

# Assassination Records Review Board

## Final Determination Notification

AGENCY : HSCA  
RECORD NUMBER : 180-10060-10467  
RECORD SERIES : STAFF PAYROLL RECORDS  
AGENCY FILE NUMBER :

Released under the John F.  
Kennedy Assassination  
Records Collection Act of  
1992 (44 USC 2107 Note).  
Case#:NW 68261 Date:  
09-01-2022

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**December 8, 1995**

**Status of Document:** Postponed in Part

**Number of releases of previously postponed information:** 11

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:** 8

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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.

Substitute Language: SSN

Date of Next Review: 2017

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**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

JFK ASSASSINATION SYSTEM

IDENTIFICATION FORM

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AGENCY INFORMATION

AGENCY : HSCA  
RECORD NUMBER : 180-10060-10467

RECORDS SERIES :  
STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

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DOCUMENT INFORMATION

ORIGINATOR : HSCA  
FROM :  
TO :

TITLE :

DATE : 01/01/77  
PAGES : 11

SUBJECTS :  
HSCA, ADMINISTRATION  
LEE, SHEILA JACKSON

DOCUMENT TYPE : PRINTED FORM  
CLASSIFICATION : U  
RESTRICTIONS : 3  
CURRENT STATUS : P  
DATE OF LAST REVIEW : 06/04/93

OPENING CRITERIA :

COMMENTS :

Box 2.

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[R] - ITEM IS RESTRICTED

LEE, Sheila Jackson

Name of Employee

Address

Address

Phone Number

Position Title

Position Number

Level

Step

DATE OF APPOINTMENT

1-1-77

PRIOR FEDERAL SERVICE

Years Months

OFFICE OF THE CLERK  
U. S. HOUSE OF REPRESENTATIVES  
PERSONAL LEAVE RECORD

1978

YEAR

ANNUAL LEAVE  
CATEGORY

1.0

1.5

2.0

BALANCE BROUGHT  
FORWARD FROM  
PRECEDING YEAR

Annual Leave	Sick Leave
9	12

Month	DAY OF MONTH																														Employee's Initials		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Jan.	X	X	X	X																													1 1 10 13 3 7 10
Feb.																																	
Mar.																																	
Apr.																																	
May																																	
June																																	
July																																	
Aug.																																	
Sept.																																	
Oct.																																	
Nov.																																	
Dec.																																	

- = 0.5 day annual leave
- = 1.0 day annual leave
- = 0.5 day sick leave
- S or  S = 1.0 day sick leave
- A = 0.5 day administrative leave
- A or  A = 1.0 day administrative leave
- U = 0.5 day unauthorized absence
- U or  U = 1.0 day unauthorized absence
- L = 0.5 day leave without pay
- LW = 1.0 day leave without pay

CERTIFIED CORRECT: Term. 2/3/78  
Employee's Signature \_\_\_\_\_ Date \_\_\_\_\_

Child's Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved: Clerk of the House Date

This record will be forwarded to the Clerk of the House at the end of each calendar year, or in case of termination, along with the request for termination. Upon approval, the record will be filed in the employee's official personnel folder.

EXHIBIT I

**PAYROLL AUTHORIZATION FORM**(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 initiated 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
Sheila Jackson Lee	2/28/78
Employee Social Security Number	Type of Action
093-42-2990	<input type="checkbox"/> Appointment <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Title Change <input checked="" type="checkbox"/> Termination (At close of business on effective date) <input type="checkbox"/> Leave without pay (Beginning with effective date above and ending close of business _____) <small>Specify Date _____</small>
Employing Office or Committee/Subcommittee	
Assassinations	

(If type of action is an Appointment, Salary Adjustment, or Title Change, complete appropriate information below.)

Position Title	Gross Annual Salary*
Staff Counsel	\$25,700

\* If employee is a civil service annuitant (includes U.S. House of Representatives), the gross annual salary shown should include the annuity received by the employee plus the salary received from the employing office.

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff— Clerical or  Professional.
2.  Special (Investigative staff of Standing Committee) or Select Committee: Authority—H. Res. 879 of 95th Congress.
3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date February 23, 19 78

(Signature of Authorizing Official)

**Louis Stokes**

(Type or print name of Authorizing Official)

**Chairman**

(Title - If Member, District and State)

(If 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 under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:

ID \_\_\_\_\_

Office Code \_\_\_\_\_

Benefits \_\_\_\_\_

Monthly Annuity \$ \_\_\_\_\_.00 as of \_\_\_\_\_

Payroll \_\_\_\_\_

Copy for Initiating Office or Committee

(Revised: August 1, 1977)

M E M O R A N D U M

TO: Thomas Howarth, Budget Officer  
FROM: I. Charles Mathews, Special Counsel *ICM*  
DATE: February 14, 1978  
RE: Ms. Shelia Jackson Lee

Effective Friday, February 3, 1978, Ms. Shelia Jackson Lee will be terminated from the Committee payroll.

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

*Plus 7 days annual leave  
2/14/78*

ICM:j      *Changed to 2/28/78 per  
ICM because Lee did some  
committee work after she left*  
*gthoward*

**PAYROLL AUTHORIZATION FORM**(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 initiated by the  
authorizing official.)**To the Clerk of the House of Representatives:**

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Sheila Jackson Lee	December 1, 1977
<b>Employee Social Security Number</b>	<b>Type of Action</b>
093-42-2090	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Assassinations	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

<b>Position Title</b>	<b>Gross Annual Salary</b>
Staff Counsel	\$25,700

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff -  Clerical or  Professional.2.  Special or Select Committee: Authority - H. Res. 465 of 95th Congress.3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date December 1

19 77

(Signature of Authorizing Official)

Louis Stokes

(Type or print name of Authorizing Official)

Chairman

(Title - If Member, District and State)

eb

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:

Office Code \_\_\_\_\_

Monthly Annuity \$ \_\_\_\_\_.00

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM**(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 initiated 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
Sheila Jackson Lee	8/1/77
Employee Social Security Number	Type of Action
093-42-2090	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
Employing Office or Committee	
Assassinations	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

Position Title	Gross Annual Salary
Staff Counsel	24,000

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff— Clerical or  Professional.
2.  Special or Select Committee: Authority—H. Res. 465 of 95th Congress.
3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date August 2, 1977

(Signature of Authorizing Official)

**LOUIS STOKES**

(Type or print name of Authorizing Official)

**CHAIRMAN**

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:

Office Code \_\_\_\_\_

Monthly Annuity \$ \_\_\_\_\_.00

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM**(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 initiated 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
Sheila Jackson Lee	5/3/77
Employee Social Security Number	Type of Action
093-42-2090	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
Employing Office or Committee	
Assassinations	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

Position Title	Gross Annual Salary
	\$23,000

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff -  Clerical or  Professional.
2.  Special or Select Committee: Authority - H. Res. 465 of 95th Congress.
3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date May 10, 1977

(Signature of Authorizing Official)

Louis Stokes

(Type or print name of Authorizing Official)

Chairman

(Title - If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:	Fo 5/11
Office Code _____	
Monthly Annuity \$ _____ .00	

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM**(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 initiated 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
Sheila Jackson Lee	4/1/77
Employee Social Security Number	Type of Action
093 42 192090	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
Employing Office or Committee	
Assassinations	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

Position Title	Gross Annual Salary
	\$47,500

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff -  Clerical or  Professional.
2.  Special or Select Committee: Authority - H. Res. 465 of 95th Congress.
3.  Joint Committee.

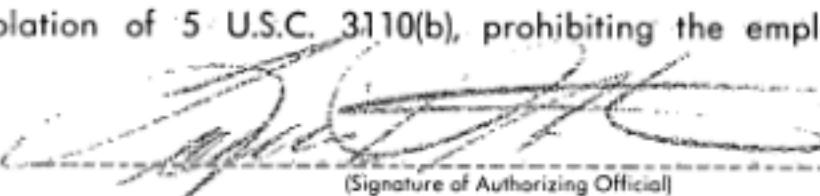
(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date April 29, 1977

(Signature of Authorizing Official)

  
Louis Stokes

(Type or print name of Authorizing Official)

Chairman

(Title - If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:

Office Code \_\_\_\_\_

Monthly Annuity \$ \_\_\_\_\_.00

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM****U.S. HOUSE OF REPRESENTATIVES**

Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initiated by the  
authorizing official.)**To the Clerk of the House of Representatives:**

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Sheila Jackson Lee	2-1-77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
003-42-2030	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Select Committee on Assassinations	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$14,145.

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff -  Clerical or  Professional.
2.  Special or Select Committee: Authority - H. Res. 11 of 95 Congress.
3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date 2-28-77 19

(Signature of Authorizing Official)

Henry B. Gonzalez

(Type or print name of Authorizing Official)

Chairman

(Title - If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:	
Office Code:	
Monthly Annuity \$ .00	

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM**(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 initiated 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
<b>Sheila Jackson Lee</b>	<b>1/3/77</b>
Employee Social Security Number	Type of Action
<b>090-42-2090</b>	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
Employing Office or Committee	
<b>Select Committee on Assassinations</b>	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

Position Title	Gross Annual Salary
	<b>\$14,950.</b>

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff— Clerical or  Professional.
2.  Special or Select Committee: Authority—H. Res. **11** of **95** Congress.
3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date **19 77**

(Signature of Authorizing Official)

**Henry B. Gonzalez**

(Type or print name of Authorizing Official)

**Chairman**

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:

Office Code \_\_\_\_\_

Monthly Annuity \$ **.00**

**PAYROLL AUTHORIZATION FORM**(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 initiated 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
Sheila Jackson Lee	1/1/77
Employee Social Security Number	Type of Action
088-42-0000	<input checked="" type="checkbox"/> Appointment <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
Employing Office or Committee	
Select Committee on Assassinations	

(If type of action is an Appointment or Salary Adjustment, complete the following information.)

Position Title	Gross Annual Salary
Staff Counsel-Legal Unit	\$23,000

(If Committee Employee, complete appropriate item below.)

1.  Standing Committee: Staff— Clerical or  Professional.
2.  Special or Select Committee: Authority—H. Res. 1540 of 94th Congress.
3.  Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date December 15, 1976

(Signature of Authorizing Official)

Thomas N. Downing, Chairman

(Type or print name of Authorizing Official)

Select Committee on Assassinations

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED:

Chairman, Committee on House Administration

Office of Finance use only:

Office Code \_\_\_\_\_

Monthly Annuity \$ \_\_\_\_\_.00

Copy for Initiating Office or Committee

M E M O R A N D U M

TO: All Staff Employees  
FROM: Budget Officer  
DATE: January 3, 1977  
RE: Payroll Certification

Starting with the January, 1977 payroll, the certification to the House Finance Office requires, among other things, the relationship, if any, of each staff employee to any current Member of Congress (those taking office January 3, 1977).

The following are the relationships to be included in the certification:

father	nephew	brother-in-law
mother	niece	sister-in-law
son	husband	stepfather
daughter	wife	stepmother
brother	father-in-law	stepbrother
sister	mother-in-law	stepsister
uncle	son-in-law	half-brother
aunt	daughter-in-law	half-sister
first cousin		

All staff employees are requested to complete this form and return it to the Budget officer.

Approved  
Richard A. Sprague

I am not related                 

I am related by the following relationship \_\_\_\_\_

Sheila Jackson Lee  
Signature of Employee

1/10/77  
Date