

Assassination Records Review Board

Final Determination Notification

AGENCY : HSCA
RECORD NUMBER : 180-10060-10458
RECORD SERIES : STAFF PAYROLL RECORDS
AGENCY FILE NUMBER :

December 8, 1995

Status of Document: Postponed in Part

Number of releases of previously postponed information: 12

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

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 : NSCA
RECORD NUMBER : 180-10060-10458

RECORDS SERIES :
STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

DOCUMENT INFORMATION

ORIGINATOR : HSCA
FROM :
TO :

TITLE :

DATE : 11/29/76
PAGES : 13

SUBJECTS :
HSCA, ADMINISTRATION
KILKER, ELIZABETH

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

OPENING CRITERIA :

COMMENTS :
Box 2.

[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
Elizabeth Kilker	3/17/78
Employee Social Security Number	Type of Action
161-38-7640	<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. 879 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 3/7, 19 78

(Signature of Authorizing Official)
Louis Stokes, Chairman
(Type or print name of Authorizing Official)

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

(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:	ID _____
Office Code _____	Benefits _____
Monthly Annuity \$ _____ .00 as of _____	Payroll _____

Copy for Initiating Office or Committee

(Revised: August 1, 1977)

MEMORANDUM

TO: Thomas Howarth, Budget Officer
FROM: I. Charles Mathews, Special Counsel *ICM.*
DATE: 7 March 1978
RE: Termination

Please be advised that effective Friday, March 3, 1978, Elizabeth Kilker will be terminated from the Committee payroll.

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

Termination Effective 3/17/78

ICM:j

KILKER, Beth

Name of Employee

Address

Address

Phone Number

Position Title

Position Number

Level

Step

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

1978

YEAR

BALANCE BROUGHT
FORWARD FROM
PRECEDING YEAR

Annual Leave	Sick Leave
9	11

DATE OF APPOINTMENT

11-29-76

ANNUAL LEAVE
CATEGORY1.0 ☐1.5 ☐2.0 ☐

PRIOR FEDERAL SERVICE

.....
Years Months

Month	DAY OF MONTH																															Annual Leave	Sick Leave	Annual Leave	Sick Leave	Annual Leave	Sick Leave	Annual Leave	Sick Leave	EMP INIT				
	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.									S	S	S																						1	1	10	12		3	10	9				
Feb.															X								S									1	1	11	10	1	1	10	9					
Mar.							X	X	X	X	X		X	X	X	X	X																											
Apr.																																												
May																																												
June																																												
July																																												
Aug.																																												
Sept.																																												
Oct.																																												
Nov.																																												
Dec.																																												

Terminated 3-17-78



= 0.5 day annual leave



= 1.0 day annual leave



= 0.5 day sick leave



= 1.0 day sick leave



= 0.5 day administrative leave



= 1.0 day administrative leave



= 0.5 day unauthorized absence



= 1.0 day unauthorized absence



= 0.5 day leave without pay



= 1.0 day leave without pay

CERTIFIED CORRECT:

Employee's Signature _____
(If employee refuses to sign, state reason below.)

Date _____

Chief'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 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
Elizabeth A. Kilker	December 1, 1977
Employee Social Security Number	Type of Action
161-38-7640	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <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
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*
Secretary	\$17,100

*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. 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 December 1, 1977

Louis Stokes

(Signature of Authorizing Official)

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

Chairman

(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

Office of Finance use only:

Office Code _____

Monthly Annuity \$ _____ .00 as of _____

ID _____

Benefits _____

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
Elizabeth A. Kliker	5/1/77
Employee Social Security Number	Type of Action
161 38 7640	<input type="checkbox"/> Appointment
Employing Office or Committee	<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.)

Position Title	Gross Annual Salary
	\$16,000

(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

FD 5/11

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:

Employee Name (First-Middle-Last)	Effective Date
Elizabeth A. Kilker	4/1/77
Employee Social Security Number	Type of Action
161 38 7640	<input type="checkbox"/> Appointment
Employing Office or Committee	<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.)

Position Title	Gross Annual Salary
	\$33,600

(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 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:

Employee Name (First-Middle-Last)	Effective Date
Elizabeth A. Kilker	2-1-77
Employee Social Security Number	Type of Action
161-38-7640	<input type="checkbox"/> Appointment
Employing Office or Committee	<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.)

Position Title	Gross Annual Salary
	\$10,000.

(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 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

MEMORANDUM

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
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
stepbrother
stepsister
half-brother
half-sister

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

Approved
Richard A. Sprague

I am not related XX

I am related by the following relationship _____

Elizabeth A. Kilher
Signature of Employee

February 10, 1977
Date

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
Elizabeth A. Kilker	1/3/77
Employee Social Security Number	Type of Action
161 38 7640	<input type="checkbox"/> Appointment
Employing Office or Committee	<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.)

Position Title	Gross Annual Salary
	\$10,400.

(If Committee Employee, complete appropriate item below.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special or Select Committee: Authority—H. Res. **11** 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 _____, 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:

Employee Name (First-Middle-Last)	Effective Date
Elizabeth Anne Atker	1/1/77
Employee Social Security Number	Type of Action
101 35 7840	<input type="checkbox"/> Appointment
Employing Office or Committee	<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.)

Position Title	Gross Annual Salary
Secretary	\$16,000

(If Committee Employee, complete appropriate item below.)

- ☐ Standing Committee: Staff—☐ Clerical or ☐ Professional.
- ☒ Special or Select Committee: Authority—H. Res. 1842 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 29, 1976

(Signature of Authorizing Official)

Thomas H. 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

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
Elizabeth Anne Kilker	11/23/76
Employee Social Security Number	Type of Action
161 33 7640	<input checked="" type="checkbox"/> Appointment
Employing Office or Committee	<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.)

Position Title	Gross Annual Salary
Secretary	\$14,000

(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.

*handcarried to
PO 11/30/76*

(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 November 30, 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

I am not related ☒

I am related by the following relationship _____

Elizabeth A. Fisher
Signature of Employee

1/10/77
Date