# Assassination Records Review Board Final Determination Notification

AGENCY : HSCA

RECORD NUMBER : 180-10147-10265

RECORD SERIES : STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

Released under the John F. Kennedy Assassination Records Collection Act of 1932 (44 USC 2107 Note). Caselt:NW 68261 Date: 18401-2022

**December 8, 1995** 

Status of Document:

Postponed in Part

### Number of releases of previously postponed information: 4

Reason for Board Action: The Review Board's decision was premised on several factors including: (a) the significant historical interest in the document in question; (b) the absence of evidence that the release of the information would cause harm to the United States or to any individual.

#### Number of Postponements: 2

Postponements: All the postponements in this document represent Social Security numbers.

Reason for Board Action: The text is redacted because the public disclosure of the redaction could reasonably be expected to constitute an unwarranted invasion of personal privacy, and that invasion of privacy would be so substantial that it outweighs the public interest.

Date of Next Review: 2017

Board Review Completed: 10/24/95

Released under the John F. Kennedy Assassination Records Collection Act of 1992 (44 USC 2107 Note). Case#:NW 88326 Date: 2025

Docld:32277346 Page 1

Date: 07/08/95

Page: 1

# JFK ASSASSINATION SYSTEM IDENTIFICATION FORM

#### AGENCY INFORMATION

AGENCY : HSCA

RECORD NUMBER : 180-10147-10265

RECORDS SERIES : STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

#### DOCUMENT INFORMATION

ORIGINATOR : HSCA

FROM:

TO:

TITLE :

DATE: 03/20/78

PAGES: 4

SUBJECTS : WEBB, DEAN B.

DOCUMENT TYPE : PRINTED FORM CLASSIFICATION : UNCLASSIFIED

RESTRICTIONS : 3

CURRENT STATUS : RELEASED WITH DELETIONS

DATE OF LAST REVIEW : 10/26/95

OPENING CRITERIA:

COMMENTS : Box 3

(Please Use Typewriter or Ballpoint Pen)

## U.S. HOUSE OF REPRESENTATIVES Washington, D.C. 20515

(Any erasures, corrections, or changes on this form must be initialed by the authorizing official.)

## To the Clerk of the House of Representatives:

I hereby authorize the following payroll action:

Employee Hame (First-Middle-Last)		Effective Date	
Dean B. Webb		9/11/78	
Employee Social Security Humber		Type of Action	
SE OU COUNTRIES	☐ Appoi	□ Appointment	
54246043245		☐ Salary Adjustment	
Employing Office or Committee/Subcommittee		☐ Title Change	
		Termination (At close of business on effective date)	
Assassinations		Leave without pay (Beginning with effective date above and ending	
	Liose	of businessSpecify Date	
If type of action is an Appointment, Salary Adjustment, or Title Cl	nange, compl	ete appropriate information below.)	
Position Title		Gross Annual Salary*	
* If employee is a civil service annuitant (includes U.S. House of Representatives), the	gross annual so	plary shown should include the annuity received by the employ	
olus the salary received from the employing office.  If Committee Employee, complete appropriate item below.)			
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profess	ional.	056 0544	
2. E Special (Investigative staff of Standing Committee) or	Select Comn	nittee: Authority—H. ResofCongress	
3.   Joint Committee.			
If Employee of an Officer of the House, complete item below.)			
Position NumberIf applicable, Level_	Ste		
at an afficial control of the contro			
elatives.			
elatives.		.C. 3110(b), prohibiting the employment of	
elatives.		Signature of Authorizing Officiall	
Date	LOUIS ST	(Signature of Authorizing Official) OKES, CHAIRMAN	
Date	LOUIS ST	Signature of Authorizing Officiall	
F appropriate, signature of Subcommittee Chairman or Ranking Minority Member)  (Type or print name and title of above official)	LOUIS ST	(Signature of Authorizing Official) OKBS, CHAIRMAN (Type or print name of Authorizing Official)	
Date September 14, 19 78	LOUIS ST	(Signature of Authorizing Official) OKES, CHAIRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)	
September 14	LOUIS ST	(Signature of Authorizing Official)  OKES , CHAIRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee em-	
September 14, 19 78  f appropriate, signature of Subcommittee Chairman or Ranking Minority Member)  (Type or print name and title of above official)  All appointments and salary adjustments for employees ulloyees, except those of the Committee on Appropriations, the Committee on Appropriations and Committee on Appropriations.	LOUIS ST	(Signature of Authorizing Official)  OKES , CHAIRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee em-	
September 14  Type or print name and title of above official)  All appointments and salary adjustments for employees ulloyees, except those of the Committee on Appropriations, the Ce approved by the Committee on House Administration.	LOUIS ST	(Signature of Authorizing Official) OKES, CHAIRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee em-	
September 14  Type or print name and title of above official)  All appointments and salary adjustments for employees ulloyees, except those of the Committee on Appropriations, the Ce approved by the Committee on House Administration.	LOUIS ST	(Signature of Authorizing Official) OKES CHAIRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee em-	
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All appointments and salary adjustments for employees uloyees, except those of the Committee on Appropriations, the Committee on House Administration.  APPROVED:	LOUIS ST	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee emonthe Budget, and the Joint Committees, must irman, Committee on House Administration	
All appointments and salary adjustments for employees ulayees, except those of the Committee on Appropriations, the Committee on House Administration.  APPROVED:	LOUIS ST	(Signature of Authorizing Official) OKES, CHAIRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee emain the Budget, and the Joint Committees, must irman, Committee on House Administration	
September 14  Type or print name and title of above official)  All appointments and salary adjustments for employees ulloyees, except those of the Committee on Appropriations, the Ce approved by the Committee on House Administration.	LOUIS ST	(Signature of Authorizing Official) OKES a CHATRMAN  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee emain the Budget, and the Joint Committees, must irman, Committee on House Administration  ID	

(Please Use Typewriter or Ballpoint Pen)

#### U.S. HOUSE OF REPRESENTATIVES Washington, D.C. 20515

(Any erasures, corrections, or changes on this form must be initialed by the authorizing official.)

## To the Clerk of the House of Representatives:

I hereby authorize the following payroll action:

Employee Name (First-Middle-Last)	.,	Effective Date	
Dean B. Webb	March 20, 1978		
Employee Social Security Number	, .	Type of Action	
Employing Office or Committee/Subcommittee  Assassinations	Appointment  Salary Adjustment  Title Change  Termination (At close of business on effective date)  Leave without pay (Beginning with effective date above and ending close of business		
(If type of action is an Appointment, Salary Adjustment, or Title Chan	ge, comple	ete appropriate information below.)	
Position Title		Gross Annual Salary*	
Research Accorney  * If employee is a civil service annuitant (includes U.S. House of Representatives), the gra	\$18,000.00		
plus the salary received from the employing office.			
(If Committee Employee, complete appropriate item below.)			
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profession	al		
2. 🗓 Special (Investigative staff of Standing Committee) or Se	lect Comm	ittee: Authority—H. Res. 956_of 95th Congress.	
3.   Joint Committee.			
Mi Faradama di an Officia di Albania			
(If Employee of an Officer of the House, complete item below.)			
Position NumberIf applicable, Level	Step	D	
I certify that this authorization is not in violation of	of 5.115	C 3110/h) prohibiting the employment of	
relatives.	J. J. O.J.	C. STIO(b), promoting the employment of	
Data Marsch 22		and the second of the second	
Date_March_22	JANE 20.	(Signature of Authorizing Official)	
(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)	LOUIS	STOKES	
(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)  (Type or print name of Authorizing Official)  CHAIRMAN			
(Type or print name and title of above official)	PISATIE.	(Title—If Member, District and State)	
All appointments and salary adjustments for employees und ployees, except those of the Committee on Appropriations, the Corbe approved by the Committee on House Administration.	mmittee or		
APPROVED:	Cho	irman, Committee on House Administration	
Office of Finance use only:		ID	
Office Code		Benefits	
Monthly Annuity \$00 as of		Payroll	



#### MEMORANDUM

TO: Thomas Howarth, Budget Officer Elizabeth Berning, Chief Clerk

FROM: G. Robert Blakey, Chief Counsel and Director

DATE: 17 March 1978

RE: Mr. Dean Webb

CX (33, 7.76

Please be advised that effective Monday, March 20, 1978, Mr. Dean Webb has accepted the position of Research Attorney with the Martin Luther King Task Force, HSCA. His effective starting salary will be \$18,000.00.

If you have any questions concerning this matter, please contact me at your convenience.

GRB:j

## Certificate of Relationship/Nonrelationship to Any Current Member of Congress

	Date //lanch	17,1978
To: Select Committee	Authority)	
I certify that I do not l current Member of Cong	have any of the following regress.	elationships to any
father	nephew	sister-in-law
mother son	niece husband	stepfather stepmother
daughter	wife	stepson
brother	father-in-law	stepdaughter
sister	mother-in-law	stephrother
uncle	son-in-law	stepsister
aunt	daughter-in-law	half-brother
first cousin	brother-in-law	half-sister
I certify that I am the	(Relationship)	of the
Honorable	ame of Member to whom related)	
	h om /	3.11.2.Ab-

GPO 16-78695-3

(Employee)