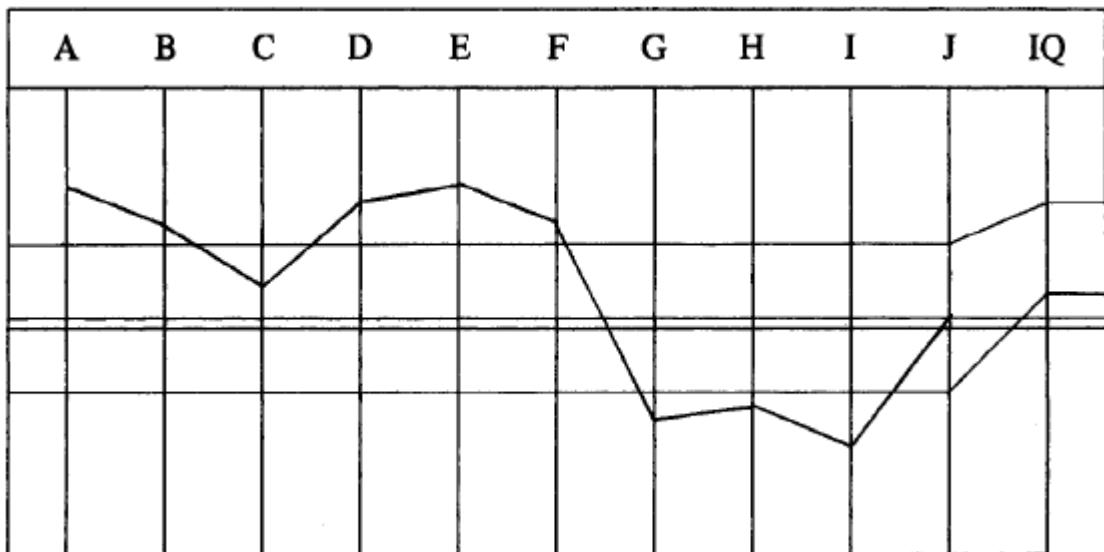


BOARD TECHNICAL BULLETIN  
29 OCTOBER 1972

Remimeo  
Ex Dn C/Ses  
Ex Dn Auditors

Issued 28 March 1974

CANCELS  
HCO BULLETIN OF 29 OCTOBER 1972  
*Expanded Dianetics Series 17*  
(Series Number Amended)  
**EXPANDED DIANETIC CASE K**  
OCA GRAPH—



Heavily down on the right. (This graph done in Swedish, pc's native language.)

CASE NOTES—

Pc Grade 4 quickie. Past bad Dn auditing. Failed attempts to "get him to go whole track". Probably due to misunderstood words.

Record of longterm illness, and some violence dramatizations on board.

Last ill 27 Mar 72.

EXP DN SET-UP PGM BY DN SPEC 16.4.72—

He has outstanding unhandled and ignored Int Corr Items and HiLo Items.

But he has *heavy* MisUs.

Also no-auditing situation since 4.1.72 (except Product RD).

1. CLEAR ALL WORDS: Ruds, WCCL, and assess WCCL and handle.

\*2. Clear and assess WC 1 C/S 1 and M 1 list and handle to F/N list.

3. *IF* TA difficulty comes up clear C/S 53RRR and handle. Otherwise continue.

\*FOOTNOTE: By HCO B 30 June 71, Issue II, Word Clearing Series 8RB (Revised 11 May 72) the list words of M 1 are not cleared before assessment.

The words of the commands (WC 1 C/S 1) of M 1 may be cleared.

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3a. PTS Check (added later).

4. To Exp Dn Program.

EXP DN PROGRAM BY DN SPEC 16.4.72—

0. Havingness—throughout, before and after session. 0a. Clear words: R3R, L-3XD.

1. Assess PT Environ buttons, get E, A or S on them. R3R Triple exhaust lists.
2. Assess C/S-6 (VIII list)—*add*: Past Lives, Commands, Chains, “Product RD”, etc. Get Sen, Emotions or Attitudes, R3R Triple, exhaust lists.
3. “Emotional Stresses” WF. (Get any treatments, if “Attitude to treatment” reads, and get AES on them [i.e. the treatments]. Likewise “attitudes to illness”.)
4. Based on WF bleed it of all *emotional* charge—all emotions/attitudes on reading areas or Narrative as applicable.
5. Then new OCA to check the left side and program as indicated.

PROGRAM STARTED 17.4.72—

The word clearing goes OK when a simple dictionary is used. On the WCCL pc starts to have problems about his post.

AUDITOR’S COMMENTS AND C/S 20.4.72—

Has a problem getting free to be audited—caught between product pressure and watch duty. Handled PTP in mid session again.

Assessment of WCCL mainly over still needle, not F/Ning, not reading. Exams was OK. May have been my TR 1 but I thought that was OK.

0. Hav to F/N.

1. Fly all ruds.

2. Reassess WCCL and handle to F/Ning list.

3. Clear and handle W/C C/S 1 (M 1 ) to F/Ning list.

LRH. COMMENT—

“Study this case. Something wrong.

PTS? Problem?

You can do C/S but resolve the odd behaviour.”

AUDITOR’S COMMENTS AND C/S NEXT SESSION 21.4.72—

After a lot of work on ruds and several assessments of WCCL it came down to a clean list again.

Pc has continuous attention on senior (\_\_\_\_) LF and QM (\_\_\_\_)sF.

Page 4, col 1 and 2, restraining himself. TA sinks, partly due to sweaty hands.

Also is very heavy on “don’t *know so* better not say anything” and “if you can’t prove it, keep your mouth shut”. (0.5 BD)

He also has earlier connections to newspapers and a mental hospital where he worked as a nurse’s aide.

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Has had “insulin treatment” but not specified if simply for diabetes or for shock purposes.

He should have a thorough PTS Check immediately after M1 Verification is completed.

As he has some protest on doing the WCCL assessment so many times and as the last reads handled were all false or “nothing” reads we may be cleaning cleans on him.

0. Hav to F/N.

0a. 2wc Attention on? to F/N.

1. Find out what he *does* during an assessment with 2wc to F/N. 1a. Put in Suppress and Inval “On the list we have been assessing”.

2. Complete C/S of 20.4.72.

Add PTS Check to program after M 1 Verification at 3a.

LRH COMMENT AND C/S 22.4.72—

“Very well done.

Now we’re getting somewhere.

Major points:

1. He is psychotic by OCA.
2. He is not in session.
3. His background is at mixed practices (one of 7 Resistive Cases).

So reprogram needed.

1. Who would I have to be to audit you? 2wc to F/N.
2. What wouldn’t you mind talking to me about?
3. Define Suppressive Person. Mark any BDs.
4. Have you ever known a Suppressive Person? (Mark BD or F/N Items.)
5. Define a Suppressive *thing*, get examples, mark any BDs.
6. Have you ever known a Suppressive thing? (Mark BD or F/N Items.)
7. Send to D of P for handling as indicated.”

LRH PROGRAM 22.4.72—

“Not in sess. Low left OCA. Former Nurse’s aide in mental home. Insulin treatment. Not a good case gain. In Ethics trouble often. Foreign language. Lots of Hav.

1. Who’d have to be to audit—What cd you say.
2. 2wc Define suppressive person or thing with examples until he understands it.
3. 2wc (mark BD or F/N Items). Have you known a suppressive person.
4. 2wc Have you known a suppressive thing.
5. D of P PTS Check metered and handle. (He may be suppressive.)
6. Sanderson RD.
7. Intentions of past areas. Scout int and run.”

The auditor does the above C/S and gets good LFBD items. Also an R/S turns on periodically through the session.

AUDITOR’S C/S AND COMMENTS 22.4.72—

Wow. We got him where he lived.

Best items are:

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1. The Head Nurse at the clinic (who ordered the ECTs).
2. A commie writer.
3. The ECT machine (not pc’s wording here).
4. (\_\_\_\_\_Org terminal.)

He had no more answers but not an F/N on the “Have you ever known” Qs.

1. D of P Check for anything in PT Environment, or other answers on PTS Check. Light touch as he *has* answered the Q.
2. PTS handling (D of P).
3. Clear R3R and L-3ExDn words.
4. Sanderson RD.

Doesn’t seem to be SP himself—he has thought of it. Long itsa on “artistic ambitions” as a writer at end of session.

LRH COMMENT—

“Very well done.

You’re getting him where he lives now.”

The pc has his D of P Interview but no other SP is found. The pc disconnects from three of the SPs found in the session except the Org

terminal which is left. In the interview the pc talks about chronic PTP he has had for almost two years about his attention stuck on going to see his parents that he hasn't seen for five years. The auditor takes him into session but he continues to talk about this problem with the TA rising, to 4.4. The auditor ends off and the pc goes to the Examiner and F/Ns at 3.0. The auditor C/Ses for a C/S 53RRR.

LRH COMMENT 23.4.72—

“Well done by exams.

C/S OK. But something is really out. The C/S 53RRR will find if you *ask* what the reads are before acting.”

The auditor takes the pc in and clears and assesses the C/S 53RRR. W/H LFBDs, and the auditor begins to handle.

AUDITOR'S COMMENTS AND C/S 24.4.72—

Well we got another *big* chunk. He had been sitting on the discreditable W/H of having *been in* the hospital (as well as *working* in it) for a rest cure following nervous collapse as a student! In terror that the SP head nurse would slip something in his food. And since then afraid of what SO would think.

Apparently received only light insulin treatment, not as shock type dosage. I spent some time looking for an overt of commission in the hospital but the read finally cleared to F/N VGIs on “false”.

This is material for R3R of first order.

1. Continue C/S 53RRR to F/Ning list.
2. Clear all wds R3R and L-3ExDn.
3. Then to Sanderson RD.

LRH COMMENT—

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“Very well done. C/S OK.”

The auditor continues the C/S 53RRR again pulling W/Hs.

AUDITOR'S COMMENT AND C/S 25.4.72—

Wow. 2 more W/Hs on the mental hospital.

1. Forced to go into agreement with psychiatrist on threat of being interned if he spoke out.
2. Fear of expulsion for being connected with psychiatrist.
3. 3rd flow engrams of torture by ECT (for political reasons) of a girl.

These all drove TA up and were pulled to F/N VGIs.

Still needs to complete C/S 53RRR.

1. Hav to F/N.
2. Assess and handle C/S 53RRR to F/N list.
3. Clear R3R and L-3ExDn terms.

LRH COMMENT—

“Very well done.

Wild scene! You handled it well. He looks good.”

The C/S 53RRR is continued for several sessions until it F/Ns all the way through the list. Next session the auditor starts the Sanderson RD. The pc says he wants “masturbation” handled. The TA goes high so auditor handles with a C/S 53RRR.

AUDITOR'S COMMENT AND C/S 2.5.72—

Ran into another high TA so did C/S 53RRR to F/N list and then did C/S (not complete).

1. Each rud to F/N.
2. Hav to F/N.
3. List intentions connected with masturbation.
4. R3R Triple to F/N list.
5. Repeat 3 and 4 on “get clear”.

Note: This C/S varies from Sanderson RD by omitting L&N and using Dianetic listing instead. This is because L&N is out of class for me as yet. Should handle it but the long way.

LRH COMMENT 3.5.72—

“Well done. C/S very not correct.”

LRH rings No. 4 of the auditor’s C/S and puts “makes no sense”.

LRH NOTES AND C/S 3.5.72—

“Well done.

C/S alter-ised from Sanderson RD. You would have listed anyway and gotten a wrong item.

You just flew his ruds. He had one R/S. The Ev Purp lives under that R/S.

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1. 2wc to F/N.

2. Hav.

3. L&N What Intention is connected with masturbation. To BD F/N Item.

4. R3R Triple.

5. Hav.

Next session again repeat:

2wc want handled

L&N Intention

R3R

Hav

You better just learn to L&N before this session time. HGC auditors are supposed to audit anything.

Don’t get a wrong item.”

The auditor begins the LRH C/S.

AUDITOR’S COMMENTS AND C/S 3.5.72—

L&N went fine. Started R3R by grabbing a narrative of the *subject* instead of the intention.

On TR 3ing the F- 1 (command 1 ) he took a look and blew himself out of his head—a sudden and very amazed looking pc.

0. If any TA trouble do Int Corr List and handle (clear words first).

1. 2wc to F/N.

2. Hav to F/N.

3. F-2, F-3 and check F-1 or R3R from last session.

4. 2wc “want handled”. (Mark BD Items.)

5. L&N “Intention connected with \_\_\_\_\_”.

6. R3R Triple.

LRH COMMENT—

“Well done.

Control it better on a C/S.

Results are fine.”

The next morning the pc comes to the Examiner and says, “I have a pain in my neck and I want to get an assist—terrific pain, I could hardly get up this

morning.” 3.3 clean BIs. The auditor took him back in to repair the list, and spends 4 hours trying to clean it up. At the end of the day the pc Red tags.

AUDITOR'S COMMENTS AND C/S 5.5.72—

Took him in after he BER'd on orig to Exams following list and Ext.

C/S 53RRR and L-4B and corrected the list successfully. Then after dinner TA back up again and not certain of item. L4B and C/S 53RRR and list corr done and list extended and nulled. TA remained high.

His back was giving him considerable pain towards end of session. As I wasn't getting the list handled and it was getting to be a heavy PTP I ended off and sent him to MO for a touch assist and attention to the knotted muscle.

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He now has Red tabbed at Exams and his list, physical PTP and possible Int gone out.

0. Med attention to muscle until no longer a problem.

1. Assess C/S 53RRR, handle per reads. Handle to F/N list.

LRH COMMENT—

“Why'd you keep fooling with it after it F/Ned. Repair it.”

The next session the auditor repairs the list to VGIs and continues the Sanderson RD. Two sessions later the auditor again in trouble with the TA soaring.

AUDITOR'S COMMENTS AND C/S—

Out of the pc's gradient. No R level where the L&N would hit so it didn't read and TA climbed.

Overcharged as he puts his TA up in a few seconds with a weird thought like “session should be truthful” and sits on it for an hour.

So he's overcharged, can't spot bank and stuck down the track this lifetime.

He has had CCHs I-IV and Op Pro by Dup (to F/N VGIs). But we can undercut this case with:

1. Tone 40 locational CCH 6.

2. CCH 7 (8c) “Keep it from going away”.

3. CCH 8 “Hold it still”.

4. CCH 9 “Make it a little more solid”.

5. Control TRIO (Notice that \_\_\_\_ and get the idea of having it, permitting it to continue, making it disappear.)

This is a program change to get him out of his stuck bank points (Swedish Army, hospital, etc) and under control as he is not cutting it and I am overrestimulating him too easily with too many hours to just get the TA down.

LRH COMMENT AND C/S 9 May 72—

“Well done.

You're going off Exp Dn. This pc is w/hing heavily for fear he will damage something or do something evil. See Psychosis HCO B. That is why TA soars on a thought.

He's just messed up by Evil Intentions not handled.

His session pgming is a bit ragged. He's a TA battle because he isn't leveling with you.

Note that Sanderson RD is not complete. You would be breaking into an existing action.

You are getting desperate because the pc is in a desperate state. That's the time to go easy, not make a huge change.

This pc is already too long on our lines without a completion.  
If he's not telling you his thoughts he's not in session. You don't have his confidence.

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1. 2wc What are you afraid you might tell me? to F/N. Note the BD and F/N items for future reference.

1a. Hav.

\*2. Verify intention found and R3R Triple.

3. 2wc What have you always wanted handled?

4. Hav."

LRH PROGRAM 9.5.72—

"Pc not really in session. Probably a PT Out-Ethics case. Middle of Sanderson RD. Beware of out lists. High TA needs to be nudged with 'What have you thought of you haven't told me'.

1. LRH C/S 9 May to get pc in session, and complete RD he is started on.

2. Complete Sanderson RD.

3. What destructive thing might you do?

4. Intention behind that. R3R.

5. Repeat 3.

6. Repeat 4.

Reprogram. "

The auditor does the C/S as far as verifying the pc's item. Pc says item that gave previous session is cool but gives the item as "To have something to do rather than eating carrots or picking my teeth or my nose," LFBD F/N.

AUDITOR'S COMMENTS AND C/S—

One of us is mad, I think.

Beginning of session 2 div BD on masturbation.

2wc BD 2 divs on wanting to get the show on the road (for LRH) before time runs out.

On verifying the list 1 div BD on being bored and the matter is handled and feels free about it.

Then he comes up with a 0.5 BD and F/N Item which sounds like Alice's Bad Dream.

I ended off because I wasn't prepared to run the item R3R. My impression of this item was covert blow. As far as I can see it has to be.

1. Reclear L-4B.

2. Assess and handle L-4B "intention connected to masturbation".

3. Complete last C/S (LRH of 9.5.72).

LRH COMMENT AND C/S 11.5.72—

"Here is a new Pgm and auditor not following it again. It is the correct Pgm.

The auditor is critical of pc's item.

1. 2wc to F/N.

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\*FOOTNOTE: This was the intention found in the previous session, on the Sanderson step.

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2. R-Factor. If you think of something you can tell me. When you don't tell me what you think it upsets the processing.

3. R3R on Item found.

4. Hav."

The auditor attempts the C/S unsuccessfully.

AUDITOR'S COMMENT AND C/S—

Immediately after 2wc to F/N and R-Factor his TA soared.

Came down on several areas but climbed again after each one.

He maintains he is not aware of W/Hing anything yet he has soaring TA on something. Not O/R or protest.

I didn't go into the R3R chain due to the high TA.

I believe there is some W/H he is not-isng so heavily he doesn't believe he has one. He F/Ned at Exams after high TA in session which is odd. I am unsure how to get him off it so we can do the RD.

If it does not violate the program I would suggest HiLo TA List. (Or some other assessment prepared.)

1. Clear HiLo words and assess and handle to F/N list.

2. R3R Triple (item from L&N done previously).

3. Hav.

LRH COMMENT AND C/S 13.5.72—

"Auditors who don't do LRH C/Ses have been known to get very wet.

Looks like a simple case of false TA with pc slackening cans. Do you watch a pc's hands? They sometimes slacken cans.

If you keep nagging him he'll get desperate.

1. False TA HCO B with all additions. Let's see if you can do all the checks.

1a. Do HiLo if no joy in 1.

2. He wants masturbation handled. That's where it began to hang up.

L&N Who or what would masturbate? Item O/W.

(Item O/W is: What has item done

What has item w/h alternate repetitive.)

If no blow, L&N What intention would (\_\_\_\_ item) have. R3R intention."

The next session the auditor has again high TA troubles.

AUDITOR'S COMMENTS AND C/S—

False TA checklist done. Put him on foot plates as there was almost a div of TA difference when he first tried them. As it later climbed back up it was probably just his shoes being taken off.

HiLo Assessed 3 times, last time to the pc. *No* reads. Per his statements he was getting the commands. As if he is below the reality of W/Hing.

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States he has had a personality change recently and is "more exterior to himself".

This is the second time I have failed to complete a C/S. I did not want to go into another action with the TA that high. He said he was feeling great not tired. (His sleep is irregular due to QM duties.)

The pattern is usually the TA doesn't start to climb until the first 20 minutes of the session or so. We should be able to handle this way:

1. 2wc to F/N.

2. Complete LRH C/S of 12.5.72.

I don't know where I am erring on this guy, but I'll get him through it.

LRH COMMENT AND C/S 13.5.72—

"Oh well. With this many session errors you won't make it.

ANYBODY CAN AUDIT AN EASY PC. AN AUDITOR'S FLAWS  
SHOW UP GLARINGLY ONLY ON ROUGH PCS.

As a Dn Spec will be auditing a lot of rough pcs he has to be flawless in TRs, metering and tech.

The errors are obvious enough.

1. You don't begin a major action or an assessment list until you get an F/N. This is called set up. One has to know how to talk a TA down to do a HiLo. This holds true unless Int is out and that can be tested at once by simply checking Went In? Exterior? at which you get a BD if it's what's wrong and you just handle it. If it's not Int you check lists. If not lists you check w/hs.

Actually I can't see how you'd get much of a read with a TA that high.

Nevertheless a C/S 53RRR works even with a high TA.

2. You tried to run an ARC Brk with a high TA. You checked it. You NEVER touch ARC Brks on a High TA as High TA is not caused by ARC Brks. And ARC Brks WILL NOT get a TA down and seriously messes up a pc if you try it.

3. You are possibly assessing with a lilt—an upswing of tone as in a question. Assessments are done as a *statement* —a down tone. [See footnote p. 229]

4. You have to have the pc's attention. He has to be in session, this means *interested in own case and willing to talk to the auditor*.

5. To be in session a pc has to have confidence in his auditor and an auditor with overts on the pc or doubts or who makes funny cracks about the pc's items SHOWS IT IN SESSION and there goes confidence. Because ARC is gone.

6. An auditor's tiny failures in TRs begin a grating on the pc. This throws a pc out of session.

7. The commonest cause of no item on an assessed list of prepared items is meter reading failure. The meter is placed wrongly so the auditor can't see it, pc and paper in ONE glance. This is the usual reason for 'no items' on a prepared list. Eyesight can be a factor.

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8. An auditor has to have IMPINGEMENT on a pc to assess. The XII's run into this all the time. Internes have 'done' a GF40XRR. The pc gets to the XII. The XII reassesses and has a whole big parade of reads. The lower class auditor just didn't *impinge* (or missed the lot).

There are NO pcs alive such as you are presenting here in this folder. They do not exist.

Whenever in the past, we have thought one did we checked it out and there was no such animal.

There was an auditor whose TRs were poor, who couldn't or didn't read a meter and who had overts on the pc.

The pc in question each time responded easily to standard auditing.

You keep not doing C/Ses because you have not done the basic things.

Anyone can run a Cadillac pc. It takes a real smooth auditor to handle a Vintage Model T Ford.

These are not harsh words. I must not let you get the idea that you can goof and then blame the pc. You'll just go on losing if I do let it slide.

Did you really check ALL of the False TA items or did you just shrug it off

and grab footplates? And are you using a meter that works or a busted one. D of P. What does the auditor do, really and truly.

We'll check this. Then we'll use the murder routine if all other points are verified."

The auditor is crammed. The pc has a D of P Interview and three points arise. 1.

Auditor's TR 2 is out, 2. Cleaning Cleans and getting into protest, and 3. Pc now ready for deeper running.

**AUDITOR'S COMMENT AND C/S 14.5.72—**

D of P Interview done. The loose grip was spotted in the TA checklist. I used the footplates because 0.8 div difference at the time and pc happier with them.

If D of P's opinion is correct my TR 2 has been short. So I'll pick it up, and be careful with the metering and TRs, and cans.

I have gotten off all the overts I know of off on this and other pcs. They include rough TRs and mis-metering.

I believe we can get him moving along alright. Suggest:

0. 2wc to F/N.

1. L&N Who or what would masturbate? Item O/W.

If no blow L&N What intention would (\_\_\_\_\_) have. R3R (per LRH C/S 13.5.72).

**LRH COMMENT—**

"Very well done. I'm truly pleased. There's real hope for a top level auditor in you if you take it this well and handle. Do a smooth job now."

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The auditor does the C/S to a good result. At Examiner the pc says, "It feels great. It feels damn great." (The item O/Wed was "me".)

**AUDITOR'S COMMENT AND C/S 15.5.72—**

Yahoo! Got 'em!

Change of characteristic—spoke to the Examiner.

Real Bk Through for me—audited like a well-oiled River! Should have taped it.

0. 2wc to F/N.

1. 2wc "What do you really want handled?"

2. L&N Triple and R3R Triple on reading areas.

**LRH COMMENT AND C/S 16.5.72—**

"Well hurrah! Very well done.

The next C/S though to this is different.

1. 2wc to F/N.

2. L&N What is the Intention of me? BD F/N Item.

3. R3R on Item Triple.

This is to follow through the H Standard using actually a XII RD and adapting it to Exp Dn."

The next session the pc comes in with the TA at 3.1. The auditor two-way comms the pc to an F/N. Then when the above L&N is checked the TA flies to 4.6 and there it sticks even though the auditor tried to talk it down again.

**AUDITOR'S COMMENTS AND C/S—**

Hit the ditch.

Not cans alone this time as I have checked those very carefully. Also he BDs to F/N at Exams on the same sized cans.

I am missing something on him which he has suppressed.

A list of areas from this session producing TA is attached.

D/N and R/S on "me" and on "despatch".

I took care to see he knew I had gotten what he said, several times. He knew I had gotten what he said.

TA BDed on "someone could take money from bookstore" and started climbing when I asked him if he had. Said he never thought of doing it and he hadn't.

Whatever it *wasn't* it *was* something I did, as the TA was actually high at 4.9 even when checking can grip.

The fact that he BDs and F/Ns at Examiner means to me that he is W/Hing or protesting something from me but not at Examiner.

It could still be TR 2. *Something* must be sitting there unacked.

1. D of P "In your last session what did the auditor do?"

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2. D of P "In your last session were you protesting anything? Was anything unacknowledged?"

3. "Is there anything you haven't told?" (note read).

Check cans first.

LRH COMMENTS AND C/S 17.5.72—

"This is what C/Ses are for.

Since your new skill acquired in Cramming you have not run a C/S 53.

Also you challenged him with your 2wc Q. It isn't a 2wc Q. What have you been up to is an invalidative auditing Q. How have you been or some social Q is 2wc to F/N.

You are acting suspiciously. He feels it. He of course has overts all over the track. You are restimming them by being suspicious. You are not running O/W but appear to be trying to, so processes are mixing. You should be running standard Dn on him.

Session probably started on an F/N (cold can). You gave it no time to warm.

1. C/S Series 53RC.

2. Handle.

3. Continue Sanderson RD.

And don't act like a detective! An auditor is a detective only when doing O/W on a pc that won't give."

The auditor assesses the C/S 53RC and handles "don't like it". On the next assessment Int reads and so an Int Corr List is assessed. This does not read but the pc is very happy.

AUDITOR'S COMMENT AND C/S—

Do what Ron says!

Pc ext, VVVGIs. The Int Corr List was clean but the area was what was hanging it up.

He's had an "Int RD" in 1970 reported as "shallow didn't bite" by auditor.

0. 2wc "How do you feel about going into things?" to F/N.

1. If all ok, L&N "Intention of 'me'."

2. R3R Triple Item.

LRH COMMENT—

"Very well done!"

The auditor does the C/S. The L&N item is "to be at cause" and this is R3R Tripled.

AUDITOR'S COMMENT AND C/S—

Doing fine. L&N went great—hot item.

The R3R is rough and very shallow and he tends to go into long situational descriptions on Step 7. Really needs a Dn C/S 1 on the R3R steps with demos.

227

0. R-Factor “We’re going to go over the steps of R3R.”

1. Go over each step of R3R with “apples” having the pc do demos of the chain and what happens.

2. Dummy run R3R with apples.

2a. Rud if no F/N.

3. 2wc “What do you really want handled on your case?” (Clear words backwards and “serious question” R-Factor.)

4. L&N Triple Intention + R3R.

LRH COMMENT AND C/S 21.5.72—

“Well done by Exams.

This Dianetic R3R is too rough. 1-9 A-B look strange.

The C/S is invalidative of this pc and it still shows to the pc. Long long yak is out TR 2 and defensive.

1. L-1C In your auditing with me has there been.

2. Havingness.

Then another auditor as I am tired of writing repair Pgms on this pc.”

The next day the pc reports to the MO sick.

AUDITOR'S COMMENT AND C/S—

BER and sick 48 hrs after L&N and R3R session. (L-1C C/S 21.5.72 not done.)

1. L-4B.

2. If not all handled L3ExDn.

3. LRH C/S 21.5.72. (L-1C + Hav.)

I am very willing to correct this myself. In view of your note on C/S of 21.5 is this OK?

LRH COMMENT—

“OK.”

The auditor takes the pc in and does the C/S fully to a good result.

AUDITOR'S COMMENT AND C/S—

Pc doing fine now. Says illness came from stops on his bookstore purchasing lines.

Also had a big win on a recall going back to age 11/2 or 2 and a glimpse of a past life.

1. To another auditor.

2. Complete Sanderson RD. 2wc “What do you really want handled?”

Triple L&N (each R3Red Triple).

3. Repeat 2 and 3.

LRH COMMENT 23.5.72—

LRH crosses out step 1 of the C/S.

“Very well done. Same auditor. Get this pc to a product!”

The Sanderson RD is continued successfully for two sessions until pc feels nothing more to handle. The auditor at this point writes up the program.

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EXP DN PGM BY DN SPEC 25.5.72—

Now doing well. Has had Sanderson RD. Happy with progress.

“0. 3 May PL.” Added by LRH 29.5.72.

1. "Destructive thing" RD—LRH Pgm of 9.5.72.
2. PTS Rundown + Interview. (Include SP Items found 22.4.72.)
3. OCA and program.

He is not sick. Body in good shape when not being damaged by accident. He should be phased over to Grade Chart for 0-III to be tripled up and IV Triple to be run.

The pc hurt his foot so the auditor spent 2 sessions running the accident out.

**AUDITOR'S COMMENT AND C/S—**

Came out ok. R3R Slow. "None on F-2."

I need to be smoother and faster with this guy so he feels more certain. Ruds came up between flows—he had forged himself an OK to go ashore for dinner tonight. Very motivatorish about it all.

1. Fly each rud.
2. 2wc "Is there anything you want handled that we've missed?"
3. If so L&N Intention and R3R Triple.
4. If no wants handled "What destructive thing might you do?" to BD F/N.
5. L&N "Intention behind that?"
6. R3R Triple.

**LRH COMMENT AND C/S 29.5.72—**

"Too long in auditing. Out-Ethics on the case won't let it run.

1. 3 May 72 PL.

2. L&N Lists (Steps 3, 4).

If Why finding been done on him before do it like C/S Series 78. When this is done he can go on. He's just about to get taken off auditing lines so is Out-Ethics. Should have been a Product way back.

Then your C/S the next day."

The 3 May PL was eventually done to a good result, but then the pc was sent to serve in an area of the world that to date has not got Exp Dianetics. The Case as such remains incomplete. A second OCA was never done prior to leaving so there is no record of the change that was brought about by the auditing as outlined in this BTB.

**TOTAL NO. OF SESSIONS: 33.**

**TOTAL NO. OF HRS IN THE CHAIR: 63 hrs 23 mins.**

Compiled by:

Flag Dn Spec Team

BDCS:WS:MM:ntm.rd for the

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