

Assassination Records Review Board Final Determination Notification

AGENCY : HSCA
RECORD NUMBER : 180-10070-10155
RECORD SERIES : STAFF PAYROLL RECORDS
AGENCY FILE NUMBER :

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.

Substitute Language: SSN

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

JFK ASSASSINATION SYSTEM

IDENTIFICATION FORM

AGENCY INFORMATION

AGENCY : HSCA
RECORD NUMBER : 180-10070-10155

RECORDS SERIES :
STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

DOCUMENT INFORMATION

ORIGINATOR : HSCA
FROM :
TO :

TITLE :

DATE : 03/21/78
PAGES : 4

SUBJECTS :
HSCA; ADMINISTRATION
SHAPIRO, HOWARD

DOCUMENT TYPE : PRINTED FORM
CLASSIFICATION : U
RESTRICTIONS : 3
CURRENT STATUS : P
DATE OF LAST REVIEW : 07/16/93

OPENING CRITERIA :

COMMENTS :
Box 3.

[R] - ITEM IS RESTRICTED

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 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 |
| Howard Louis Shapiro | 12/31/78 |
| Employee Social Security Number | Type of Action |
| <u>114-44-4360</u> | <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 _____) <div style="text-align: right;">Specify Date</div> |
| 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* |
| | |

* 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.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special (Investigative staff of Standing Committee) or Select Committee: Authority—H. Res. 956 of 95th Congress.
- ☐ 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 January 2, 19 79

(Signature of Authorizing Official)
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)

(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 _____

ID _____

Benefits _____

Monthly Annuity \$ _____ .00 as of _____

Payroll _____

Copy for Initiating Office or Committee

(Revised: August 1, 1977)

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 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 |
| Howard Louis Shapiro | 3-21-78 |
| Employee Social Security Number | Type of Action |
| 114-44-4360 | <input checked="" type="checkbox"/> Appointment |
| Employing Office or Committee/Subcommittee | <input type="checkbox"/> Salary Adjustment |
| Assassinations | <input type="checkbox"/> Title Change |
| | <input 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 _____) Specify Date |

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

| | |
|-----------------------|-----------------------------|
| Position Title | Gross Annual Salary* |
| Researcher Attorney | \$18,000 |

* 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.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special (Investigative staff of Standing Committee) or Select Committee: Authority—H. Res. 956 of 95th Congress.
- ☐ 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 March 23 19 78

(Signature of Authorizing Official)

(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)

LOUIS STOKES

(Type or print name of Authorizing Official)

(Type or print name and title of above 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 _____ | ID _____ |
| Monthly Annuity \$ _____ .00 as of _____ | Benefits _____ |
| | Payroll _____ |

(Revised: August 1, 1977)

Copy for Initiating Office or Committee

MEMORANDUM

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

FROM: I. Charles Mathews, Special Counsel *J.C.M.*

DATE: 22 March 1978

RE: Mr. Howard Shapiro

Please be advised that effective March 21, 1978, Mr. Howard Shapiro has accepted the position of Research Attorney with the John F. Kennedy 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.

ICM:j

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

Date 3/23/78

To: House Select Comm. on Assassinations
(Employing Authority)

☒ I certify that I do not have any of the following relationships to any current Member of Congress.

father
mother
son
daughter
brother
sister
uncle
aunt
first cousin

nephew
niece
husband
wife
father-in-law
mother-in-law
son-in-law
daughter-in-law
brother-in-law

sister-in-law
stepfather
stepmother
stepson
stepdaughter
stepbrother
stepsister
half-brother
half-sister

☐ I certify that I am the _____ of the
(Relationship)

Honorable _____
(Name of Member to whom related)

Howard L. Shapiro
(Employee)

GPO 16-78095-3

Shapiro