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|---|--|---|--|---|--|
| Standard Form 86 AUGUST 1964 U.S. CIVIL SERVICE COMMISSION (F.P.M. CHAPTER 735) 86-106 | | SECURITY INVESTIGATION DATA FOR SENSITIVE POSITION | | CASE SERIAL NO. (CSC use only) | |
| INSTRUCTIONS.—Prepare in triplicate, using a typewriter. Fill in all items. If the answer is "No" or "None," so state. If more space is needed for any item, continue under item 28. | | | | | |
| 1. FULL NAME (Initials and abridgements of full name are not acceptable. If no middle name, show "(NMN)"; if initials only, show "(no given or middle name)" | | (LAST NAME) WILLIAMS (FIRST NAME) ORDEN (MIDDLE NAME) — OTHER NAMES USED: (Maiden name, names by former marriages, former names changed legally or otherwise, aliases, nicknames, etc. Specify which, and show dates used.) — | | 2. DATE OF BIRTH 22 JAN 1920 3. PLACE OF BIRTH New York, N.Y. 4. <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE 5. HEIGHT 6'-0 WEIGHT 185 COLOR EYES Hazel COLOR HAIR Gray | |
| 6. <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOW(ER) <input checked="" type="checkbox"/> DIVORCED | | 7. IF MARRIED, WIDOWED, OR DIVORCED, GIVE FULL NAME AND DATE AND PLACE OF BIRTH OF SPOUSE OR FORMER SPOUSE. INCLUDE WIFE'S MAIDEN NAME. GIVE DATE AND PLACE OF MARRIAGE OR DIVORCE. (Give same information regarding all previous marriages and divorces.) | | | |
| 8. DATES AND PLACES OF RESIDENCE. (If actual places of residence differ from the mailing addresses, furnish and identify both. Begin with present and go back to January 1, 1937. Continue under item 28 on other side if necessary.) | | | | | |
| FROM 6-7-62 | | TO April 63 | | NUMBER AND STREET { 924 (7) 2545 }^{NW} | |
| April 63 | | July 64 | | USAID | |
| July 64 | | Jan 65 | | 2121 Virginia Ave. NW | |
| .. (also) .. | | .. | | Washington DC | |
| Jan 65 | | July 66 | | SAIGON VIETNAM | |
| July 66 | | present | | SAIGON VIETNAM | |
| * according to my recollection. | | | | | |
| 9. <input checked="" type="checkbox"/> BY BIRTH <input type="checkbox"/> NATURALIZED | | ALIEN REGISTRATION NO. | | DATE, PLACE, AND COURT | |
| <input checked="" type="checkbox"/> U.S. CITIZEN | | CERT. NO. | | PETITION NO. | |
| <input type="checkbox"/> DERIVED-PARENTS CERT. NO(S). | | | | | |
| <input type="checkbox"/> ALIEN | | REGISTRATION NO. | | DATE AND PORT OF ENTRY | |
| 10. EDUCATION. (All schools above elementary.) | | | | | |
| NAME OF SCHOOL | | ADDRESS | | DEGREES | |
| FROM (Year) | | TO (Year) | | | |
| None since 6-7-62, except took private pilot course and license in Tunisia, 1965-66. | | | | | |
| 11. THIS SPACE FOR FBI USE. (See also item 29.) | | 12. SOCIAL SECURITY NUMBER | | | |
| 13. MILITARY SERVICE (Past or present) Yes | | SERIAL NO. (If none, give grade or rating at separation) 0-501923 | | | |
| BRANCH OF SERVICE (Army, Navy, Air Force, etc.) ARMY AIR FORCES | | FROM (Yr.) 1942 | | TO (Yr.) 1946 | |

14. HAVE YOU EVER BEEN DISCHARGED FROM THE ARMED FORCES UNDER OTHER THAN HONORABLE CONDITIONS? ☐ YES ☒ NO.
(If answer is "Yes," give details in item 28.)

15. EMPLOYMENT. (List ALL employment dates starting with your present employment. Give both month and year for all dates. Show ALL dates and addresses when unemployed. Give name under which employed if different from name now used.)

| FROM | TO | NAME OF EMPLOYER (Firm or agency) AND SUPERVISOR (Full name, if known) | ADDRESS (Where employed) | TYPE OF WORK | REASON FOR LEAVING |
|------|----|---|-----------------------------|--------------|--------------------|
|------|----|---|-----------------------------|--------------|--------------------|

| | | | | | |
|--------|------------|--------------------------------------|-------------------|--|--|
| 6-7-62 | to Present | Agency for International Development | Washington 25, DC | | |
|--------|------------|--------------------------------------|-------------------|--|--|

16. HAVE YOU EVER BEEN DISCHARGED (FIRED) FROM EMPLOYMENT FOR ANY REASON? ☐ YES ☒ NO.

17. HAVE YOU EVER RESIGNED (QUIT) AFTER BEING INFORMED THAT YOUR EMPLOYER INTENDED TO DISCHARGE (FIRE) YOU FOR ANY REASON? ☐ YES ☒ NO.
(If your answer to 16 or 17 above is "Yes" give details in item 28. Show the name and address of employer, approximate date, and reasons in each case. This information should agree with the statements made in item 15—EMPLOYMENT.)

18. HAVE YOU EVER BEEN ARRESTED, TAKEN INTO CUSTODY, HELD FOR INVESTIGATION OR QUESTIONING, OR CHARGED BY ANY LAW ENFORCEMENT AUTHORITY? (You may omit: (1) Traffic violations for which you paid a fine of \$30 or less; and (2) anything that happened before your 16th birthday. All other incidents must be included, even though they were dismissed or you merely forfeited collateral.) ☐ YES ☒ NO.

IF YOUR ANSWER IS "YES," GIVE FULL DETAILS BELOW:

| DATE | CHARGE | PLACE | LAW ENFORCEMENT AUTHORITY | ACTION TAKEN |
|------|--------|-------|------------------------------|--------------|
|------|--------|-------|------------------------------|--------------|

19. HAVE YOU EVER HAD A NERVOUS BREAKDOWN OR HAVE YOU EVER HAD MEDICAL TREATMENT FOR A MENTAL CONDITION? ☐ YES ☒ NO.
(If your answer is "Yes," give details in item 28.)

20. FOREIGN COUNTRIES VISITED (SINCE 1930). (Exclusive of military service.)

| COUNTRY | DATE LEFT U.S.A. | DATE RETURNED U.S.A. | PURPOSE |
|--|------------------|----------------------|---------------------|
| France | JUNE 1930 | AUG. 1930 | Tourist |
| World War II - England, France, Africa, South America, India (1942-45) | | | Military Service |
| Germany, France, England, Spain, Mexico, Venezuela | | | US Military Service |
| Tunisia, Japan, Philippines | | (1951 - Present) | |

21. ARE YOU NOW, OR HAVE YOU EVER BEEN, A MEMBER OF THE COMMUNIST PARTY, U.S.A., OR ANY COMMUNIST OR FASCIST ORGANIZATION? ☐ YES ☒ NO.

22. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY FOREIGN OR DOMESTIC ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH IS TOTALITARIAN, FASCIST, COMMUNIST, OR SUBVERSIVE, OR WHICH HAS ADOPTED, OR SHOWS, A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES, OR WHICH SEEKS TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS? ☐ YES ☒ NO.

23. IF YOUR ANSWER TO QUESTION 21 OR 22 ABOVE IS "YES," STATE THE NAMES OF ALL SUCH ORGANIZATIONS, ASSOCIATIONS, MOVEMENTS, GROUPS, OR COMBINATIONS OF PERSONS AND DATES OF MEMBERSHIP. IN ITEM 28 OR ON A SEPARATE SHEET TO BE ATTACHED TO AND MADE A PART OF THIS FORM, GIVE COMPLETE DETAILS OF YOUR ACTIVITIES THEREIN AND MAKE ANY EXPLANATION YOU DESIRE REGARDING YOUR MEMBERSHIP OR ACTIVITIES.

| NAME IN FULL | ADDRESS | FROM | TO | OFFICE HELD |
|--------------|---------|------|----|-------------|
|--------------|---------|------|----|-------------|

24. MEMBERSHIP IN OTHER ORGANIZATIONS. (List all organizations in which you are now a member or have been a member, except those which show religious or political affiliations.) (If none, so state.)

| NAME IN FULL | ADDRESS | TYPE | FROM | TO | OFFICE HELD |
|--------------------------------------|----------------------------|------|------|---------|-------------|
| Harvard Club of New York | 29 W. 44 St New York NY | Club | 1948 | Present | now |
| Aircraft Owners & Pilots Association | Washington DC | | 1968 | Present | now |

25. RELATIVES. (Parents, spouse, divorced spouse, children, brothers, and sisters, living or dead. Name of spouse should include maiden name and any other names by previous marriage. If person is dead, state "dead" after relationship and furnish information for other columns as of time of death.)

| RELATION | NAME IN FULL | YEAR OF BIRTH | ADDRESS | COUNTRY OF BIRTH | PRESENT CITIZENSHIP |
|-----------------|--------------------------------|---------------|--|------------------|---------------------|
| Mother | Helen Helen Williams | 1878 | 455 E 57 St New York NY | USA | USA |
| Mother | John William Williams | 1911 | 831 Black Rock Rd. Staten Island NY | USA | USA |
| Mother | Andrew Murray Williams | 1916 | 1604 Federal Ave Seattle Wash | USA | USA |
| Sister | Helen Williams Wigglesworth | 1927 | Argilla Road Ipswich, Mass | USA | USA |
| Divorced Spouse | Anne Ellis Thompson Gartner | 1927 | unknown | USA | USA |

26a. REFERENCES. (Name three persons, not relatives or employers, who are aware of your qualifications and fitness.)

| NAME IN FULL | HOME ADDRESS | BUSINESS ADDRESS | YEARS KNOWN |
|-----------------------------|-------------------|----------------------|-------------|
| Leonard Maynard | Cherry Chase Md | Ch AID Washington | 10 approx. |
| Ant. Ellsworth Bunker | Saigon, Vietnam | US Embassy, Saigon | 8 |
| Ant. Paul Henry Cabot Lodge | Manchester, Mass. | Dept of State | 4 |
| DAVID DOBLE | ACIRA, GITANA | 1/0 USAID, ACCRA | 3 |

26b. CLOSE PERSONAL ASSOCIATES. (Name three persons, such as friends, schoolmates or colleagues, who know you well.)

| NAME IN FULL | HOME ADDRESS | BUSINESS ADDRESS | YEARS KNOWN |
|--------------------|------------------------|------------------|-------------|
| Leonard Maynard | above | above | above |
| Carol G. Schreiber | TUNIS, TUNISIA | USAID / TUNIS | 3 |
| David Doble | ACIRA, GITANA | USAID / ACCRA | 3 |
| DR. H. CLAY FRICK | 180 FT. WASHINGTON AVE | New York NY. | 25 |

27. TO YOUR KNOWLEDGE, HAVE YOU EVER BEEN THE SUBJECT OF A FULL FIELD OR BACKGROUND PERSONAL INVESTIGATION BY ANY AGENCY OF THE FEDERAL GOVERNMENT? ☒ YES ☐ NO. (If your answer is "Yes," show in item 28. (1) the name of the investigating agency (2) the approximate date of investigation, and (3) the level of security clearance granted, if known.) CIA - 1951; AID - 1962

28. SPACE FOR CONTINUING ANSWERS TO OTHER QUESTIONS. (Show item numbers to which answers apply. Attach a separate sheet if there is not enough space here.)

27. Assume TOP SECRET or more.

29. REPORT OF INFORMATION DEVELOPED. (This space reserved for FBI use.)

DATE:

Before signing this form check back over it to make sure you have answered all questions fully and correctly.

CERTIFICATION

I CERTIFY that the statements made by me on this form are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

False statement on this form
is punishable by law.

April 22, 1968
(DATE)

Galen Tullhams
(SIGNATURE—Sign original and first carbon copy)

INFORMATION TO BE FURNISHED BY AGENCY

INSTRUCTIONS TO AGENCY: See Federal Personnel Manual Chapter 736 and FPM Supplement 296-31, Appendix A, for details on when this form is required and how it is used. If this is a request for investigation before appointment, insert "APPL" in the space for Date of Appointment and show information about the proposed appointment in the other spaces for appointment data. The original and the first carbon copy should be signed by the applicant or appointee. Submit the original and the unsigned carbon copy of the form, Standard Form 87 (Fingerprint Chart), and any investigative information about the person received on voucher forms or otherwise, to the United States Civil Service Commission, Bureau of Personnel Investigations, Washington, D.C., 20415. If this is a request for full field security investigation, submit these forms to the attention of the Division of Reimbursable Investigations; if this is a request for preappointment national agency checks, submit these forms to the attention of the Control Section.

RETAIN THE CARBON COPY OF STANDARD FORM 86 (SIGNED BY THE APPLICANT OR APPOINTEE) FOR YOUR FILES

| | | | |
|------------------------------|---|--|---------------------------------------|
| DATE OF APPOINTMENT | TYPE OF APPOINTMENT <input type="checkbox"/> EXCEPTED <input type="checkbox"/> COMPETITIVE. (Include indefinite and temporary types of competitive appointments.) | CIVIL SERVICE REGULATION NUMBER OR OTHER APPOINTMENT AUTHORITY | TITLE OF POSITION AND GRADE OR SALARY |
| DEPARTMENT OR AGENCY | DUTY STATION | SEND RESULTS OF PREAPPOINTMENT CHECK TO: | |
| THIS IS A SENSITIVE POSITION | | | |