

REQUEST FOR APPROVAL OF LIAISON <small>(Submit in duplicate - one will be returned to requester)</small>	CLASSIFY WHEN FILLED IN SECRET	DATE 4 October
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TO : Chief, Employee Activity Branch, PSD/OS

SUBJECT: Request for Security Approval of Liaison
 on a continuing basis one-time basis

CIA EMPLOYEES			NON-CIA EMPLOYEES	
NAME	EXT.	OFFICE		RANK
				CIV
			TITLE <i>Member-Technical Staff</i>	

BRIEF DESCRIPTION OF LIAISON, COMMENTS, KNOWN BIOGRAPHICAL AND CLEARANCE INFORMATION

Bidders Conferences - scheduled for 18 November 65 (15-30 Nov)

25X1 *Current Address* [Redacted]

Date of Birth - 16 July 1935

Place of Birth - Omaha, Nebraska

Clearance - T.S., 29 January 1964, DCSI, MDW

CLASSIFICATION OF MATTER TO BE DISCUSSED		
<input type="checkbox"/> TOP SECRET	<input checked="" type="checkbox"/> SECRET	<input type="checkbox"/> CONFIDENTIAL
OFFICE/DIVISION/STAFF <i>PSD/NPIC</i>	AUTHORIZED SIGNATURE <i>[Signature]</i>	
ROOM/BLDG/EXT. <i>4N444</i>		

FOR OFFICE OF SECURITY USE

Security approval is granted for contact at the security classification level indicated. This approval does not waive any other authorization requirements contained in Agency Regulations regarding dissemination of intelligence and intelligence information.

Authorization for liaison contact expires one year from date. Any change in employment status of individual named invalidates this approval.

FOR THE DIRECTOR OF SECURITY:

DATE _____ CHIEF, PERSONNEL SECURITY DIVISION

Declass Review by NGA.