

L/PM-D Kaye  
LF63

ACTION: s/ct

OFFICE OF THE  
LEGAL ADVISER **YES**

INFO COPIES TO:

2007 JAN 24 A 7:26  
DATE

1/23/02

- |                                       |   |                                       |   |
|---------------------------------------|---|---------------------------------------|---|
| <input type="checkbox"/> S            | <input type="checkbox"/> S/ES               | <input type="checkbox"/> A            | <input type="checkbox"/> M/P              |
| <input type="checkbox"/> D            | <input type="checkbox"/> S/ES-EX            | <input type="checkbox"/> AC           | <input type="checkbox"/> M/WHL            |
| <input type="checkbox"/> P            | <input checked="" type="checkbox"/> S/ES-IA | <input type="checkbox"/> CA           | <input type="checkbox"/> NP               |
| <input type="checkbox"/> M            | <input type="checkbox"/> S/ES-IRM           | <input type="checkbox"/> CPR          | <input type="checkbox"/> OES              |
| <input type="checkbox"/> E            | <input type="checkbox"/> S/ES-O             | <input type="checkbox"/> DRL          | <input type="checkbox"/> OIG              |
| <input type="checkbox"/> T            | <input checked="" type="checkbox"/> S/ES-CR | <input type="checkbox"/> DS           | <input type="checkbox"/> PM               |
| <input checked="" type="checkbox"/> R | <input checked="" type="checkbox"/> S/ES-S  | <input type="checkbox"/> EB           | <input type="checkbox"/> PRM              |
| <input type="checkbox"/> C            |   | <input type="checkbox"/> ECA          | <input type="checkbox"/> S/CT             |
|                                       |   | <input type="checkbox"/> FMP          | <input type="checkbox"/> S/OCR            |
|                                       |   | <input type="checkbox"/> H            | <input type="checkbox"/> S/OF             |
| <input type="checkbox"/> INR          | <input type="checkbox"/> AF                 | <input type="checkbox"/> IIP          | <input checked="" type="checkbox"/> S/RPP |
| <input type="checkbox"/> PA           | <input type="checkbox"/> EAP                | <input type="checkbox"/> INL          | <input type="checkbox"/> S/WCI            |
| <input type="checkbox"/> S/P          | <input type="checkbox"/> EUR                | <input type="checkbox"/> INR          | <input type="checkbox"/> USUN/W           |
|                                       | <input type="checkbox"/> NEA                | <input type="checkbox"/> IO           | <input type="checkbox"/> VC               |
|                                       | <input type="checkbox"/> SA                 | <input type="checkbox"/> IRM          |   |
| <input type="checkbox"/> USAID        | <input type="checkbox"/> WHA                | <input checked="" type="checkbox"/> L |   |
|                                       |   | <input type="checkbox"/> M/DGHR       |   |
|                                       |   | <input type="checkbox"/> M/FSI        |   |
|                                       |   | <input type="checkbox"/> M/OBO        |   |

COPY ADVANCED TO: P  
SCT  
S/WCI  
L  
PA/PRS

**ACTION REQUESTED:**

- MEMORANDUM FOR:
- APPROPRIATE HANDLING
- FOR YOUR INFORMATION
- OTHER

**REMARKS:** For clearance at the appropriate level, please:

- P
- L
- SCT
- PA/PRS
- S/WCI

VOA EDITORIAL: DETAINEES IN CUBA

CALL/FAX OR E-MAIL COMMENTS/CLEARANCE TO: Saadia Sarkis, 76590

DUE DATE IN S/ES: 1/24 2:00 pm

AUTHORIZED BY SaadiaCSarkis  
S/ES, ROOM 7241  
EXT. 7-6590  
FAX. 7-2283

SENSITIVE BUT UNCLASSIFIED

UNITED STATES DEPARTMENT OF STATE  
REVIEW AUTHORITY: HARRY R MELONE  
DATE/CASE ID: 23 NOV 2004 200303827

DOS-000687

YOUR RESPONSE SHOULD BE ACCOMPANIED BY A COPY OF THIS TASKER.

UNCLASSIFIED