate Director's Office   0020 Associate Director's Office   0020 Associate Director's Office   0030 Asst, or The Dir. Off. Admin.   0040 Asst, or The Dir. Off. Admin.   0040 Asst, or The Dir. Off. Invest.   1 Identification   2 Training   2 Training   3 Administrative   4 Files and Communications   5 Domestic Intelligence   6 General Investigative   7 Laboratory   7 Laboratory   7 Laboratory   7 Laboratory   1   |                |              | ╂╾┼      | _               | ++   |                 |          | +               | -              |  |          |                 |                | +             |               |                 |              | ┝┉┼╴            |   |    | ┼┼┼  |                | ┥┈╴      | ┝─┼  |          | +- |  |              |                    |                | + + | $\dashv$       | _               | +-          | +  |          | $\dashv$ |                         |
| 0020 Associate Director's Office   |                |              | ╂╼┼      |                 | +  |                 |          |                 | $\vdash$       |  |          | $\dashv$        |                |               | $\dashv$      | $\dashv$        | +            |                 |   |    | ┼╌┼  |                | +        |  |          | +  | -  |              |                    |                | +   |                | _               |             | 1-1  | -        |          |                         |
| 0039 Asst. To The Dir. Off. Admin.   0040 Asst. To The Dir. Off. Invest.   1 Identification   1 Identification   2 Training   2 Training   3 Administrative   4 Files and Communications   5 Domestic Intelligence   6 Concart Investigative   7 Laboratory   8 Crime Records   9 Special Investigative   9 Special Investigative   10 Inspection   11 Office of Legal Counsel   12 Computer Systems   SOG Clerks in Class   SOG Clerks in Class   Total SOG   CRAND TOTAL   |                |              | +        | _               | 1-1  | -               | - -      | ╫               | -              | <del>   </del>                                   | -+       | -               |                | 1-1           | $\dashv$      | +               | +-           |                 | -   | +- | ╁╾┼  | -              | +-       | $\vdash$   |          | +  | $\vdash$   | -+           |                    | +              | +   |                |                 |             | <del>  </del>                                    | -        |          |                         |
| 0040 Asst. To The Dir. Off. Invest.   1 Identification   1 Identification   2 Training   3 Administrative   4 Files and Communications   5 Domestic Intelligence   5 Domestic Intelligence   6 Goneral Investigative   7 Laboratory   7 Laboratory   8 Crime Records   9 Special Investigative   10 Inspection   10 Inspection   11 Office of Legal Counsel   12 Computer Systems   SOG Clerks in Class   Total SOG   GRAND TOTAL  |                |              | ╁┼       |                 | ╁  |                 | +        |                 | -              | -  | -        | -+              | <del>- -</del> | -             |               |                 | +            | ┝─┼             |   |    | +-+  | -              | -        | $\vdash$   |          | +- | ++   |              | <del> </del>       | - <del> </del> | 1   | -              |                 | -           | ┼┤   |          |          |                         |
| 1 Identification   2 Training   3 Admining   3 Administrative   4 Files and Communications   5 Domestic Intelligence   5 Domestic Intelligence   6 General Investigative   7 Laboratory   7 Laboratory   8 Grime Records   9 Special Investigative   10 Inspection   11 Office of Legal Counsel   12 Computer Systems   SOG Clerks in Class   SOG Clerks in Class   Total SOG   GRAND TOTAL  | 1              | ,            | ╂─┼      |                 | ╫  | $\dashv$        | +-       | +-              |                | ┝─┼  | -+       |                 |                | +             | $\dashv$      | -               |              | ┝─┼             |   | -  | ++   |                | +        |  |          |    | <del>   </del>                                   | 一            |                    | <del></del>    | + + |                | -               |             | 11   | -        | $\dashv$ |                         |
| 2 Training   3 Administrative   4 Files and Communications   4 Files and Communications   5 Domestic Intelligence   6 General Investigative   7 Laboratory   8 Crime Records   9 Special Investigative   10 Inspection   11 Office of Legal Counsel   12 Computer Systems   SOG Clerks in Class   Total SOG   GRAND TOTAL     CRAND TOTAL  | ĺ              |              | ╁        |                 | ╫═┼  |                 |          | ┼               |                | $\vdash$   | -+       |                 |                |               |               | ┰               |              |                 |   | +  | ╁╌┼  |                | +        |  | _        | -  | <del>   </del>                                   |              |                    | ┪              | + - | -              | -+              | +-          | +  |          | -        |                         |
| 3 Administrative 4 Files and Communications 5 Domestic Intelligence 6 General Investigative 7 Laboratory 8 Crime Records 9 Special Investigative 10 Inspection 11 Office of Legal Counsel 12 Computer Systems SOG Clerks in Class Total SOG GRAND TOTAL  |                |              | +        |                 | ╁┷┼  | $\dashv$        | $\dashv$ | ┼               | $\vdash$       | -  |          |                 | +-             | 1-1           |               | -               | +            | $\vdash$        |   | +- | ╁┯┼  |                | +        |  |          | -  | ++   |              |                    |                | +   | 十              |                 |             | ╁─┤  |          | ᅱ        | ,                       |
| 4 Files and Communications   5 Domestic Intelligence   6 General Investigative   7 Laboratory   7 Laboratory   8 Crime Records   9 Special Investigative   10 Inspection   11 Office of Legal Counsel   12 Computer Systems   SOG Clerks in Class   Total SOG GRAND TOTAL   GRAND TOTAL  |                | <del> </del> | +        |                 | ╅  |                 |          | +               |                | ┢  |          |                 |                | +             |               | $\dashv$        |              | $\vdash$        |   |    | +-+  | _              |          |  | $\dashv$ | +  | +-+  | -            |                    | _              | + + |                |                 |             | 1-1  |          | $\dashv$ |                         |
|  |                |              | +        |                 |  |                 |          | +               | $\vdash$       | <del></del>                                      | $\dashv$ | $\dashv$        |                | $\vdash$      | -             | +               |              | ┝─┼             |   |    | ╁═┼  |                | ╁        |  | _        | +  |  | -            |                    | ┰              | +-+ | 十              | $\dashv$        | _           | 1 1  | $\neg$   |          |                         |
|  | 1              |              | 1        |                 | 1-   |                 |          | +               | -              | <del>                                     </del> | $\dashv$ | _               |                | $\vdash$      |               |                 | _            | ┞╼┾             | _   | ╫  | ┤╶┼  | -              | $\dashv$ |  |          |    |  |              |                    | -              | +-+ | 十              | _               |             |  |          |          | 5 Domestic Intelligence |
| 7 Laboratory 8 Crime Records 9 Special Investigative 10 Inspection 11 Office of Legal Counsel 12 Computer Systems SOG Clerks in Class Total SOG GRAND TOTAL  | )<br>}         | ·            | 1-       |                 | 1  |                 |          | ╫               |                |  | $\dashv$ |                 |                | +-            | -             | +               |              |                 |   | +  | ╂─┼  | $\dashv$       | ┪—       | <del>   </del> -                                 |          | +  | 1 1  | -+           | +                  | +              | +   | +              | $\dashv$        | +           | 1 1  | -        | $\neg$   |                         |
|  | !              | ļ            | ++       |                 | 1-+  |                 |          | +               | $\vdash$       |  |          | _               | $\dashv$       | +             |               | $\dashv$        | <del> </del> | $\vdash$        |   | +  | +-+  | $\dashv$       | +-       | $\vdash$   |          | +  | $\vdash$   |              |                    | $\dashv$       | +   | _              |                 | +-          | 11   | $\vdash$ |          |                         |
| 9 Special Investigative 10 Inspection 11 Office of Legal Counsel 12 Computer Systems SOG Clerks in Class Total SOG GRAND TOTAL   |                | 1            | 1-+      |                 | $\vdash$   | $\dashv$        |          | ╁               | $\vdash$       |  | _        | -               | +              |               |               | +               | _            | $\vdash$        |   | -  | <del>                                     </del> | -              | +        | $\vdash$   | _        | +  | $\vdash$   |              |                    | - <del> </del> | 1 1 | 十              |                 | _           | 1  |          | _        |                         |
| 10 Inspection 11 Office of Legal Counsel 12 Computer Systems SOG Clerks in Class Total SOG GRAND TOTAL   | 1              |              |          | _               | 1  | <del>-  -</del> | _        | +               | -              | $\vdash$   |          | _               |                | +             | -             | -               |              |                 |   | +- | ++   | _              | -        | 1-1  |          | +  |  | _            |                    | _              |     | 一十             |                 |             | 1  |          | _        |                         |
| 11 Office of Legal Counsel 12 Computer Systems SOG Clerks in Class Total SOG GRAND TOTAL   | ·<br>•         |              | 1-       |                 | 1-1  | +               | +        | ┼               | $\vdash$       | <del>                                     </del> |          | +               | +-             | +             |               |                 | +            |                 | -   | +- | +-+  | $\dashv$       | +        | 1-1  |          |    | -  | $\dashv$     | <del>;</del>       | +-             | + + | +              | $\neg$          |             | 1-1  |          | 1        |                         |
| Total SOG  GRAND TOTAL   | 1              |              | 1        | 1               | 1  |                 |          | 1               | $\vdash$       |  |          |                 |                | -             |               | -  -            |              |                 | _   | -  | -  |                |          |  |          | +  |  | -            | 1                  | _              | 1 1 |                |                 |             |  |          | 寸        |                         |
| SOG Clerks in Class  Total SOG  GRAND TOTAL  |                |              | 1-       |                 | 1-1  | $\dashv$        | - -      | ┼               | $\vdash$       | $\vdash$   |          | _               |                |               |               |                 |              | $\vdash \vdash$ |   |    | ++   |                | +        | 7  |          | ╅  |  | - 1          | -                  | _              | 1-1 | $\neg \dagger$ |                 | _           | 1-1  | -        | ᅱ        |                         |
| Total SOG GRAND TOTAL  | ;              | ļ            | 1-       |                 | 1 1  | $\dashv$        | $\dashv$ | +               | $\vdash$       | -  |          |                 | +-             | $\vdash$      | 一十            | +               | +            | ┝╼┼             |   |    | +-+  |                | +        | +  |          | +  | 1  | $\dashv$     | _                  | _              | 1 1 | 十              | $\neg \vdash$   | <del></del> | 1-1  |          | ᅦ        |                         |
| GRAND TOTAL  |                | <b>}</b>     | +        | -               | ╂━┼  |                 |          | ┼               |                | -  |          | -               |                | <del>  </del> | $\dashv$      | -               | -            |                 | -   | +  | +-+  | $\dashv$       | -        | <del>├─</del> ├                                  |          | +  | ╁┯┼  |              |                    | +-             | +   | -              |                 |             | ╁╌┤  |          | -        | 200 010110 111 01230    |
| GRAND TOTAL  |                | <u> </u>     | ╁        |                 | +  |                 | +        | +-              | -              | -  |          |                 | +              | ┼┈┤           | -             |                 | +-           | $\vdash$        | -   | +  | +  |                | +        | $\vdash$   | -        | +  | ╂╼╂  | -+           |                    |                | ╫   |                |                 |             | ╫  | +-       | -        | Taral SOC               |
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## UNITED STATES DEPARTMENT OF JUSTICE

## FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

Dear

effective

Receipt is acknowledged of your communication of and your resignation is accepted

Sincerely yours,

Clarence M. Kelley Director

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Enclosures ( )

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## UNITED STATES DEPARTMENT OF JUSTICE

### FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

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Dear

Receipt is acknowledged of your communication of and your resignation is accepted effective

As a result of your failure to fulfill your signed agreement to remain in the service of the Government for a period of one year following the date you reported for duty, you are indebted to the Government for the cost of your transportation from your actual place of residence at the time of your appointment to Washington, D. C. Records indicate a total of has been paid to you in connection with your travel to Washington, D. C. All monies due to you will be applied to liquidate your indebtedness. If monies due you from this Bureau exceed the indebtedness, a check for the remaining balance will be forwarded to you. You will be advised if there is any remaining indebtedness.

Sincerely yours,

Clarence M. Kelley

Director

Enclosures ( )

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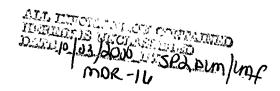
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UNITED STATES GOVERNMENT

## Memorandum

TO

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SUBJECT:

The above captioned file is presently maintained in the Special File Room of the Records Section, Files and Communications Division. You are requested to have the substantive supervisor, responsible for this matter, review the file to determine if it is necessary to continue to maintain the file in the Special File Room, or whether it may be returned to the regular file sequence. The appropriate notation should be made on this memorandum which should be returned to the Filing Unit, Room 5847. This memorandum will be filed in the case file to record the action taken in connection with this review.

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| This serial, the original memorandum from the FBI to the Attorney General dated , which was returned to the Bureau signed by the Attorney General authorizing FBI to conduct electronic surveillance, has been permanently removed for retention in the National Security Electronic Surveillance File per memorandum T. J. Smith to Mr. E. S. Miller dated 7-13-73. See 62-115687-1 for details and where maintained. |
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FROM: Routing Unit, Room 4336 JEH-FBI BLDG.

RE: "EXPEDITE PROCESSING" TICKLER

Attached is a copy of an abstract to a piece of mail sent to:

| on "EXPEDITE PROCESSING" on |
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this document had As of not been received back in the Records Section to be removed from "EXPEDITE PROCESSING" and placed on record. PLEASE STATE BELOW WHETHER YOU HAVE THIS DOCUMENT, OR ASSIST RECORDS SECTION IN LOCATING THIS MAIL BY INDICATING YOUR DISPOSITION OF SAME. If this document is in your possession, please promptly return it to Routing Unit, Room 4336 JEH-FBI BLDG., for processing, or return this note with reason for continued retention indicated hereon. Your cooperation in this matter will be appreciated and it will materially assist the Records Section in operating a sound records system for the benefit of all concerned.

10/03/2006 SEZEM

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Instructions: Submit weekly as of close of business each Wednesday. List as delinquent items which have been in Division (a) over 5 workdays, if FBI investigative reports; (b) over 5 workdays if name check requests (form or letter); (c) over 5 workdays if routine communications from outside government agencies requiring analysis and/or action by Bureau but no reply; (d) over 2 workdays if communication from outside individuals or Government agencies requiring a reply; (e) over 3 workdays if any other types of incoming communications; (f) all mail held over 30 days, reason for delinquency and when each will be handled. Active items call for the furnishing or requesting of information, advice or instructions. Always report FBI investigative reports, files and projects as Active. Report publications, newspaper clippings and other such items as Inactive. If there is doubt, the item should be reported as Active. Estimated hours to complete should be the Supervisor's best estimate in hours of time necessary for him to handle. Number of files held over 5 workdays must be shown weekly. On the second Wednesday of each month submit to the Section Chief 3 copies of Form 0-32 attached to this delinquency report individually listing all delinquent files. If there are no delinquent files, do not submit Form 0-32, but place zero opposite "Files" above. On a weekly basis, if any delinquency other than files is reported submit Form 0-31 in triplicate, attached to this delinquency report. (0-31 not required if no delinquent items.) Projects must be enumerated on the back of this delinquency report, together with a description thereof, date of receipt, estimated hours to complete, and target date for completion; if any change in target date, justification therefor must be set forth. This delinquency report must be submitted to Section Chief even though there are no delinquent items. ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

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5-6 (Rev. 6/19/75)

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FEDERAL BUREAU OF INVESTIGATION

INTERNAL ROUTING/ACTION SLIP BLDG ROOM NAME/TITLE/ORGANIZATION NAME/TITLE/ORGANIZATION TO BLDG. ROOM ASSISTANT DIRECTOR'S OFFICE SUPERVISORS (CONT'D) JEH 4026 4063 Mr. Wannall JEH Mr. McNiff JEH 4026 JEH 4440 Mr. Leavitt Mr. Lunsford 4026 JEH Mr. Helgeson JEH 4440 Mr. Gerblick JEH 4026 Mrs. Liskey JEH 4440 Mr. Brunnick JEH 4026 Miss Tweedon JEH 4238 Mr. Lex JEH 4026 JEH 4238 Mr. McMahon Miss McFarland JEH 4026 JEH 4238 Mrs. Cuozzo Mr. Felix JEH 4238 SECTION CHIEFS Mr. Lattin JEH 4204 Mr. Branigan JEH 4434 Mr. Brune JEH 4063 Mr. Cregar JEH 4434 Mr. Smith 4092 JEH Mr. Deegan JEH 4434 Mr. Dorch 4825 Mr. Fulton 4433 JEH JEH Mr. Grigalus JEH 4634 Mr. Kolombatovic JEH 4433 Mr. Seabaugh JEH 4042 Mr. Putman 4433 Mr. Cook JEH 4123 \* \* \* Mr. Redfield IS-2 SECTION FRONT OFFICE JEH 6247 Teletype Unit JEH 4439 Mr. Shackelford JEH 1B327 Mail Room JEH 4439 Mr. Pistey JEH 4425 Mrs. Dennis 4439 JEH Mrs. Ruegsegger 4027 Steno Pool JEH 4439 Miss Walters \* \* \* SUPERVISORS . 5648 Records Section (Filing) JEH JEH 4425 Mr. Preusse 4336 Records Section 4425 JEH Mr. Schroeder (Mail Processing) JEH 4425 Mr. DuHadway (Place on Record and Return) 4425 Mr. Mendenhall RECOMMENDATION/COMMENT **NECESSARY ACTION** LOG SEE REMARKS ON REVERSE FILE COORDINATE MAKE COPIES (NO. SEE MF PER INQUIRY · IMPORRETURN (B) CALL ME INFORMATION LETT FROM INTERLIGEN BLDG. ROOM J. EDGAR HOOVER (JEH) PHONE DATE , 1975 NW 55033 DocId:32989613 Page 155 FORM DOJ-359A 8-1-74 nor

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   Mr. Leavitt
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  Mr. Deegan
Mr. Putman
                              Mail Room, 5531 JB
  Mr. Shackelford
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  Mr. Redfield
  Miss Ewing
Miss McFarland
                              RECORDS SECTION
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  Mrs. Kunowsky
Mrs. Liskey
                              Place on Record & Return
                              Note File # and Return
  Miss Tweedon
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                              Teletype, 6247 JEH
    Room
                    SUPERVISORS
   Mr. Andrews
                              Mr. Lee
   Mr. Brooks
                              Mr. Nolan
   Mr. Crowley
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(5-9 -Rev. 6/19/75)

#### DEPARTMENT OF JUSTICE

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|             |                 | ЈЕН             | 7162               | Telephone Room               | Γ        | JEH        | 4634     | Mr. Kolombatovic              |
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|             | $\vdash$        | JB              | 1742               | Mr. Cleveland                |          | JEH        | 4026     | Mrs. Holmes                   |
|             |                 | лв              | 7621               | Mr. Cochran                  | -        | JEH        | 4430     | Mr. Muth                      |
|             |                 | JEH             | 7222               | Mr. Decker                   | -        | 0111       | * *      | * *                           |
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|             | $\dashv$        | JEH             | 7159               | Mr. Moore                    | -        | JEH        | 6658     | Correspondence Review Unit    |
|             | $\dashv$        | JEH             | 6012               | Mr. Walsh                    | -        | JEH        | 5648     | Records Section               |
|             | $\dashv$        | JEH             | 4026               | Mr. Wannall                  | $\vdash$ | JEH        | 6247     | Teletype Unit                 |
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| <del></del>             |                                 |  |
| מערשונטאו פון ס         | MR. CREGAR                      | MR. REDFIELD   |
| SECTION CI-2            |                                 | <b>y</b>   |
| Mr. Anderson Mr. Dare   |                                 | r. Palmer Mr. W <del>allace</del><br>r. Potocki  |
| Mr. Ennulat             |                                 | r. Regan   |
| Mr. Katz                | Mr. Nicholas Mi                 | c. Thomas  |
| SECTION CI-3            | MR. PUTMAN                      | MR. MIGNOSA  |
| Mr. Dickson             | Mr. Grant Mr                    | . McCarthy Mr. Walton  |
| Mr. Duffin              | Mr. Hamilton Mr                 | . McGorty Mr.  |
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#### UNITED STATES DEPARTMENT OF JUSTICE

#### FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

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| NW         | 55033 Doc                             | :Id:32989613 | 3 Page 164 |              |          |
|            |                                       |              |            |              |          |

•

UNITED STATES GOVERNMENT

### Memorandum

TO: SAC,

DATE:

FROM

Director, FBI

SUBJECT:

FOREIGN POLICE COOPERATION

BUDED

OO: BUREAU

The enclosed request for assistance from a foreign agency must be complied with promptly, and the Bureau advised of all action taken.

Instructions for handling this inquiry are found in Section 103 of the Manual of Instructions. Refer to and follow them carefully.

Submit the results of your inquiry in a letterhead memorandum, observing the following points in its preparation:

- 1. Sources and techniques must be fully protected.
- 2. The names of Special Agents are to be omitted. They must be deleted also from any signed statements submitted.
- 3. Provide a security classification, if warranted, but omit declassification markings.
- 4. Omit the property statement, unless special reasons exist for its inclusion. Explain any such reasons in the cover communication.
- 5. Secure authority to disseminate to the interested foreign government any information which was obtained from other agencies. Your cover communication must state this was done.

The established reputation of the Bureau within foreign agencies is a valuable asset. The manner in which this type of case is handled will largely determine the cooperation which we receive in turn from them. It is imperative, therefore, that these investigations and the reporting thereof meet the highest standards of the Bureau.

Enc.

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## UNITED STATES DEPARTMENT OF JUSTICE

#### FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

Date:

To:

The Commissioner

Royal Canadian Mounted Police

Ottawa, Ontario, Canada

Attention:

From:

Director, Federal Bureau of Investigation

Subject:

Reference is made to your letter dated your file number wherein you requested that investigation be conducted concerning the above-captioned individual.

Transmitted herewith are copies of the following reports which set forth the results of the investigation conducted in accordance with your request.

5-38

Enc.

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|                 |                  | •            |                         |
|-----------------|------------------|--------------|-------------------------|
| Visa requested  | Visa issued      | Date arrived | Place of arrival        |
| Name of ship    | Purpose o        | of trip      |                         |
| Birth date 4    | Place of birth   | ·            | Passport - type, number |
| Family connecti | ons              |              |                         |
| ; ;             |                  | ÷ .          |                         |
| Departure date  | Place of departu | ire          | Name of ship            |
|                 |                  |              | *                       |

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## WORK STATUS REPORT (CI-2 Section)

| Supervisor   |                                 | for Month                  | of   |
|--|---------------------------------|----------------------------|--|
| Each Supervisor shall complete and subminformation submitted is used in preparation. | tion of monthly statistical ana | lysis, budget material, th |  |
| be accurate, complete and concise. It si   | hould be clearly printed or typ | ea.                        |  |
| 1. Case Statistics:  |                                 |                            |  |
| Pending Cases<br>BOM   | Received                        | Closed                     | Pending Cases<br>EOM   |
| 2. Organizations/Establishments:   |                                 |                            |  |
| 3. Individuals:  |                                 |                            | <del></del>  |
| 4. Total Pending Assets:   |                                 | ·                          |  |
| Approved IAs   | Approved OAs                    | Active                     | e Double Agents  |
|  |                                 | receit<br>passi<br>intelli | e sources who are currently<br>ving assignments from and/or<br>ng information to foreign<br>gence agencies under Bureau<br>l and direction.) |

5. Name Checks:

(List by Agency and Number)

5-59

6. Accomplishments:

(Include information re defections, prosecutions, arrests, recoveries, deportations, registration under FARA, denaturalization, courts-martial, exclusion, denial of access to classified data, persona non grata, expatriation or other administrative action based on FBI information in whole or in part.)

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## WORK STATUS REPORT (CI-1 Section)

| Supervisor   |                  |                   | fo                      | r Month of                           | , 19  |
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| Each Supervisor shall complete<br>information submitted is used it<br>be accurate, complete and conc | n preparation of | monthly statistic | al analysis, budget mat |                                      |   |
| 1. Case Statistics:  |                  |                   |                         |                                      |   |
| Pending Cases<br>BOM   |                  | Received          | Closed                  |                                      | Pending Cases<br>EOM  |
| 2. Organizations/Establishmen  | ıts:             |                   |                         | <del></del>                          |   |
| 3. Total Pending Asset Cases   | <b>:</b>         |                   |                         | *                                    |   |
| 4. Asset Analysis (Pending of  | r Closed)        |                   |                         |                                      |   |
| Informative Assets<br>(Paid HQ Authority)  | Operational Paid | Assets<br>Unpaid  |                         | Active Do                            | ouble Agents  |
|  |                  | ····              |                         | receiving<br>passing i<br>intelligen | ources who are currently assignments from and/or nformation to foreign ce agencies under Bureau d direction.) |
| 5. Name Checks:  |                  |                   |                         |                                      |   |

(List by Agency and Number)

5-596

6. Accomplishments:

(Include information re defections, prosecutions, arrests, recoveries, deportations, registration under FARA, denaturalization, courts-martial, exclusion, denial of access to classified data, persona non grata, expatriation or other administrative action based on FBI information in whole or in part.)

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| Case              |            |              |  |              |              |  |          | File Number |            |          |                |           |          |             |              |  |  |
| Offices           | Sub        | Date         | Ser S  | a Date       | Ser S        | ta Date  | Ser St   | Date        | Ser St     | a Date   | Ser St         | Date      | Ser St   | a Date      | Ser          |  |  |
| Albany            |            |              |  |              |              |  |          |             |            |          |                |           | 1        |             | 1            |  |  |
| Albuquerque       |            | T            |  |              |              |  |          |             |            |          |                |           | 1        |             |              |  |  |
| Alexandria        |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Anchorage         |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Atlanta           |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Baltimore         |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Birmingham        |            |              |  |              |              |  |          |             |            |          |                |           |          |             | 1            |  |  |
| Boston            |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Buffalo           |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Butte             |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Charlotte         |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Chicago           |            |              |  |              |              |  |          |             | l          |          |                |           |          |             |              |  |  |
| Gincinnati        |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Cleveland         |            |              |  |              | 1            |  |          |             |            |          |                |           |          |             |              |  |  |
| Columbia          |            |              |  | 4            |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Dallas            |            |              |  |              | <b>\</b>     |  |          |             |            |          |                |           |          |             | <u> </u>     |  |  |
| Denver            |            |              |  |              | <u> </u>     | 4  |          |             |            |          | 5              |           |          |             |              |  |  |
| Detroit           |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| El Paso           |            | 1            |  |              | <u> </u>     |  |          |             |            |          |                |           |          |             |              |  |  |
| Honolulu          |            |              |  |              |              |  | Y        |             |            |          |                |           |          |             |              |  |  |
| Houston           |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Indianapolis      |            |              |  | <u> </u>     |              |  |          | <u> </u>    |            |          | <u> </u>       |           |          | <u> </u>    |              |  |  |
| Jackson           | <u> </u>   | <u> </u>     |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Jacksonville      |            |              |  |              | <u> </u>     |  |          |             |            |          |                |           |          | ļ           |              |  |  |
| Kansas City       |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Knoxville         | <u> </u>   |              |  |              |              | _  |          |             |            |          |                |           |          |             |              |  |  |
| Las Vegas         |            |              |  |              |              |  |          |             | ļ          |          |                |           | ļ        |             |              |  |  |
| Little Rock       |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Los Angeles       |            | <u> </u>     |  | <u> </u>     | ļ <u> </u>   | <u> </u>   | ļ        |             |            | ļ        |                |           | <u> </u> | <u> </u>    |              |  |  |
| Louisville        |            |              |  | <u> </u>     |              |  | <u> </u> |             |            | <u> </u> |                |           |          | <u> </u>    |              |  |  |
| Memphis           |            |              |  |              | ļ            |  |          |             |            |          | ļ              |           |          |             | _            |  |  |
| Miami             |            | <u> </u>     |  |              | <u> </u>     | <u> </u>   |          |             | ļ          |          | <u> </u>       |           |          |             |              |  |  |
| Milwaukee         |            |              |  | <u> </u>     |              | ļ  | ļ        |             |            | ļ        | <u> </u>       |           | ļ        | ļ           | <u> </u>     |  |  |
| Minneapolis       |            | <u> </u>     | <u> </u>                                       | <u> </u>     | ļ            | ļ  |          |             |            | ļ        |                |           |          | <b> </b>    | -            |  |  |
| Mobile            |            | <u> </u>     | ļ  | ļ            | -            | <u> </u>   |          |             |            | <u> </u> | <u> </u>       |           |          |             |              |  |  |
| Newark            |            | <u> </u>     | ļ  | ļ            | <u> </u>     | _  | ļ        |             | ļ <u> </u> |          | ļ              |           |          |             | ┼            |  |  |
| New Haven         |            | <u> </u>     | ļ  |              | ļ            |  | ļ        |             |            | <u> </u> |                | ļ         |          |             | -            |  |  |
| New Orleans       | <u> </u>   | ļ            |  |              | ļ            |  | ļ        |             | <u> </u>   |          | <u> </u>       |           |          | ļ           | ├            |  |  |
| New York          |            |              |  | <del> </del> | <del> </del> | <del> </del>                                     | ļ        |             |            |          |                |           |          |             | +            |  |  |
| Norfolk           |            | <del> </del> |  | <del> </del> | <del> </del> | <del> </del>                                     |          |             | <b> </b>   |          | <del> </del> , | <b></b> - | <u> </u> |             |              |  |  |
| Oklahoma City     |            | ļ            |  | <del> </del> | ļ            | ļ  |          |             |            |          | <u> </u>       |           |          |             | <del> </del> |  |  |
| Omaha             |            |              | ļ  | ļ            | <u> </u>     | ļ  |          |             |            |          |                |           |          | ļ           | -            |  |  |
| Philadelphia      |            |              |  | ļ            | <u> </u>     |  |          |             |            |          |                |           |          |             |              |  |  |
| Phoenix           |            |              | <u> </u>                                       | <b>_</b>     | -            | ļ. —   |          |             |            |          |                |           |          |             | <del> </del> |  |  |
| Pittsburgh        |            |              | ļ  | <del> </del> | <del> </del> | ļ  |          |             |            |          |                |           |          |             | <del> </del> |  |  |
| Portland          |            |              | <u> </u>                                       | <b> </b>     |              |  |          |             |            |          |                |           |          |             | ļ            |  |  |
| Richmond          |            |              | ļ  |              |              | -  |          |             |            |          |                |           |          | ļ           | -            |  |  |
| Sacramento        |            | ļ            |  | <del> </del> | <del> </del> | <del> </del>                                     |          |             |            |          |                |           |          | <b> </b>    | <u> </u>     |  |  |
| St. Louis         |            | <b> </b>     |  | <u> </u>     | <b> </b>     |  | <u> </u> |             |            | <b> </b> |                |           |          |             |              |  |  |
| Salt Lake City    | ļ <u>.</u> | ļ            | <del> </del>                                   |              |              |  |          | <del></del> |            | <b></b>  |                |           |          |             |              |  |  |
| San Antonio       |            | <u> </u>     |  | <del> </del> |              | -  |          |             |            | <b> </b> |                |           |          |             | -            |  |  |
| San Diego         |            |              | 1  | <del> </del> |              | <del>                                     </del> |          |             | <u> </u>   |          |                |           | •        |             | <del> </del> |  |  |
| San Francisco     |            |              |  | <u></u>      |              |  |          |             |            |          |                |           |          |             | ļ            |  |  |
| San Juan          |            |              |  |              |              |  | <u> </u> |             |            |          |                |           |          |             |              |  |  |
| Savannah          |            |              |  |              |              |  |          |             |            |          |                |           |          |             |              |  |  |
| Seattle           |            |              |  |              |              | <u> </u>   |          |             |            |          |                |           |          |             |              |  |  |
| Springfield       |            | ,            | <u>,                                      </u> |              |              | ļ  |          |             |            |          |                |           |          |             |              |  |  |
| Tampa             |            |              |  |              |              |  |          |             |            |          |                |           | ]        |             |              |  |  |
| Washington        | 1          |              |  |              |              |  | ļ        | - 1         |            |          |                |           |          |             |              |  |  |

5-78 (Rev. 5/12/75) INTELLIGENCE DIVISION ,1975 F Mrs. Liskey Mr. Wannall Mr. Leavitt Miss Tweedon Mr. Helgeson Miss McFarland Mrs. French Mr. Branigan Mail Room Foreign Liaison Unit Mr. Cregar Mr. Deegan Mrs. Marie Dennis Mr. Fulton \_\_Teletype Unit Mr. Kolombatovic Mr. Putman Mr. Shackelford Room Mr. Atkinso Miss Kozlosky Mrs. Meeks Mr. W.D. Neumann Stneo Pool, 4027 JEH Mr. H. A. Newman Mr. Nugent Please Call Me Mr. Phillips . Please See Me Mr. Tunstall For Information Note and Return Mr. Aldhizer Note and Forward Mr. Egan Per Call Mr. Fallin Correct Mr. Graham Status Mr. Held RECORDS SECTION Mr. Klein Place on Record Mr. Mosher and Return Mr. Powell Mr. Ross Consolidation Postin File and Destroy Mr. Shea Mr. Thornton 0-1 or FD-205 Initial for File Note File # and Return R/S to Room 1 IS-1 SECTION

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| ·   | Pe   | rsonne           |            |              | nnel   | Perso                | onnel        | Live     | Intori   | nants    | ļ                                     | Othe        | er       |                  |        |          |            |       | o e         | g                      |            |  |     |
|   | w  |                  | ents       | sue          |        |                      | .,           |          |          |          |                                       |             | ts       | ts               |        | ts       | ver        | ts    | ons         | eri                    |            |  | .   |
| **  | Offici als                                       | Working<br>Wives | Dependents | Americans    | er     | Кломп                | Suspect      |          |          |          | Tesurs                                | Misurs      | Lookouts | Bank<br>Accounts | Tesurs | Lookouts | Mail Cover | k     | veil        | Person<br>Volunteering | er         | Totals                                   |     |
| Name of Establishment   | Offi   | Worl             | Dep        | Ame          | Other  | Kno                  | Sus          | SI       | DA       | PSI      | Tes                                   | Mis         | 3        | Acc              | Tes    | Loo      | Mai        | Ban   | Sur<br>of F | Per<br>Vol             | Other      | Ťoţ                                      |     |
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Unusual activity or circumstances (use supplemental page if necessary)

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| 1. Name      |             | -             |
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| Count items and not copies. Action mail already handled by another desk but routed to you for information should be counted under "Miscellaneous." If you take action on it, count under appropriate category instead. Count only those pages of a publication which you must review.  If you assist or handle work in absence of another Supervisor, count mail according to desk to which it applies since object of count is to determine desk volume.  Bureau Source material requiring action should be counted under "Letters-Outside"; otherwise, count as "Miscellaneous." | Items       | Pαges | Items         | Pages | Items O                 | Pages  | Items       | Pages       | Items        | Pages     | Items | Pages           | Items               | Pages   | Items                      | Pages  |
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| Known or                       | suspected i                  | intelligence ag          | ent: Yes       | □ No                          | Serial    |                   |             |
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### New Items Received During

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| Requests From Abroad:         |  |  |        |
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| From Other Foreign Agencies   |  |  |        |
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5-127 (Rev. 5-19-71)
OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA GEN. REG. NO. 27
UNITED STATES GOVERNMENT

## Memorandum

TO

: SAC,

DATE:

FROM

: Director, FBI

SUBJECT:

| Bureau 1        | informant 200, a most sensitive and reliable source, advise |       |
|-----------------|---|-------|
|                 | (individual or organization)                                | of    |
|                 | (address)   | _ was |
| in contact with | (individual or organization, address)                       |       |
| during          | (month, year)   |       |

The foregoing and the following INFORMATION OBTAINED FROM BUREAU INFORMANT 200 IS NOT TO BE DISSEMINATED OUTSIDE THE BUREAU AND SHOULD NOT BE SET OUT IN ANY INVESTIGATIVE REPORT. INFORMATION FROM THIS INFORMANT SHOULD BE UTILIZED FOR LEAD PURPOSES ONLY AND ANY STATEMENT CONCERNING THE COVERAGE IN EFFECT IN THIS INSTANCE MUST BE AVOIDED. UNDER NO CIRCUMSTANCES SHOULD THE SUBJECT OR ANY UNAUTHORIZED PERSON BECOME AWARE THAT WE HAVE KNOWLEDGE OF THE ABOVE-MENTIONED CONTACT.

According to the informant,

5-127

5-128

Xerox Requisition

Supervisor

5-128 (Rev 7-14-66) Date\_ No. of Originals Copies of Each Original Front and Back Expedite Block Out -Call Ext. When Ready Color of Paper: White | Yellow Blue Green Size of Paper: Regular Long Description or Remarks: **RETURN TO:** Steno Pool Approved By: 

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DOJ/FBI

5-137 (Rev. 7-16-73)

Federal Bureau of Investigation

Office of Counterintelligence and Security Defense Intelligence Agency The Pentagon

Washington, D. C. 20301

Dear Sir:

| For your information, I am enclosing communications which may be of interest to you. |
|--|
| No further investigation is contemplated with regard to this matter.                 |
| You will be advised of the pertinent developments in connection with this inquiry.   |
| Status of case: Completed Incomplete   |

Very truly yours,

Clarence M. Kelley Director

Enc.

HEREIN IS UNCLASSIFIED

DATE 10 02 2000 BY 572 DUMPER

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5-138 (Rev. 7-16-73)

Director

Federal Bureau of Investigation

EUR/SES - Room 5222 Department of State Washington, D. C. 20520 Dear Sir: For your information, I am enclosing communications which may be of interest to you. No further investigation is contemplated with regard to this matter. You will be advised of the pertinent developments in connection with this inquiry. Status of Case: Completed Incomplete Very truly yours,

Clarence M. Kelley Director

Enc.

ALL INFORMATION CONTAINED

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UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

5-141

For your information, I am enclosing a communication which may be of interest to you.

Sincerely yours,

Contelley
Clarence M. Kelley
Director

Enc.

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5-143 (Rev. 5/29/75) INTELLIGENCE DIVISION - FBI ۴ CI-3 SECTION :1 , 1975 Mr. W. R. Wannall Mr. T. W. Leavitt Mr. H. E. Helgeson Mr. Branigan Mr. Cregar Name Check Section Data Processing, 6221 IB \_\_Mail Room \_\_Translation Section Foreign Liaison Unit Mr. J. G. Deegan Mr. A. B. Fulton RECORDS SECTION Consolidation Unit Mr. Kolombatovic Name Searching Mr. F. S. Putman Mr. Shackelford Special Mail Room Place on Record & Return Routing Unit Note File # and Return Mr. Mignosa R/S to Room Teletype, 6247 JEH Miss Epps Miss Gregory Open-Close Mrs. Magnone Mrs. Mitchell Correct Please Call Me Please See Me Mrs. Clark Mrs. Dennis M Mrs. Liskey Miss Tweedon Room Miss McFarland Mr. Burrows SUPERVISORS Mr. Deily Mr. Korontjis Mr. Dickson Mr. Duffin Mr. Egan Mr. McCarthy Mr. McGorty Mr. Moran Mr. Nasca Mr. Egan
Mr. Fox
Mr. George
Mr. Grant
Mr. Hampton
Mr. Howard Mr. O'Connor Mr. Oglesby Mr. Roberts Mr. Walton ķ.

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Page 195

Service Revised (SEE 5-6)

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## DOMESTIC INTELLIGENCE DIVISION SUPPLY REQUISITION

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| Return Order to Room _ |  |
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# UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

In Reply, Please Refer to File No.

| Director<br>Bureau of Intelligence and Research<br>Department of State  |
|---|
| RE: 5   |
| Dear Sir:   |
| The information furnished herewith concerns a subject (or subjects) who may be presently traveling abroad or planning to do so. |
| Reports concerning the subject (or subjects) _ have been _ are being furnished to you under separate cover.                     |
| Very truly yours,   |

Clarence M. Kelley Director

Enclosure

1 - Assistant Attorney General Criminal Division

Attn.: Internal Security Section

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5-153 (Rev. 3-6-74) optional form no. 10 may 1962 edition gsa gen. reg. no. 27



UNITED STATES GOVERNMENT

## Memorandum

| TO :   | SAC,   | DATE:  |
|--------|--|--|
| FROM : | Director, FBI                                  | 5-153  |
| ·      |  |  |
|        |  | Authority is granted to designate captioned individual a Bureau-<br>and to proceed to develop source as a security informant in accordance<br>ons set forth in Section 107, Volume IV, Manual of Instructions.   |
|        | potential e                                    | Authority is granted to designate captioned individual as a stremist informant — confidential source-extremist in accordance ons set out in Section 130, Volume IV, Manual of Instructions.  |
|        |  | Authority is granted to pay captioned informant an amount up to  |
|        | \$   | per month week for services rendered on a c.o.d. basis, and up to  |
|        | \$   | per month week for expenses actually incurred for a period of  |
|        |  | weeks effective You should continue to tact with informant and follow appropriate instructions in the Manual of  |
|        | legitimate ac<br>informant on                  | Advise captioned informant that the Bureau is not concerned with the tivities of the college or university or of its students. Do not contact the campus.  |
|        |  | Bufiles disclose no pertinent information regarding captioned source immediate relatives of source   |
|        | received; tha<br>with obtainin<br>a manner tha | Concerning your payments to this informant and all informants, you that payments must be commensurate with the value of the information t payments are to be made only for actual expenses incurred in connection g information for the FBI. In addition, payments should be made in such the informant clearly understands he is not being paid on a salary basis a c.o.d. basis. |
|        | voluntary and<br>times. Impre                  | Make certain informant understands cooperation with Bureau is strictly that this cooperation must be maintained on a confidential basis at all so upon informant that informant is not Bureau employee. Exercise caution ets with informant to make certain informant is not a plant.  |

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 10 02 2000 BYSE2 Pum / Lm (

SAC, Attention: Data Processing Section Director, FBI ( Authority is granted to designate captioned individual a Bureauapproved PSI and to proceed to develop source as a security informant in accordance with instructions set forth in Section 107, Volume IV, Manual of Instructions. Authority is granted to designate captioned individual as a potential extremist informant confidential source-extremist in accordance with instructions set out in Section 130, Volume IV, Manual of Instructions. Authority is granted to pay captioned informant an amount up to \$ per month week for services rendered on a c.o.d. basis, and up to \$ per month week for expenses actually incurred for a period of \_ months weeks effective \_ .. You should continue to maintain contact with informant and follow appropriate instructions in the Manual of Instructions. Advise captioned informant that the Bureau is not concerned with the legitimate activities of the college or university or of its students. Do not contact informant on the campus. Bufiles disclose no pertinent information regarding captioned source immediate relatives of source Concerning your payments to this informant and all informants, you are reminded that payments must be commensurate with the value of the information received; that payments are to be made only for actual expenses incurred in connection with obtaining information for the FBI. In addition, payments should be made in such a manner that the informant clearly understands he is not being paid on a salary basis but rather on a c.o.d. basis. Make certain informant understands cooperation with Bureau is strictly voluntary and that this cooperation must be maintained on a confidential basis at all times. Impress upon informant that informant is not Bureau employee. Exercise caution in your contacts with informant to make certain informant is not a plant.

TELETYPE UNIT MAIL ROOM

Document Number:
Received from:
By:
Date of receipt:

5-160



### UNITED STATES DEPARTMENT OF JUSTICE

#### FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

In Reply, Please Refer to File No.

Commanding General United States Army Intelligence Command Department of the Army

Attention: Personnel Security Group

RE:

Dear Sir:

The information checked below pertains to your letter dated , your reference ICPSG - L.

☐ You have been sent all available information.

☐ Pertinent information is enclosed.

Information is being furnished under separate cover.

☐ Your request has been furnished to the appropriate FBI Field Division for handling. The results will be furnished to you promptly.

Further processing of the subject's case by the Department of the Army will not interfere with the investigative responsibilities of the FBI. It will be appreciated if you will inform the FBI regarding the final action taken in the subject's case.

Very truly yours,

Clarence M. Kelley

Director

ALL INFORMATION CONTAINED
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DATE 10 a 200 BRED AM IM

Commanding General United States Army Intelligence Command Department of the Army Attention: Personnel Security Group RE: 5-16/a Dear Sir: The information checked below pertains to your letter dated , your reference ICPSG - L. ☐ You have been sent all available information. ☐ Pertinent information is enclosed. ☐ Information is being furnished under separate cover. ☐ Your request has been furnished to the appropriate FBI Field Division for handling. The results will be furnished to you promptly. Further processing of the subject's case by the Department of the Army will not interfere with the investigative responsibilities of the FBI. It will be appreciated if you will inform the FBI regarding the final action taken in the subject's case. Very truly yours, Clarence M. Kelley Director (Enclosure) ATTENTION: SAC,

A copy of Army letter is enclosed.

☐ Handle Army request. Submit reply promptly by memorandum.

ALL INFORMATION CONTACTION

NW 55033 DocId:32989613 Page 205

MAIL ROOM

☐ For your information. ☐ Submit up-to-date report.

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|   | Key Symbols  | 3  |   |                         |   |   |                                 | Colors  |                              |   |   |     |
|   | RT - Retur   | -  | departure   |                         |   |   |                                 | BEIGE BLACK BLOND BLUE BLUE, DK BLUE, LT BRONZE BROWN COPPER CREAM                      | GRE<br>GRE<br>HAZ            | EN<br>EN, DK<br>EN, LT<br>Y<br>EL<br>ENDER<br>OON | PINK PLATINUM PURPLE RED SILVER TAN TURQUOISE WHITE YELLOW      | (5) |
|   | Head Featur  |  |   |                         | Build   |   |                                 |   |                              | Body Fea  | tures   |     |
|   | HEAD LI<br>HAIR T-<br>EYES SF<br>EARS GI   | OSE<br>PS<br>TH (TEETH)<br>PCH (SPEECH)<br>ENL               |   |                         | LARGE<br>MEDIUM<br>SMALL<br>HEAVY<br>STOCKY                                 | PLUMP<br>THIN   |                                 |   |                              | NECK<br>SHLDRS<br>ARMS<br>HANDS<br>LEGS<br>BODY   | STANCE<br>WALK<br>HEALTH<br>SKIN<br>GENL                        |     |
|   | States   |  |   |                         | iches   |   |                                 |   | gencie                       |   |   |     |
|   | CA NJ<br>DC NY   |  |   | PR<br>X                 | SPL<br>GEN  |   |                                 |   | EC                           | CUST  | NAVY<br>Ng A  |     |

| (d) | RT - Ret<br>TD - Ter<br>03 - Wif | nt remark on Personnel List<br>turn from temporary departure<br>mporary departure<br>de ceases employment |                         |   |               | BLOND BLUE, DK BLUE, LT BRONZE BROWN COPPER CREAM | GREEN<br>GREEN<br>GREY<br>HAZEL<br>LAVEN<br>MAROO<br>ORANG | , LT<br>DER<br>N                   | PURPLE RED SILVER TAN TURQUOISE WHITE YELLOW       |
|-----|----------------------------------|---|-------------------------|---|---------------|---|--|------------------------------------|--|
| ŀ   | Head Fea                         | tures   |                         | Build                                       |               |   | Boo  | dy Feat                            | ures   |
|     | HEAD<br>HAIR<br>EYES             | NOSE<br>LIPS<br>T-TH (TEETH)<br>SPCH (SPEECH)<br>GENL   |                         | LARGE<br>MEDIUM<br>SMALL<br>HEAVY<br>STOCKY | PLUMP<br>THIN |   | SHI<br>AR  | NDS<br>GS                          | STANCE<br>WALK<br>HEALTH<br>SKIN<br>GENL           |
|     | States                           |   | Branc                   | hes   |               | Α   | gencies  |                                    |  |
|     | DC IIL V MD Others - S           | NJ NY VA See Directory of Post Offices - See Appendix J signations  | PR<br>X<br>KR<br>N<br>F | SPL<br>GEN<br>TR<br>MIS                     |               | A<br>A<br>A<br>A<br>C<br>C                        | EC<br>RMY<br>F<br>GRI<br>G<br>HA                           | CUST DIA FAA FBIS FGN INS IRS NASA | NAVY<br>NSA<br>RCMP<br>SSER<br>S D<br>USIS<br>USSS |
| - 1 | AVENHE                           | AV  |                         | T ANID                                      | TAY           |   |  |                                    |  |

| Countries - See    | Appendix J                                |           |      | CMCE | IRS<br>NASA | USSS |
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| Street Designation | ons                                       |           |      |      |             |      |
| AVENUE             | AV  | LANE      | LN   | F    | ROUTE       | RT   |
| BOULEVARD          | BV  | PARKWAY   | PW   | _    | QUARE       | SQ   |
| CIRCLE             | CL  | PIKE      | PK   |      | TREET       | ST   |
| COURT              | CT · ·                                    | PLACE     | PL   |      | TERRACE     | TR   |
| DRIVE              | DR .                                      | PLAZA .   | PZ   | J    | TURNPIKE    | TP   |
| HIGHWAY            | HW  | ROAD.     | RD   |      |             |      |
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| lace of Birth   | City of Birth                             |  | Date of I         | 31rtn  | (MDY)    | Sex      |             |
| itizenship  | Type - # of P                             | assport  | K City of Is      | ssue   |          | Date     | (MI         |
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| elative (Last, First, Middle Name                               | es <i>)</i>                               |  | Relations         | surb   | Born (Y) | Aro #    | PA          |
| ic. Yr State K License #  | Body Style K                              | Make   | Model             |  | Yr       | Color    |             |
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|    |   |  |   | <b>4</b>                         | TYPE   | F CASE  |                                 |   |  |  |   |
|----|---|--|---|----------------------------------|--|---|---------------------------------|---|--|--|---|
|    | USSR  |  | Bulgaria  | (                                | Czech  | Hungary   |                                 | Poland  |  |  | Romania   |
|    | AFLT AGRICO ATC BMUN CONOF CRSPNDT INT SFCON SMO                                | SMUN SOVCOM SOVCOUR SOVEMB SOVINFO SOVUNGA UMUN UNSEC UNTEMP | BUNM<br>BUNSEC<br>BTA<br>BTM<br>BUEMB<br>BUNGA<br>BTO | (                                | CUNM CUNSEC CTK CSA CEDOK CZCOMO CZNSA CZEMB CUNGA                           | HUNM<br>HUNSEC<br>HUEMB<br>HUCOMO<br>HUPRESS<br>HUTA<br>HUNGA | 1                               | PUNM POEMB POCON POCOMO LOT GAL PEKAO POLART PAP                                    |  | SEC<br>MBA   | RUNM<br>RUNSEC<br>ROCOMO<br>ROTRAVO<br>ROEMB<br>RONEWS<br>RUNGA |
|    | Status of Ca  | ise  |   | Name '                           | Types  |   | Pass                            | sport Types   |  |  | Body Style  |
|    | F - Priorit S - Priorit T - Priorit D - Defect P - Pendir I - Pendir C - Closed | y II<br>y III<br>ion potential case<br>ng<br>ng inactive     | e   | A - A<br>M - M<br>C - C<br>F - H | Crue Name<br>Aka<br>Maiden Name<br>Code Name<br>Iostile Service<br>Code Name |   | K -<br>M -<br>S -<br>T -<br>U - | Diplomatic<br>Consular<br>Seamen<br>Service or<br>Ordinary<br>United Nat<br>Unknown | officia  | 1  | SEDAN 2 DR CONV WAGON TRUCK CYCLE                               |
|    | Key Symbols   | S  |   |                                  |  |   |                                 | Colors  |  |  |   |
|    | RT - Retur  |  | departure   |                                  | • .  |   |                                 | BEIGE BLACK BLOND BLUE BLUE, DK BLUE, LT BRONZE BROWN COPPER CREAM                  | GRI<br>GRI<br>HAZ<br>LAV<br>MAI                | CEN<br>CEN, DK<br>CEN, LT<br>CY<br>ZEL<br>VENDER<br>ROON | PINK PLATINUM PURPLE RED SILVER TAN TURQUOISE WHITE YELLOW      |
|    | Head Featur   |  |   |                                  | Build  |   |                                 |   |  | Body Feat  | /\  |
|    | HEAD LI<br>HAIR T-<br>EYES SI   | OSE<br>IPS<br>-TH (TEETH)<br>PCH (SPEECH)<br>ENL             |   |                                  | LARGE<br>MEDIUM<br>SMALL<br>HEAVY<br>STOCKY                                  | PLUMP<br>THIN   |                                 |   |  | NECK<br>SHLDRS<br>ARMS<br>HANDS<br>LEGS<br>BODY          | STANCE (<br>WALK<br>HEALTH<br>SKIN<br>GENL                      |
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|    |   | Y A A Directory of Pos                                       |   | PR<br>X<br>KR<br>N<br>F<br>S     | SPL<br>GEN<br>TR<br>MIS  |   |                                 |   | AEC<br>ARMY<br>AF<br>AGRI<br>CG<br>CIA<br>CMCE | CUST DIA FAA FBIS FGN INS IRS NASA                       | NAVY<br>NSA<br>RCMP<br>SSER<br>S D<br>USIS<br>USSS              |
| 1  | AVENUE  | AV   |   |                                  | LANE   | LN  |                                 |   |  | ROUTE  | RT  |
|    | BOULEVAR<br>CIRCLE<br>COURT<br>DRIVE<br>HIGHWAY                                 | CD BV<br>CL<br>CT<br>DR<br>HW                                |   |                                  | PARKWAY<br>PIKE<br>PLACE<br>PLAZA<br>ROAD                                    | PK<br>PL<br>PZ  | <b>बीक</b>                      |   |  | SQUARE<br>STREET<br>TERRACE<br>TURNPIKE                  |   |
| NW | 55033 Do  | cId:32989613   | Page 2  | 11                               | - * * * * * * * * * * * * * * * * * * *                                      | ·VIIIC  |                                 |   |  |  |   |

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| Place of Birth  | City of Birth           | Date           | of Birth     | (MDY)                      | Sex                    |           |
| Citizenship   | Type - # of Passport    | 75 (7:4)       | of Issue     |                            | Date                   |           |
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| ntelligence Occupation  |                         |                |              |                            | [                      |           |
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| Remarks  Street Building  |                         | CATION   Phone |              | 59<br>59<br> ABRF<br>  :   | Languago<br>Languago   |           |
| Remarks<br>Remarks  | K City                  |                |              | 59<br>59                   | Languago<br>Languago   |           |
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|     |          | USSR   |  | Bulgaria  |                              | Czech  | Hungary   | -                               | Poland  |  |  | Romania  |
|     |          | AFLT AGRICO ATC BMUN CONOF CRSPNDT INT SFCON SMO       | SMUN SOVCOM SOVCOUR SOVEMB SOVINFO SOVUNGA UMUN UNSEC UNTEMP | BUNM<br>BUNSEC<br>BTA<br>BTM<br>BUEMB<br>BUNGA<br>BTO |                              | CUNSEC<br>CTK<br>CSA<br>CEDOK<br>CZCOMO                                      | HUNM<br>HUNSEC<br>HUEMB<br>HUCOMO<br>HUPRESS<br>HUTA<br>HUNGA | 3                               | PUNM POEMB POCON POCOMO LOT GAL PEKAO POLART PAP                                    | POE<br>PUN                                     | ISEC<br>EMBA                                     | RUNM<br>RUNSEC<br>ROCOMO<br>ROTRAVO<br>ROEMB<br>RONEWS<br>RUNGA          |
|     | 1        | Status of Ca   | se   |   | Name                         | Types  |   | Pass                            | sport Types   |  |  | Body Style   |
|     |          | P - Pendin   | 7 II y III ion potential case g g inactive                   | <del>)</del>  | A -<br>M -<br>C -            | True Name<br>Aka<br>Maiden Name<br>Code Name<br>Hostile Service<br>Code Name |   | K -<br>M -<br>S -<br>T -<br>U - | Diplomatic<br>Consular<br>Seamen<br>Service or<br>Ordinary<br>United Nat<br>Unknown | officia  | પો   | SEDAN 2 DR CONV WAGON TRUCK CYCLE  |
|     | 1        | Key Symbols  | ;  |   |                              |  |   |                                 | Colors  |  |  |  |
| (   | <u> </u> | AR - Arrive DP - Depar PL - Print RT - Retur TD - Temp | e U. S.  | departure   |                              |  |   |                                 | BEIGE<br>BLACK<br>BLOND<br>BLUE<br>BLUE, DK<br>BLUE, LT<br>BRONZE<br>BROWN          | GRI<br>GRI<br>GRI<br>HAI                       | EEN<br>EEN, DK<br>EEN, LT<br>EY<br>ZEL<br>VENDER | PINK<br>PLATINUM<br>PURPLE<br>RED<br>SILVER<br>TAN<br>TURQUOISE<br>WHITE |
|     |          |  |  |   |                              |  |   |                                 | COPPER<br>CREAM   |  |  | YELLOW /   |
|     |          | Head Featur  |  |   |                              | Build  |   |                                 |   |  | Body Feat  | ures (   |
|     |          | HEAD LI<br>HAIR T-<br>EYES SP                          | OSE<br>PS<br>TH (TEETH)<br>CH (SPEECH)<br>CNL                |   |                              | LARGE<br>MEDIUM<br>SMALL<br>HEAVY<br>STOCKY                                  | PLUMP<br>THIN   |                                 |   |  | NECK<br>SHLDRS<br>ARMS<br>HANDS<br>LEGS<br>BODY  | STANCE<br>WALK<br>HEALTH<br>SKIN<br>GENL                                 |
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|     |          | AVENUE   | AV   |   |                              | LANE   | LN  |                                 |   |  | ROUTE  | RT   |
| \   |          | BOULEVARI<br>CIRCLE<br>COURT<br>DRIVE<br>HIGHWAY       | D BV<br>CL<br>CT<br>DR<br>HW                                 |   | ,                            | PARKWAY<br>PIKE<br>PLACE<br>PLAZA<br>ROAD                                    | PW<br>PK<br>PL<br>PZ<br>RD                                    |                                 |   |  | SQUARE<br>STREET<br>TERRACE<br>TURNPIKE          | SQ<br>ST<br>TR   |
| ш   | 5503     | 33 Doctd.  | 32989613 Par   | ro 912  | •                            | Chally Malin   | d.  |                                 |   |  |  |  |

|   | Routing Slip<br>5-163 (Rev. 2-26-74)  | (Copies to Legats Chec  | ked)                                   |
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|   | RE: EXTREMIST PHOT  | OGRAPH ALBUM (EPA)  |  |
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5-165 (2-7-74)

Director Office of Investigations and Security Room 5037 -165 Main Commerce Building Washington, D. C. 20230 1. For your information, I am enclosing communications which may be of interest to you. 2. It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. 3. No further investigation is contemplated with regard to this matter. 4. You will be advised of the pertinent developments in connection with this inquiry. 5. Please note change in caption of this case. 6. Status of case: Completed Incomplete Director Federal Bureau of Investigation

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### Office Advance and Expenses

| Office  | Date                               |  |  |  |  |  |  |  |  |  |
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| Period Covered  | Rate of Exchange                   |  |  |  |  |  |  |  |  |  |
| ltem  | Amount                             |  |  |  |  |  |  |  |  |  |
| Cash on Bank  |                                    |  |  |  |  |  |  |  |  |  |
| Cash on Hand  |                                    |  |  |  |  |  |  |  |  |  |
| Advances to Employees:  Date  Name                                      | Amount                             |  |  |  |  |  |  |  |  |  |
|   |                                    |  |  |  |  |  |  |  |  |  |
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|   | 26-2                               |  |  |  |  |  |  |  |  |  |
|   |                                    |  |  |  |  |  |  |  |  |  |
| Total   | Advances to Employees              |  |  |  |  |  |  |  |  |  |
| Expenditures: (Itemize each item on separ Item                          | Amount                             |  |  |  |  |  |  |  |  |  |
| Confidential Informants. Transportation Nonexpendable Property Supplies |                                    |  |  |  |  |  |  |  |  |  |
| Office Administration Expenses Miscellaneous                            |                                    |  |  |  |  |  |  |  |  |  |
| Total (   | Amount Reimbursable by the Bureau) |  |  |  |  |  |  |  |  |  |
| Total Office Advance Account  |                                    |  |  |  |  |  |  |  |  |  |
| Legal Attache   |                                    |  |  |  |  |  |  |  |  |  |
| Voucher #   | Account submitted for              |  |  |  |  |  |  |  |  |  |
| Check #<br>Type Check<br>Mailed   | Differences                        |  |  |  |  |  |  |  |  |  |
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LEG-5 (Rev. 7-2-74)
OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA GEN. REG. NO. 27



### UNITED STATES GOVERNMENT

## Memorandum

| ТО     | :  | Director, FBI           |                 |                | DATE:           |  |
|--------|----|-------------------------|-----------------|----------------|-----------------|--|
| FROM   | :  | Legal Attache,          | (               |                | )               | Attn: FBI Laboratory Crypt Section   |
| SUBJEC | Т: |                         |                 |                |                 |  |
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|        |    | Request th              | e enclosed      |                |                 |  |
|        |    |                         | ich is describe | ed below, be   | translate       | ed 📺 verbatim 🔠 in summary   |
|        |    | Description of Materia  |                 |                |                 | l received onsification from:  |
|        |    |                         | unuer           |                | C1a             | SSINCATION ITOM.   |
|        |    |                         |                 |                |                 |  |
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Status:

Bureau - Enc. ( )

LEG-6 (Rev. 11-15-73)

The American Embassy

Dear Sir:

For your information, I am enclosing the material described below, which may be of interest to you.

Legal Attache

Very truly yours,

Reference:

LEG-6

Enc.:

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 10 12 12000 BYSTO BY

☐ Additional investigation being conducted ☐ Investigation concluded

concluded

NW<sup>\*</sup>55033 DocId:32989613 Page 221

LEG-7 (Rev. 8-11-70)
OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA GEN. REG. NO. 27



#### UNITED STATES GOVERNMENT

# Memorandum

| то     | :  | Director, FBI (                                 |            | )     | DATE:    |                    |
|--------|----|---|------------|-------|----------|--------------------|
| FROM   | :  | Legal Attache,                                  | (          |       | ) (      | )                  |
| SUBJEC | Т: |   |            |       |          |                    |
|        |    |   |            |       |          |                    |
|        |    | Reference:                                      |            |       |          |                    |
|        |    | Dissemination, as o to foreign agencies listed. | utlined be | elow, | was made | on dates indicated |
|        |    |   | /          | ٤     | 6-       | 7                  |
|        |    | copies of                                       |            |       |          | (                  |
|        |    | ☐ Pertinent information from                    |            |       |          |                    |
|        |    | Name and Location of Agency                     |            |       |          | Date Furnished     |

3 - Bureau (1 - Foreign Liaison Desk) ALL INFORMATION CONTAINED
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#### REPORT ON FUNDS SPENT ABROAD

| From: Legal Attache,                        |              |                | Date  |                      |
|---|--------------|----------------|-------|----------------------|
| Number of Employees Assign                  | ed, Above Da | ate            |       |                      |
|   | PA           | YMENTS RECEIVE | ED    | SPENT IN             |
|   | SALARY       | ALLOWANCES     | TOTAL | OR RETD.<br>TO U. S. |
| Report due February 15                      |              |                |       |                      |
| Current fiscal year: Actual July - Dec      |              |                |       |                      |
| Estimate Jan June                           |              |                |       |                      |
| Next fiscal year:<br>Estimate July - Dec    | . /          | 26             | -8    |                      |
| Estimate Jan June                           |              |                |       |                      |
| Report due August 15                        |              |                |       |                      |
| Past fiscal year: Actual Jan June           |              |                |       |                      |
| Current fiscal year:<br>Estimate July - Dec | ,            |                |       |                      |
| Estimate Jan June                           |              |                | •     |                      |
| INSTRUCTIONS:                               |              |                |       |                      |

- 1. Complete only applicable portion of form -- due February 15 or August 15 -- and forward one copy to the Bureau.
- 2. Report in dollars. Include net salary, post, quarters and education allowances received or estimated to be received during each 6-month period, based on date of check. Check transmittal lists should be used in connection with the preparation of this report.
- 3. When an employee transfers from an office, prior to departure he should furnish Legal Attache "actual" figures to date of transfer. Furnish data for new assignment from date of arrival.

  ALL INFORMATION CONTAINED

DATE 10 2 2000 BY SP2 PM/M





| TO:     | Director,    | FBI (   |             |                       |   |                                  |                             |                                      | )           |            |    | DATE:   |
|---------|--------------|---------|-------------|-----------------------|---|----------------------------------|-----------------------------|--------------------------------------|-------------|------------|----|---|
| FROM:   | Legat,       |         |             |                       |   |                                  |                             |                                      |             | Att:       |    | <ul> <li>Name-Check Section</li> <li>Foreign Liaison Unit</li> <li>Identification Division</li> <li>NCIC</li> </ul> |
|         | Request ch   | neck of | Bureau      |                       | Crin<br>Iden<br>Fin<br>Nati<br>Pr<br>Nati | gerpi<br>ional<br>opert<br>ional | eation<br>rints<br>Crity fi | es<br>n Div<br>encl<br>me In<br>les) | ose<br>forn | d<br>natio | n  | ords<br>Center (Wanted Person and/o<br>Center (Computerized   |
| Name -  | •            |         |             |                       |   |                                  |                             |                                      |             |            |    |   |
| Charac  | eter -       |         |             |                       |   |                                  |                             |                                      |             |            |    |   |
| Date of | f Birth -    |         |             |                       |   |                                  |                             |                                      |             |            |    |   |
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TO : Mr. White

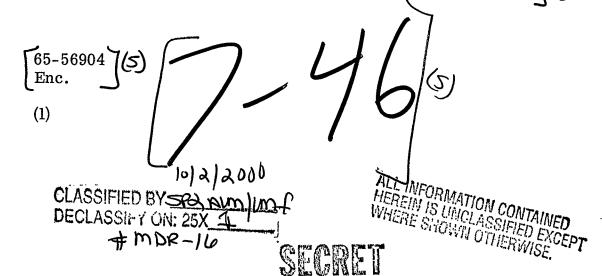
DATE:

FROM: B. P. Herndon

SUBJECT: BUREAU SOURCE #3 GENERAL

This is classified TOP SECRET as it divulges information on a highly sensitive source.

Enclosed is Bureau Source #3 material for transmission to the National Security Agency by secure teletype, Attention: (5)



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#### UNITED STATES GOVERNMENT

## Memorandum

то

: SAC,

DATE:

FROM

: Director, FBI

SUBJECT: TECHNICAL EQUIPMENT

| Equipment listed below has been received. After repairs have been made it will be returned to your office.                               |
|--|
| Equipment listed below has been repaired and is being returned to your office.   |
| Equipment listed below is being shipped to your office for permanent temporary assignment. Appropriate inventory changes should be made. |

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| DOB                         |                        |  |  |  |  |
| Technical Security School   | Special Qualifications |  |  |  |  |
| Retraining                  |                        |  |  |  |  |
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In Reply, Please Refer to File No.

# UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

#### Gentlemen:

The Federal Bureau of Investigation is interested in obtaining available technical information and specifications pertaining to

7-79

Since this material might have possible uses in connection with official investigations, it would be appreciated if you would afford confidential treatment to this inquiry. Please direct your reply for the attention of the Federal Bureau of Investigation Laboratory.

Very truly yours,

Clarence M. Kelley

Director

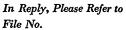
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RECOMMENDED FOR DELETION 6/12/75 COMSEC EQUIPMENT STATUS AFSAM 7 KL-7A Modified **System:** Component SERIALLY NUMBERED . TAG NUMBERED 11. Printer Unit 1. Base # \_\_\_\_\_ 2. Stepping Unit 3. Cipher Unit 12. Contact Panel # 4. Case 13. Keyboard Assembly 5. Complete Machine 6. Keyboard Adapter 7. Power Pack HSP-1 # \_\_\_\_\_ 14. Power Converter 8. Rotors; Type \_\_\_\_ # \_\_\_\_ 9. HL-1B 10. Manual; Type \_\_\_\_# \_\_\_\_ Location C-T Section \_\_\_Field Office Code Room 🔲 Quantico 🕆 Sent and Received Sent to \_\_\_\_ Received from \_\_ Date \_\_\_\_ Condition .. New Remarks: \_\_\_\_ Operating Defective ECOMMEN ALL INFORMATION CONTAINED Repaired by HEREIN IS UNCLASSIFIED CHANGE STATUS Routing: EQUIP. IN EQUIP. OUT EDP Vault Vault EDP Mr. Newpher - Væylt Mr. Gleason Mr. Gleason Vault EDP

NW 55033 DocId:32989613 Page 232





# UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

Registered

Date:

To:

The Inspector General, Office of Investigation

Department of Housing and Urban Development

Washington, D. C. 20410

From:

Director, Federal Bureau of Investigation

Subject:

Your Claim #:

Your File #:

Reference: Letter dated

The original documents which were transmitted with your referenced letter are returned herewith.

Photographs of the original documents and any photocopies which you may have submitted in connection with this case are retained in the Bureau's files.

The results of the Laboratory examination and the investigation being conducted will be submitted to you subsequently.

Enclosures

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 9/26/2000 BY 5/2 Aum //19/



#### UNITED STATES DEPARTMENT OF JUSTICE

#### FEDERAL BUREAU OF INVESTIGATION

WASHINGTON, D.C. 20535

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|----|----|--------|---|
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|    |    |        |   |

In Reply, Please Refer to File No.

From: Director, Federal Bureau of Investigation

RE:

The FBI Laboratory has received evidence which you sent for examination in the above-entitled case. A Laboratory report will be sent to you after the examination has been completed.

For your information, it is the established policy of the FBI Laboratory, that the results of a voiceprint examination be used only for your investigative assistance. No testimony by FBI Laboratory experts will be provided.

Should you find the above condition acceptable please indicate by signing this letter in the space provided. If you desire that no voiceprint examination be conducted in this matter, so designate by checking the space at the very bottom of this letter. The evidence will be promptly returned to you via registered mail.

An enclosed self-addressed envelope has been provided for your convenience. No postage is necessary. The examination is being held in abeyance pending receipt of the requested information.

It is agreed that the results of any voiceprint examination conducted by
the FBI Laboratory in the above case will be used only for the investigative assistance of this Department in connection with a criminal matter.
The results will not serve as the basis for any grand jury, court or
administrative proceedings against any individual. It is understood that
no expert voiceprint testimony will be provided by the FBI Laboratory,
and none is requested.

|    | (Signed)   |  |
|----|--|--|
| 2. | ☐ It is requested that no voiceprint examination be conducted in connection with the above case and that the submitted evidence be returned. |  |

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|   |      | SENT | REC'D | ACK. |
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8-25 (Rev. 11-18-66)

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10-16 (Rev. 8-8-73)
OPTIONAL FORM NO. 10
MAY 1962 EDITION
GSA GEN. REG. NO. 27





#### UNITED STATES GOVERNMENT

## Memorandum

TO

SAC

DATE:

FROM

Inspector

SUBJECT:

|    |     |               |     | 137 - |
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| CI | PCI | TE            | PC  | 134 - |
|    |     |               |     | 170 - |
| SI | PSI | $\mathbf{EI}$ | PEI |       |

The file pertaining to the above-captioned informant has been reviewed by the Inspection Staff, and the informant has been rated as:

Excellent

☐ Very Good

☐ Good

Fair

☐ Poor

☐ Insufficient Data to Rate

You are referred to the appropriate survey for instructions as to those informants rated "Poor." If rated "Fair," this matter should be followed closely by you for 90 days. Specific assignments should be given the informant during this period. If, at the end of 90 days, no positive improvement is shown, the file should be closed. The Bureau should be advised of the action taken as to those informants rated "Fair," i.e., were they closed out or did they become productive.

Remarks:

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MDR-16

8-119 (Rev. 5-16-74)

UNITED STATES GOVERNMENT

## Memorandum

TO : SAC,

SUBJECT:

DATE:

FROM : Director, FBI

8-119

ReBulet to Albany dated 5/6/74 captioned 'Interesting Case Write-up Program.''

An Interesting Case write-up is requested on captioned subject. Refer to SAC Letters 65-5(E) and 70-17(A), and Part II, Section 6-D, of the Manual of Rules and Regulations for detailed instructions on the preparation of Interesting Case write-ups.

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 1 26 2000 BYSP 2000 In

NW 55033 DocId:32989613 Page 239

## MÉDIA CONTACT

Name:

Media:

Address:

Phone:

How Contact Made:

Date of Contact:

8-159 (Rev. 10-9-73)

DOJ/FB!

X External Affairs

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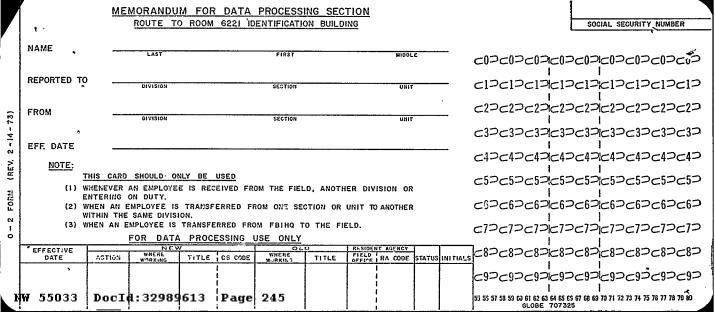
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O-4 (Rev. 11-19-64)
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C. 20535
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Re:

TO:

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All items listed above are contained in this package. A detailed description of items will be found in Bureau communication dated

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0-4a (Rev. 1-19-67) FEDERAL BUREAU OF INVESTIGATION WASHINGTON, D. C. 20535 DATE: Re: TO: Invoice of Contents Crypt.-Trans. Document P & C Radio Engineering ☐ LFPS ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATES AND JONE Special Instructions: FBI File No. Mail Room: Show shipment date and registry number. Shipping Room: Show shipment date; bill of lading number; initial invoice; return to Section checked in block; after initialing in block, invoice to be placed in administrative file.

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Federal Bureau of Investigation



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| <u> </u>   | It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. |  |  |  |  |  |
| <u> </u>   | No further investigation is contemplated with regard to this matter  |  |  |  |  |  |
| 4.         | You will be advised of the pertinent developments in connection with this inquiry.   |  |  |  |  |  |
| <u></u> 5. | Please note change in caption of this case.  |  |  |  |  |  |
| <u> </u>   | Status of case: Completed Incomplete   |  |  |  |  |  |
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Federal Bureau of Investigation

Federal Bureau of Investigation

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Director Central Intelligence Agency BY CIA COURIER

ATTENTION: Director, Office of Security

| 1.       | For your information, I am enclosing communications which may be of interest to you.   |
|----------|--|
| 2.       | It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. |
| <u> </u> | No further investigation is contemplated with regard to this matter  |
| 4.       | You will be advised of the pertinent developments in connection with this inquiry.   |
| <u> </u> | Please note change in caption of this case.  |
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Director Federal Bureau of Investigation

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Federal Bureau of Investigation

BY CIA COURIER

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Director

Central Intelligence Agency
Washington, D. C. 20505

ATTENTION: Deputy Director for Operations

| <u> </u>   | For your information, I am enclosing communications which may be of interest to you.   |
|------------|--|
| 2.         | It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. |
| <u></u> 3. | No further investigation is contemplated with regard to this matter.   |
| <u> </u>   | You will be advised of the pertinent developments in connection with this inquiry.   |
| <u> </u>   | Please note change in caption of this case.  |
| <u> </u>   | Status of case: Completed Incomplete   |
|            | Director<br>Federal Bureau of Investigation  |

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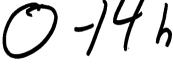
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## Federal Bureau of Investigation

Assistant Chief of Staff for Intelligence Department of the Army USAINTA LNO (MIIA-SO-L)

Room 1J073, Forrestal Building 1000 Independence Avenue, Southwest

Washington, D. C. 20314



| 1.                          | For your information, I am enclosing communications which may be of interest to you. $ \\$   |
|-----------------------------|--|
| 2.                          | It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. |
| <u> </u>                    | No further investigation is contemplated with regard to this matter.   |
| 4.                          | You will be advised of the pertinent developments in connection with this inquiry.   |
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Federal Bureau of Investigation

ATTENTION: Director of Security Customer Relations

0-14w

| National Security Agency       |       |
|--------------------------------|-------|
| Fort George G. Meade, Maryland | 20755 |

Director

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|          |  |
| 1.       | For your information, I am enclosing communications which may be of interest to you.   |
| 2.       | It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. |
| 3.       | No further investigation is contemplated with regard to this matter.   |
| 4.       | You will be advised of the pertinent developments in connection with this inquiry.   |
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Director Federal Bureau of Investigation

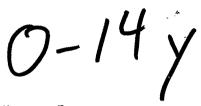
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Federal Bureau of Investigation



Commanding General United States Army Intelligence Command Fort Holabird, Maryland 21219

| <u> </u>    | For your information, I am enclosing communications which may be of interest to you.   |
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| 2.          | It will be appreciated if you will have the investigation conducted as requested in the enclosed memorandum and furnish the results. |
| <u> </u>    | No further investigation is contemplated with regard to this matter.   |
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7 55033 DocId:329896137 Page 256

## Memorandum

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Assistant Attorney General

Criminal Division

DATE:

FROM

Director, FBI

SUBJECT:

0-75

ELECTRONIC SURVEILLANCE

Reference is made to your memorandum dated

On the basis of identifying data provided by the Department concerning captioned individual(s), a review has been made of appropriate records. (He was) (They were) not the target(s) of an electronic surveillance nor were any of (his) (their) conversations monitored by an electronic device of the FBI. Further, this Bureau did not maintain any electronic surveillance on premises which were known to have been owned, leased, or licensed by the above individual(s).

It is suggested that other Federal investigative agencies be contacted to determine if they had coverage of the subject(s).

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NW 55033 DocId:32989613 Page 260

ALL INFORMATION CONTAINED
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TO BE IV

UNITED STATES GOVERNMENT

## Memorandum

TO

DATE:

FROM:

SUBJECT:

12-12

Reference is made to Part II, Section 7B, 2a, (2), of the Manual of Rules and Regulations, which provides that advances granted for transportation costs must be accounted for within 45 days, and advances granted for transportation plus storage expenses must be accounted for within 75 days. It is pointed out that no exceptions can be made in connection with this policy.

Bureau records indicate that the above-captioned employee received an advance of funds in the amount of on which should have been accounted for no later than

It is requested that you advise the above employee that immediate arrangements must be made to liquidate this advance.

HEREIN IS UNGLASSIFIED

DATE 9 06 1000 BY SPA DATE 1000 B

| Payments to Informants<br>3-318 (9-21-55) | Work | Sheet, | Voucher | U |
|---|------|--------|---------|---|
| 10-24                                     |      |        |         |   |

(2-20 Office Period Informant Material and Number of Search Symbol Numbers Initials Aliases Date Services & Date Total Period and Remarks Services Expenses Expenses ALL INFORMATION COMPAINED
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| 12-19 (Rev. 10-2-73) |  |
|----------------------|--|
| <del>CON-</del>      | FIDENTIAL RECEIPT  |
| ☐ Disbursement       | Date   |
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| Approved             |  |
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| Retu                 | ALL INFORMATION COLUMN to: Assistant Director 19 UNCLASSIFIE Computer Systems Division O VIDVA |
|                      | MOR-16   |

on "Where Working" Basis Divisional Count of Employees as of 9:00 A.M. Active Duty Employees by Assignment 3 Total Total SLWOP Grand Total Total MLWOP Division Agents Clerks Director's Office Associate Director's Office Identification Training Administrative Files and Communications Intelligence General Investigative Laboratory External Affairs Special Investigative Inspection Office of Legal Counsel Computer Systems Office of Planning and Evaluation TOTAL FBIHO Field Clerks Field Agents Yent. TOTAL FIELD mor\_11

# Includes employees ( Agents, NW 55033 DocId:32989613 Page 265

COMBINED TOTALS

Clerks) assigned to Records Section

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Name:
Sex:
Race:
Birth date:
Height:
Weight:
Build:
Hair:
Eyes:
Complexion:
Scars & Marks:
Peculiarities:
Marital Status:
Relatives:
Nationality:
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HEREIN IS UNCLASSIFIED
DATE TO LOCAL BY SELECTION
Birth place:
FPC:
FBI or PD No.:
                                                      MOR-16
SSN:
3-435 (REV. 10-30-59)
NW 55033
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12-35

10-6a (Rev. 11-12-74)

## INSPECTOR'S MASTER CASE SHEET (INFORMANTS)

NOTE: List Types of Informants (Criminal, Top Echelon, Security, Extremist) on Separate Forms

| TO   | BE COMPLET                   |                              |                       | ACTION BY INSPECTOR |  |               |                                    |     |   |           |   |   |  |          |   |           |                 |         |
|--|------------------------------|------------------------------|-----------------------|---------------------|--|---------------|------------------------------------|-----|---|-----------|---|---|--|----------|---|-----------|-----------------|---------|
|  |                              |                              | PSI o<br>Prob<br>Ext. | . lė                |  |               |                                    | Rat | , |           |   | Data From<br>File and Con<br>activities being<br>reported by Inf.   | Reviewing<br>ntact Forms   |          | Con-  | Fo<br>Err | orm             | -       |
| List all approved Informants first, Potential or Prob. last.  Office File Number | Complete<br>Symbol<br>Number | Agent<br>to Whom<br>Assigned | Bur. App.             | Not Bur. App. d     | ı  | In-<br>itials | In-<br>suff.<br>Data<br>To<br>Rate | e v |   | F Paoiorr | If Informant<br>Rated Poor<br>or Fair -<br>Bufile<br>Number | reported by Inf. cecurity & Ext. — show group being covered, Criminal - list classification on.which reporting. | For Security & Ext. Inf show Klan, Party, etc. of which inf. a member. | l "Pink" | tact<br>within<br>pre-<br>scribed<br>period<br>missed | ι Δ.      | C l e r i c a l | Remarks |
|  |                              |                              |                       |                     |  |               |                                    |     |   |           |   |   |  |          |   |           |                 | ·       |
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| Confidential Voucher<br>Register (Office-Agents)<br>3-64 (Rev. 11-17-59) | Registry (   | Payee | Office | Date<br>Prepared                                 | Amount   | Remarks | Ass't Dir. | Div. III                                     | Dαte<br>Scheduled | Schedule<br>Number | Checks<br>Mailed | Blue Slips<br>Removed<br>(Agents)                | To<br>Expense<br>(Agents)                        |
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