Assassination Records Review Board Final Determination Notification

AGENCY : HSCA

RECORD NUMBER: 180-10147-10258

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: 3

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: 07/08/95

Page: 1

JFK ASSASSINATION SYSTEM IDENTIFICATION FORM

AGENCY INFORMATION

AGENCY : HSCA

RECORD NUMBER: 180-10147-10258

RECORDS SERIES: STAFF PAYROLL RECORDS

AGENCY FILE NUMBER:

DOCUMENT INFORMATION

ORIGINATOR: HSCA

FROM:

TO:

TITLE :

DATE: 11/21/77

PAGES: 5

SUBJECTS: ROBINSON, BARBARA JEAN

DOCUMENT TYPE : PRINTED FORM CLASSIFICATION : UNCLASSIFIED

RESTRICTIONS : 3

CURRENT STATUS: RELEASED WITH DELETIONS

DATE OF LAST REVIEW: 10/26/95

OPENING CRITERIA:

COMMENTS : Box 3

PAYROLL AUTHORIZATION FORM (Please Use Typewriter U.S. HOUSE OF or Ballpoint Pen) Washington	REPRESENTAT	(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			
Barbara J. Robinson		December 1, 1978			
Employee Social Security Number		Type of Action			
579-58-9953		☐ Appointment			
Employing Office or Committee/Subcommittee	Adjustment hange				
Assassinations	ation (At close of business on effective date) without pay (Beginning with effective date above and ending of business) Specify Date				
If type of action is an Appointment, Salary Adjustment, or Tit	le Change, comple	ete appropriate information below.)			
Position Title		Gross Annual Salary*			
		\$16,000.00			
3. □ Joint Committee. If Employee of an Officer of the House, complete item be	low.)				
Position NumberIf applicable, Le	evelSte	p			
I certify that this authorization is not in viole relatives. Date December 11, 19.78	ation of 5 U.S.	.C. 3110(b), prohibiting the employment of			
Jaie, 19		(Signature of Authorizing Official) LOUIS STOKES			
If appropriate, signature of Subcommittee Chairman or Ranking Minority Member)	e de la companya del companya de la companya del companya de la co	(Type or print name of Authorizing Official) টোৱৰ পিয়াৱন			
(Type or print name and title of above official)		(Title – If Member, District and State)			
All appointments and salary adjustments for employed bloyees, except those of the Committee on Appropriations, be approved by the Committee on House Administration. APPROVE	the Committee o	A STATE OF THE STA			
Office of Finance use only:	*******	ID			
Office Code		Benefits			
Monthly Annuity \$00 as of		Payroll			

(Revised: August 1, 1977)

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· · · · · · · · · · · · · · · · · · ·	OF REPRESENTATIVES (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
Barbara J. Robinson	12/31/78
Employee Social Security Number	Type of Action
579-58-9953	□ Appointment□ Salary Adjustment
Employing Office or Committee/Subcommittee	☐ Title Change
Assassinations	Termination (At close of business on effective date) Leave without pay (Beginning with effective date above and ending close of business
If type of action is an Appointment, Salary Adjustment, or	r Title Change, complete appropriate information below.)
Position Title	Gross Annual Salary*
f Committee Employee, complete appropriate item be	
 Standing Committee: Staff— Clerical or Special (Investigative staff of Standing Comm Joint Committee. 	l Professional. nittee) or Select Committee: Authority—H. Res. ——of ——Congress.
 Standing Committee: Staff— Clerical or Special (Investigative staff of Standing Comm Joint Committee. 	Professional. nittee) or Select Committee: Authority—H. Res.——of 9561 Congress. below.)
 Standing Committee: Staff—☐ Clerical or ☐ Special (Investigative staff of Standing Comm Joint Committee. If Employee of an Officer of the House, complete item Position Number	Professional. nittee) or Select Committee: Authority—H. Res ofCongress. below.) c, Level Step
 Standing Committee: Staff—☐ Clerical or ☐ Special (Investigative staff of Standing Comm Joint Committee. Employee of an Officer of the House, complete item Position Number	Professional. nittee) or Select Committee: Authority—H. Res ofCongress. below.) c, Level Step
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1. Standing Committee: Staff— Clerical or 2. Special (Investigative staff of Standing Comm 3. Joint Committee. f Employee of an Officer of the House, complete item Position Number	Professional. nittee) or Select Committee: Authority—H. ResofCongress. below.) c, LevelStep violation of 5 U.S.C. 3110(b), prohibiting the employment of (Signature of Authorizing Official) LOUIS STOKES
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1. Standing Committee: Staff— Clerical or 2. Special (Investigative staff of Standing Comm 3. Joint Committee. If Employee of an Officer of the House, complete item Position Number If applicable I certify that this authorization is not in velatives. Date	Professional. Inittee) or Select Committee: Authority—H. Res. of 95% Congress. In below.) In below.) In below.) In committee: Authority—H. Res. of 95% Congress. In below.) In below.) In committee of Authority of Signature of Signature of Authority of Signature of Signature of Signature of Authority of Signature of Signat
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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		
Barbara J. Robinson			
Employee Social Security Number	Type of Action		
579-58-9953	∑∑, Appointment		
Employing Office or Committee/Subcommittee	□ Salary Adjustment □ Title Change □ Termination (At close of business on effective date) □ Leave without pay (Beginning with effective date above and end close of business		
Assassinations			
If type of action is an Appointment, Salary Adjustment, or Title Ch	nange, complete appropriate information below.)		
Position Title	Gross Annual Salary*		
Researcher	\$15,000		
* If employee is a civil service annuitant (includes U.S. House of Representatives), the plus the salary received from the employing office.	e gross annual salary shown should include the annuity received by the er		
f Committee Employee, complete appropriate item below.)			
1. ☐ Standing Committee: Staff—☐ Clerical or ☐ Profess	ional.		
 Special (Investigative staff of Standing Committee) or Joint Committee. If Employee of an Officer of the House, complete item below.) 			
3. Joint Committee. If Employee of an Officer of the House, complete item below.) Position Number	Step		
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3. If Employee of an Officer of the House, complete item below.) Position Number	Step of 5 U.S.C. 3110(b), prohibiting the employment (Signature of Authorizing Official) (Type or print name of Authorizing Official)		
3. If Employee of an Officer of the House, complete item below.) Position Number	Step of 5 U.S.C. 3110(b), prohibiting the employment (Signature of Authorizing Official) (Type or print name of Authorizing Official)		
3. Joint Committee. If Employee of an Officer of the House, complete item below.) Position Number	Step		
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3. Joint Committee. If Employee of an Officer of the House, complete item below.) Position Number	Step		

MEMORANDUM

TO: Tom Howarth, Budget Officer

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

DATE: November 17, 1977

RE: Barbara Jean Robinson

This is to advise you that Barbara Jean Robinson has accepted a position as a researcher on the Martin Luther King Task Force, effective November 21, 1977, at an annual salary of \$15,000.

Please extend every possible assistance to Ms. Robinson.

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.

X	I am not related t	co any cu	rrent	(95th Cong	gress)	Member of	Congress.
	I am related to a (Please specify.)	current	(95th	Congress)	Member	r of Congr	ess.

Barbara Lobrison
Signature of Employee

11/21/77 Date