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# Assassination Records Review Board

## Final Determination Notification

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AGENCY : HSCA  
RECORD NUMBER : 180-10070-10149  
RECORD SERIES : STAFF PAYROLL RECORDS  
AGENCY FILE NUMBER :

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**December 8, 1995**

**Status of Document:** Postponed in Part

**Number of releases of previously postponed information:** 9

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:** 7

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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

JFK ASSASSINATION SYSTEM

IDENTIFICATION FORM

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AGENCY INFORMATION

AGENCY : HSCA  
RECORD NUMBER : 180-10070-10149

RECORDS SERIES :  
STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

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DOCUMENT INFORMATION

ORIGINATOR : HSCA  
FROM :  
TO :

TITLE :

DATE : 01/01/78  
PAGES : 9

SUBJECTS :  
HSCA; ADMINISTRATION  
ROSS, IDA JANE

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

OPENING CRITERIA :

COMMENTS :  
Box 3.

**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:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Ida Jane Ross	12/31/78
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227-18-5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee/Subcommittee</b>	<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.)

<b>Position Title</b>	<b>Gross Annual Salary*</b>

\* 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, 1979

(Signature of Authorizing Official)

LOUIS STOKES

(Type or print name of Authorizing Official)

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

CHAIRMAN

(Title - If Member, District and State)

(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)

**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:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Ida Jane Ross	April 1, 1978
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227 18 5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee/Subcommittee</b>	<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.)

<b>Position Title</b>	<b>Gross Annual Salary*</b>
	\$21,400

\* 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. 955 of 951<sup>st</sup> 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 April 12, 1978

(Signature of Authorizing Official)

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

(Type or print name of Authorizing Official)

(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

<b>Office of Finance use only:</b>	ID _____
Office Code _____	Benefits _____
Monthly Annuity \$ _____ .00 as of _____	Payroll _____

Copy for Initiating Office or Committee

(Revised: August 1, 1977)

TO: Thomas Howarth, Budget Officer  
FROM: G. Robert Blakey, Chief Counsel, Staff Director  
DATE: April, 11, 1978  
RE: Salary Adjustments

          Please increase the salaries of Louis Parisi  
and Ida Jane Ross seven percent (7%) effective  
April 1, 1978.

**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:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Ida Jane Ross	5/1/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227 18 5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee</b>	<input checked="" type="checkbox"/> Salary Adjustment
Assassinations	<input type="checkbox"/> Termination (At close of business on effective date)

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$20,000

(If Committee Employee, complete appropriate item below.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special or Select Committee: Authority—H. Res. 465 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 May 10, 19 77

(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 initialed 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>
Ida Jane Ross	4/1/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227 18 5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee</b>	<input checked="" type="checkbox"/> Salary Adjustment
Assassinations	<input type="checkbox"/> Termination (At close of business on effective date)

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$42,400

(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, 19 77

(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 initialed 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>
Ida Jane Ross	2-1-77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227-18-5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee</b>	<input checked="" type="checkbox"/> Salary Adjustment
Select Committee on Assassinations	<input type="checkbox"/> Termination (At close of business on effective date)

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$12,300.

(If Committee Employee, complete appropriate item below.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special or Select Committee: Authority—H. Res. 11 of 95 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 2-28-77, 19\_\_\_\_Henry B. Gonzalez  
(Signature of Authorizing Official)Chairman  
(Type or print name of Authorizing 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 \_\_\_\_\_

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 initialed 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>
Ida Jane Ross	1/3/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227 18 5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee</b>	<input checked="" type="checkbox"/> Salary Adjustment
Select Committee on Assassinations	<input type="checkbox"/> Termination (At close of business on effective date)

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$13,000.

(If Committee Employee, complete appropriate item below.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special or Select Committee: Authority—H. Res. 11 of 95 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 \_\_\_\_\_, 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 initialed 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>
I la Jane Ross	1/1/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
227 78 5345	<input type="checkbox"/> Appointment
<b>Employing Office or Committee</b>	<input type="checkbox"/> Salary Adjustment
Select Committee on Assassinations	<input type="checkbox"/> Termination (At close of business on effective date)

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
Administrative Secretary/Receptionist	\$29,900

(If Committee Employee, complete appropriate item below.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special or Select Committee: Authority—H. Res. 1540 of 94th 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 December 31, 19 76

(Signature of Authorizing Official)

Thomas W. 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 \_\_\_\_\_

Ida Jane Ross  
Signature of Employee

Jan. 7, 1977  
Date