# **Assassination Records Review Board Final Determination Notification**

AGENCY : HSCA

RECORD NUMBER: 180-10068-10328

RECORD SERIES : STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

**December 8, 1995** 

**Status of Document:** Postponed in Part

### Number of releases of previously postponed information: 5

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: 4

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

Date: 08/20/93 Page: 1

#### JFK ASSASSINATION SYSTEM

#### IDENTIFICATION FORM

### AGENCY INFORMATION

AGENCY: HSCA

RECORD NUMBER: 180-10068-10328

RECORDS SERIES: STAFF PAYROLL RECORDS

AGENCY FILE NUMBER:

#### DOCUMENT INFORMATION

ORIGINATOR : HSCA

FROM:

TITLE:

DATE: 09/01/77

PAGES: 5

SUBJECTS:

HSCA, ADMINISTRATION

CORNWELL, GARY T.

DOCUMENT TYPE : PRINTED FORM

CLASSIFICATION: U
RESTRICTIONS: 3
CURRENT STATUS: P

DATE OF LAST REVIEW: 07/07/93

OPENING CRITERIA:

COMMENTS:

Box #:1.

PAYROLL AUTHORIZATION FORM	. ب	ياستعير	
(Please Use Typewriter U.S. HOUSE OF R or Ballpoint Pen) Washington,		VES (Any erasures, corrections, or c on this form must be initialed authorizing official.)	
To the Clerk of the House of Representatives:	•		
I hereby authorize the following payroll action:			
Employee Name (First-Middle-Last)		Effective Date	
Carv T. Cormull	·	January I. 1979	
Employee Social Security Number		Type of Action	
460-74-1779	☐ Appointm		,
Employing Office or Committee/Subcommittee	}∑□ Salary A □ Title Cha		
	<del></del>	ion (At close of business on effective date)	
Assassinations	1	thout pay (Beginning with effective date above and business	ending
		Specify Date	
If type of action is an Appointment, Salary Adjustment, or Title	Change, complet	e appropriate information below.)	
Position Title		Gross Annual Salary*	
		\$44,500.00	
* If employee is a civil service annuitant (includes U.S. House of Representatives),	the gross annual sala		mploye
olus the salary received from the employing office.			•
If Committee Employee consider an executive to the first		·	
Committee Employee, complete appropriate item below.)		·	
1.   Standing Committee: Staff—  Clerical or   Profes	ssional.		
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profe		ttee: Authority—H. Res. 956_of95th_Co	naress.
		rtee: Authority—H. Res. 956_of 5th Coi	ngress.
<ol> <li>Standing Committee: Staff—         Clerical or Profes</li> <li>Special (Investigative staff of Standing Committee) of</li> <li>Joint Committee.</li> </ol>	or Select Commit	rtee: Authority—H. Res. <u>956</u> of <u>952h</u> Coi	ngress.
<ol> <li>Standing Committee: Staff—         Clerical or Profes</li> <li>Special (Investigative staff of Standing Committee) of</li> <li>Joint Committee.</li> </ol>	or Select Commit	ttee: Authority—H. Res. <u>956</u> _of <sup>952h</sup> _Coi	ngress.
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<ol> <li>Standing Committee: Staff—☐ Clerical or ☐ Profest</li> <li>Special (Investigative staff of Standing Committee) of the Joint Committee.</li> <li>Joint Committee.</li> <li>If Employee of an Officer of the House, complete item below Position Number</li></ol>	or Select Commit v.) IStep		
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<ol> <li>Standing Committee: Staff—□ Clerical or □ Profest</li> <li>Special (Investigative staff of Standing Committee) of the Joint Committee.</li> <li>Joint Committee.</li> <li>Femployee of an Officer of the House, complete item below Position Number If applicable, Leve I certify that this authorization is not in violatic elatives.</li> </ol> Date	v.)  IStep on of 5 U.S.C	C. 3110(b), prohibiting the employments (Signature of Authorizing Official)	
1. Standing Committee: Staff— Clerical or Profes  2. Special (Investigative staff of Standing Committee) of Standing Committee) of Standing Committee of S	or Select Commit v.)  IStep on of 5 U.S.C	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title—If Member, District and State)	
1. Standing Committee: Staff— Clerical or Profes  2. Special (Investigative staff of Standing Committee) of Standing Committee) of Clerical or Profes  3. Joint Committee.  If Employee of an Officer of the House, complete item below Position Number If applicable, Leve I certify that this authorization is not in violation relatives.  Date	or Select Commit v.)  Step on of 5 U.S.C  LOUIS  CHAIR	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  se Classification Act and for Committee	ent of
1. Standing Committee: Staff— Clerical or Profes  2. Special (Investigative staff of Standing Committee) of Standing Committee) of Committee.  If Employee of an Officer of the House, complete item below Position Number	v.)  Step on of 5 U.S.C  LOUIS  under the House Committee on	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title-If Member, District and State)  se Classification Act and for Committee the Budget, and the Joint Committees,	ent of
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2. Special (Investigative staff of Standing Committee) of 3.    Joint Committee.  If Employee of an Officer of the House, complete item below Position Number	v.)  Step on of 5 U.S.C  LOUIS  under the House Committee on	(Signature of Authorizing Official)  STOKES (Type or print name of Authorizing Official)  (Title-If Member, District and State)  se Classification Act and for Committee the Budget, and the Joint Committees,	ent of

NW 88326 Docld:32243294 Page 3

# PAYROLL AUTHORIZATION FOrm

# (Please Use Typewriter U.S. HOUSE OF REPRESENTATIVE or Ballpoint Pen) 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			
Gary T. Cornwell	October 1, 1978			
Employee Social Security Number	Type of Action			
460-74-1179	☐ Appointment Salary Adjustment			
Employing Office or Committee/Subcommittee	☐ Title Change			
Assesiestions	☐ Termination (At close of business on effective date) ☐ 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 Char	nge, complete appropriate information below.)			
Position Title	Gross Annual Salary*			
	\$47,500.00			
* If employee is a civil service annuitant (includes U.S. House of Representatives), the gr plus the salary received from the employing office.	ross annual salary shown should include the annuity received by the employe			
(If Committee Employee, complete appropriate item below.)				
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profession	nal.			
2. Special (Investigative staff of Standing Committee) or Se	elect Committee: Authority—H. Res. 956 of 585 Congress			
3. ☐ Joint Committee.	, , , , , , , , , , , , , , , , , , ,			
(If Employee of an Officer of the House, complete item below.)				
Position NumberIf applicable, Level	Step			
I certify that this authorization is not in violation relatives.	of 5 U.S.C. 3110(b), prohibiting the employment of			
Date				
	(Signature of Authorizing Official)			
(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)	Mas i care			
(Type or print name and title of above official)	(Title – If Member, District and State)			
All appointments and salary adjustments for employees und ployees, except those of the Committee on Appropriations, the Cobe approved by the Committee on House Administration.	der the House Classification Act and for Committee em- ommittee on the Budget, and the Joint Committees, must			
APPROVED:	Chairman, Committee on House Administration			
Office of Finance use only:	ID			
Office Code	Benefits			
Monthly Annuity \$00 as of				
	(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			
Gary T. Cornwell	March 1, 1970				
Employee Social Security Number		Type of Action			
460-74-1179	☐ Appoin	ntment			
Employing Office or Committee/Subcommittee	☐ Title Cl				
Assassinations	☐ Leave	otion (At close of business on effective date) without pay (Beginning with effective date above and ending of business			
(If type of action is an Appointment, Salary Adjustment, or Title Cha	nge, comple	ete appropriate information below.)			
Position Title		Gross Annual Salary*			
Deputy Chief Counsel		\$44,500.			
* If employee is a civil service annuitant (includes U.S. House of Representatives), the g plus the salary received from the employing office.	ross annual sa	ary shown should include the annuity received by the employe			
(If Committee Employee, complete appropriate item below.)					
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profession	nal.				
2. Special (Investigative staff of Standing Committee) or S		ittee: Authority—H. Res. 956 of 956 Congress			
3. ☐ Joint Committee.		o. Actionly in Roomana and Language			
(If Employee of an Officer of the House, complete item below.)  Position Number	Ste	o			
I certify that this authorization is not in violation	of 5 U.S	C. 3110(b), prohibiting the employment of			
relatives.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	and the same of th				
Date March 14 , 19 78		The state of the s			
Date_ <u>March 14</u>		(Signature of Authorizing Official)			
gr war and the same and the sam		The state of the s			
(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)	ouis s Thairea	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)			
(If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)	ouis s Thairea	(Signature of Authorizing Official)  (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)  All appointments and salary adjustments for employees unployees, except those of the Committee on Appropriations, the Committee on Appropriations and the Committee on Ap	COURS S  Chairs  Chair	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee em-			
(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 unployees, except those of the Committee on Appropriations, the Committee on Appropriations and the Committee on Ap	OUIS S  The Irre  der the Ho  mmittee o	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee em-			
(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 unployees, except those of the Committee on Appropriations, the Cobe approved by the Committee on House Administration.	OUIS S  The Irre  der the Ho  mmittee o	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title—If Member, District and State)  use Classification Act and for Committee emnthe Budget, and the Joint Committees, must			
(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 une ployees, except those of the Committee on Appropriations, the Cobe approved by the Committee on House Administration.  APPROVED:	OUIS S  The Irre  der the Ho  mmittee o	(Signature of Authorizing Official)  (Type or print name of Authorizing Official)  (Title-If Member, District and State)  use Classification Act and for Committee emnthe Budget, and the Joint Committees, must			

(Revised: August 1, 1977)

# (Please Use Typewriter U.S. HOUSE OF REPRESENTATIVES or Ballpoint Pen) 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: Advantage and the control of the Co

I hereby authorize the following payroll action: (2) 2000000

Gary T. Cornwell			: 	9/1/77	
Employee Social Security N	umber		Type o	of Action	
460 74 1179		Appoin	ment		
Employing Office or Comm	ittee ameriteiseksess	☐ Salary /	Adjustment -	and the second s	
Assassinations	$(\omega_{t}, \omega_{t}) = (\partial_{t} w_{t} - \partial_{t} w_{t})^{-1} + (\partial_{t} w_{t} - \partial_{t} w_{t})^{-1} + (\partial_{t} w_{t} - \partial_{t} w_{t})^{-1}$	☐ Termino	tion (At close of bu	usiness on effective do	ate) 🗵 😘 🗀 🥕
f type of action is an Appointment or Sala	ry Adjustment, comp	lete the follo	wing informatio	<b>in.)</b> ergelet word Synthe	
Position Title	<b>B</b>		Gros	s Annual Salary	
Deputy Chief Counsel		·		\$42,500	
Committee Employee, complete appropri	ate item below.)	and the same of the same		and the second second	
3.   Joint Committee.		`	-	g gradau en ekseriste	
3. Doint Committee.  Femployee of an Officer of the House, composition Number    certify that this authorization is elatives.	mplete item below.) f applicable, Level	Step	3110(b), .proh	ibiting the employee	n na
3.  Joint Committee.  f Employee of an Officer of the House, composition Number	mplete item below.) f applicable, Level is not in violation	of 5 U.S.C	3110(b), proh	ribiting the employers	oyment
3.  Joint Committee.  f Employee of an Officer of the House, com Position Number	mplete item below.)  f applicable, Level is not in violation	of 5 U.S.C	3110(b), proh	ibiting the employee	oyment
3.  Joint Committee.  f Employee of an Officer of the House, com Position Number	mplete item below.)  f applicable, Level is not in violation	of 5 U.S.C	3110(b), proh	ribiting the emplo zing Official)	oyment.
3.  Joint Committee.  If Employee of an Officer of the House, composition Number	mplete item below.)  f applicable, Level is not in violation	of 5 U.S.C. is Stokes irman	3110(b), proh (Signature of Authoriz ype or print name of Aut (Title-If Member, Dist	zing Official)  Thorizing Official)  Act and for Committee Joint Committee	nittee en
3.  Joint Committee.  f Employee of an Officer of the House, composition Number	mplete item below.)  f applicable, Level is not in violation	of 5 U.S.C. is Stokes irman	3110(b), proh (Signature of Authoriz ype or print name of Aut (Title-If Member, Dist	ibiting the emplo zing Official) thorizing Official) rict and State) Act and for Committed	nittee en
3.  Joint Committee.  If Employee of an Officer of the House, composition Number	mplete item below.)  f applicable, Level is not in violation	of 5 U.S.C. is Stokes irman	3110(b), proh (Signature of Authoriz ype or print name of Aut (Title-If Member, Dist	ibiting the emplo zing Official) thorizing Official) rict and State) Act and for Committed	nittee en

Copy for Initiating Office or Committee and the second second

#### MEMORANDUM

TO: ALL STAFF

RE: Payroll Certification

The Regulations and Accounting Procedures for Allowances and Expenses of Committees, Members and Employees of the U.S. House of Representatives require that, among other things, the Committee's monthly payroll certification include the relationship, if any, of each employee to any current Member of Congress. This certification is signed monthly by our Chairman.

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		

Please complete the appropriate portion below, sign and date this form, which will then become a part of your permanent personnel file. If this status changes, you must notify the Committee's Budget Office immediately of the change.

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[\( \int \)]	I am	not re	elated t	to any cu	ırrent	(95th	Cong	ress)	Member	of Co	ongress.
[]			ed to a ecify.)	current	(95th	Congre	ess)	Member	of Co	ngres	5.
	18 18 - 1										

Signature of Employee

9/1/27