

U. S. Department of Justice

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INVESTIGATION

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44-HQ-38861-66

SERIALS 4901-4982

44-HQ-38861

SECTION 66

SECTION 66
SERIALS 4901-4982

SUBJECT - MARTIN LUTHER KING JR
FILE # -

WORK SHEET - XEROX REQUEST

ANALYST -
EXT -
TEAM # -

216- PAGES
87. DOCUMENTS

PAGE 1

b2; b6; b7(c)(D)

SECTION 66

FILE #	SERIAL/ENC OR DATE	DESCRIPTION	XEROX INSTR.	# OF ACT.	PAGES REL.	EXEMPTIONS											REMARKS
						b1	2	5	7C	D	OTHER	k1	2	5	6	OTHER	
44-38861	4901	AIRTEL FM DIR 7-18-68		1	1												
	4902	MEMO FM VINSON (RAG) 7-18-68		6	6				✓								RELEASE
	4903	LETTER TO STEWELL 7-19-68		1	1												
	4904	TELETYPE FM ME 7-19-68		1	1												
	4905	TELETYPE FM SPRINGFIELD 7-22-68		1	1					✓							EXCISE
	4906	AIRTEL FM NY 7-22-68		1	1				✓								RELEASE
	4907	MEMO FM ME 7-22-68		4	4												
	4908	CABLEGRAM TO OTTAWA 7-23-68		2	2				✓								EXCISE
	4909	LETTER TO BROWN 7-19-68		3	3												
	4910	INTERNAL MEMO 7-19-68		5	5												
	4911	AIRTEL FM ME 7-22-68		4	4				✓								RELEASE
	4912	AIRTEL FM LITTLE ROCK 7-22-68		2	2				✓								RELEASE
	4913	TELETYPE FM SPRINGFIELD 7-23-68		1	1		✓		✓								EXCISE
	4914	FBI LAB REPORT 7-23-68		8	8					✓							EXCISE
	4915	RCMP REPORT		15	-				✓	✓							EXEMPT
	4916	LETTER TO AG 7-20-68		1	1												
	4917	LETTER TO AG 7-22-68		9	5					✓							EXEMPT

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SUBJECT - MARTIN LUTHER KING JR
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44-38861	4918	AIRTEL FM LONDON		16	-					✓							RELEASE
	4919	AIRTEL FM DIR		5	-												
	4920	AIRTEL FM DIR 7-24-68		3	3												
	4921	LETTER TO HAG VINSON 7-24-68		2	2												
	4922	AIRTEL FM ME 7-16-68		3	3				✓								RELEASE
	4923	MEMO FM HAG VINSON 7-17-68		3	3												
	UNRECORDED	MEMO FM CALLAHAN 7-19-68		1	1												
	UNRECORDED	LETTER FM STATE TO LONDON		1	1												REFER STATE ✓
	4924	INTERNAL MEMO 7-17-68		3	3												
	4925	AIRTEL FM ST LOUIS 7-18-68		19	3				✓		b6						EXCISE
	UNRECORDED	LHB REPORT 7-24-68		1	1												
	UNRECORDED	LETTER FM BRUCE 7-18-68		1	1												
	4926	CITIZENS LETTER 7-18-68		5	5				✓								RELEASE
	4927	INTERNAL MEMO 7-18-68		3	3				✓								RELEASE
	4928	TELETYPE FM ME 7-18-68		4	4				✓								RELEASE
	4929	CABLEGRAM TO LONDON 7-23-68		1	1												
	4930	MEMO FM OTTAWA 7-23-68		1	1												

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						b1	2	5	7C	D	OTHER	k1	2	5	6	OTHER	
44-38861	4931	AIRTEL FM BALTIMORE 7-23-68		2	2												
	4932	AIRTEL FM ME 7-23-68		2	2												
	4933	INTERNAL MEMO 7-23-68		1	1												
	4934	TELETYPE FM BIRMINGHAM 7-23-68		2	2						✓						ROUTED
	4935	AIRTEL FM ME 7-23-68		2	2												
	4936	TELETYPE FM BIRMINGHAM 7-24-68		1	1		✓		✓	✓							ROUTED
	4937	TELETYPE FM SPRINGFIELD 7-24-68		1	1												
	4938	MEMO FM K.C. 7-24-68		6	6				✓								ROUTED
	4939	AIRTEL FM CHICAGO 7-24-68		1	1												
	4940	TELETYPE FM BIRMINGHAM 7-24-68		1	1												
	4941	LETTER TO ME 7-25-68		1	1												
	4942	AIRTEL FM ST LOUIS 7-25-68		1	1												
	4943	TELETYPE FM SPRINGFIELD 7-25-68		1	1												
	4944	AIRTEL FM BIRMINGHAM 7-25-68		1	1												
	4945	AIRTEL FM ATLANTA 7-25-68		2	2				✓								ROUTED
	4946	TELETYPE FM ME 7-25-68		1	1				✓								ROUTED
	4947	TELETYPE FM SPRINGFIELD 7-26-68		1	1												

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44-38861	4948	AIRTEL FM DIR 7-26-68		2	2												
	4949	AIRTEL FM MILWAUKEE 7-26-68		2	2				✓								EXCISE
	4950	MEMO FM DALLAS 7-26-68		1	1				✓								EXCISE
	4951	LETTER TO ME 7-26-68		1	1												
	UNRECORDED	MEMO FOR IDENT DIV 7-29-68		1	1												
	4952	TELETYPE FM ME 7-29-68		3	3												
	4953	FBI LAB REPORT 7-29-68		5	5												
	4954	TELETYPE FM SPRINGFIELD 7-29-68		1	1												RELEASE
	4955	INTERNAL MEMO 7-26-68		1	1												
	4956	LETTER TO AAG VINSON 7-26-68		2	2												
	4957	AIRTEL FM ME 7-23-68		2	2												
	4958	AIRTEL FM CINCINNATI 7-25-68		1	1		✓		✓								RELEASE
	4959	TELETYPE FM ME 7-22-68		2	2												
	4960	FBI LAB REPORT		5	5												RELEASE
	4961	AIRTEL FM LONDON 7-8-68		4	4												
	4962	REMP REPORT		2	1				✓								EXCISE
	4963	LAB REPORT 7-19-68		4	4				✓								RELEASE

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						b1	2	5	7C	D	OTHER	k1	2	5	6	OTHER	
44-38861	UNRECORDED	AIRTEL FM BUENOS AIRES 7-31-68		1	1												
	UNRECORDED	6-28-68 RAMP REPORT		2	-					✓							E/ENOT
	4964	TELETYPE FM SPRINGFIELD 7-30-68		1	1		✓										RELEASE
	4965	INTERNAL MEMO 7-19-68		3	3												
	4966	INTERNAL MEMO 7-22-68		1	1												
	4967	AIRTEL FM NEW ORLEANS 7-25-68		4	4				✓								RELEASE
	4968	TELETYPE FM CHARLOTTE 7-24-68		2	2												
	4969	AIRTEL FM DIR 7-28-68		3	3				✓								RELEASE
	4970	INTERNAL MEMO 7-26-68		2	2												
	4971	AIRTEL FM BIRMINGHAM 7-29-68		3	3				✓								RELEASE
	4972	MEMO FM ME 7-30-68		1	1												
	4973	TELETYPE FM CHARLOTTE 7-31-68		1	1												
	4974	TELETYPE FM SPRINGFIELD 7-31-68		1	1				✓								RELEASE
	4975	LETTER TO L.A. 8-1-68		3	3				✓								RELEASE
	4976	INTERNAL MEMO 7-31-68		24	24												
	4977	TELETYPE FM ME 7-24-68		1	1												
	4978	AIRTEL FM ME 7-30-68		8	8												

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SECTION 66

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Reproduction of Material Form
Congressional Inquiry Unit
6-

Date 1-6-77

The following material has been reproduced
for excising and review at FBIHQ by representatives of
the House Select Committee on Assassinations:

File No. 44-38861

Section 66

Serials 4901 through 4982

(except following serials not in
file on this date:

Enclosure Behind File or Bulky Enclosure:

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RETAIN THIS FORM AS TOP SERIAL

UNITED STATES GOVERNMENT

Memorandum

Tolson _____
DeLoach _____
Mohr _____
Casper _____
Callahan _____
Conrad _____
Felt _____
Gale _____
Rosen _____
Sullivan _____
Tavel _____
Trotter _____
Tele. Room _____
Holmes _____
Gandy _____

TO : Mr. Bishop

DATE: 7/17/68

FROM : M. A. Jones

SUBJECT: MURKIN

This is the case involving James Earl Ray, the alleged killer of Martin Luther King.

Attached for approval is a proposed press release concerning Ray's return to the United States from Britain. It is noted that in the second paragraph blank spaces appear. The exact time of Ray's release by British authorities to FBI Agents will be inserted in these spaces as soon as it is known.

If approved, this release will be issued in Washington, D. C., and Memphis, Tennessee, at the time Ray is turned over to Shelby County, Tennessee, officials.

RECOMMENDATIONS:

(1) That the attached proposed press release be approved.

(2) The Director is respectfully requested to sign the attached, undated letter of transmittal to Mr. Sessions in the Department. The date will be inserted prior to transmittal.

(3) That the attached material be expeditiously returned to your (Mr. Bishop's) office for further processing.

Enclosures 2 ENCLOSURE

1 - Mr. DeLoach - Enclosures (2)
1 - Mr. Bishop - Enclosures (2)

1 - Mr. Rosen - Enclosures (2)
1 - Mr. Sullivan - Enclosures (2)

TBC:emm (9)

57 AUG 1 1968

REC'D-TOLSON'S OFFICE
JUL 17 11 47 AM '68

JUL 17 9 35 AM '68
REC'D
FBI

JUL 17 2 25 PM '68
FBI
REC'D BISHOP

RECEIVED DIRECTOR
F.B.I.

JUL 17 1 22 PM '68

JUL 17 3 55 PM '68

FBI
REC'D BISHOP



UNITED STATES DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

*In Reply, Please Refer to
File No.*

WASHINGTON, D.C. 20535

FOR IMMEDIATE RELEASE
July 19, 1968

James Earl Ray, who is charged with the murder of Martin Luther King, Jr., was returned safely to the United States today.

British authorities turned Ray over yesterday evening to the custody of FBI Agents, who accompanied him on a nonstop flight from London aboard a U. S. Air Force C-135 to Memphis, Tennessee.

The plane left Great Britain at 7:38 p.m., EDT, yesterday and arrived at the Memphis Naval Air Station at 4:37 a.m., EDT, today.

Upon arrival he was turned over by the FBI to the Shelby County, Tennessee, Sheriff's Office and was lodged in the Shelby County jail.

The transportation of Ray to the United States was accomplished without incident.

44-38861-4924

ENCLOSURE

MEMORANDUM FOR MR. CLIFF SESSIONS
DIRECTOR, OFFICE OF PUBLIC INFORMATION

Attached is a press release concerning the return of James Earl Ray to the United States which I thought you might like to make available to the press.

Very truly yours,

John Edgar Hoover
Director

Enclosure

- 1 - Mr. DeLoach (detached)
- 1 - Mr. Bishop (detached)
- 1 - Mr. Rosen (detached)
- 1 - Mr. Sullivan (detached)

NOTE: See M. A. Jones to Bishop Memo dated 7/17/68, captioned: 'MURKIN.'

TBC:emm (11)

Tolson _____
DeLoach _____
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Bishop _____
Casper _____
Callahan _____
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Sullivan _____
Tavel _____
Trotter _____
Tele. Room _____
Holmes _____
Gandy _____

MAIL ROOM ☐ TELETYPE UNIT ☐

Handwritten notes and stamps:
- "TELETYPE" (large, slanted)
- "44-38861-4924" (at bottom)
- "ENCLOSURE" (at bottom)
- "JUL 18 1968" (stamp)
- "FBI" (stamp)
- "REC'D" (stamp)
- "K" (handwritten)
- "L" (handwritten)
- "S" (handwritten)
- "ds" (handwritten)
- "✓" (checkmark)

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FBI

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GENERAL INVESTIGATIVE
DIVISION

JUL 24 3 06 PM '68

U S DEPT OF JUSTICE



Department of State

TELEGRAM

42

4

LIMITED OFFICIAL USE 466

PAGE 01 STATE 202432

87

ORIGIN L 03

INFO EUR 15, SCA 02, PPT 02, JUS 02, FBI 01, RSC 01, /026 R

DRAFTED BY: LIL/SCA:MBFELDMAN
APPROVED BY: L- MURRAY J. BELMAN
JUSTICE - MR. VINSON (SUBS)

P 152128Z JUL 68
FM SECSTATE WASHDC
TO AMEMBASSY LONDON PRIORITY

Murkin

LIMITED OFFICIAL USE STATE 202432

SUBJECT: RAY EXTRADITION

1. SUGGEST THAT OPERATIVE PORTION SECOND SENTENCE DRAFT NOTE BE REVISED AS FOLLOWS: "THE UNITED STATES GOVERNMENT HAS DESIGNATED ANY TWO OR MORE OF THE FOLLOWING FOUR NAMED PERSONS (HERE NAME AGENTS) AS AGENTS TO RECEIVE MR. RAY IN THE UNITED KINGDOM UPON THE ISSUANCE OF AN EXTRADITION WARRANT BY HER MAJESTY'S PRINCIPAL SECRETARY OF STATE FOR HOME AFFAIRS AND TO CONVEY HIM TO THE UNITED STATES AT THE PROPER TIME FOR SURRENDER TO THE PROPER AUTHORITIES OF THE STATE OF TENNESSEE AND/OR THE STATE OF MISSOURI." THE AGENTS WILL CARRY THE USUAL PRESIDENTIAL WARRANT. THEIR NAMES WILL BE PROVIDED THROUGH THE LEGAL ATTACHE. RUSK

10 12 38861-

NOT RECORDED

FBI 15 JUL 16 1968

REC'D - CIVIL RIGHTS

NAT. INT. SEC.

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See Rosen to DeLoach memo 7-16-68 ARK:HA
53 JUL 30 1968

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JUL 16 10 39 AM '68

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DIVISION

JUL 16 2 25 PM '68

F. B. I.
U. S. DEPT. OF JUSTICE

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FBI

JUL 16 2 34 PM '68

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UNITED STATES GOVERNMENT

Memorandum

TO: The Director

DATE: 7-19-68

FROM: N. P. Callahan

SUBJECT: The Congressional Record

Pages H7065-H7068. Congressman Brown, (R) Ohio, introduced H. R. 13711, the text of which is printed in the Record. This bill would establish a joint congressional committee to investigate the arrest and prosecution of persons in connection with the slaying of Rev. Martin Luther King, Jr., and Senator Robert F. Kennedy. Mr. Brown stated: "there has been speculation that the murder of Dr. King, at least, may have been conspired. In the early stages of the manhunt for Ray, both Canadian and American agents working on the case were reported to be convinced that the accused slayer had help from others in evading arrest. Because of his background as a small-time criminal, it is argued that Ray's elaborate movements prior to his arrest in England were beyond his capacity to arrange. Canadian Mounties and FBI men have reportedly determined that at least two men were seen with Ray in Toronto. After the various aliases used by Ray were traced, and considering his ability to successfully hide out in Toronto and to obtain a bogus birth certificate and passport, a Mountie official was quoted as saying that Ray could not have made such elaborate arrangements without help of some sort. So far, there is no irrefutable proof, no conclusive evidence to back up such speculation. But the possibility nevertheless exists. - - - The committee I am suggesting would not be a duplicate of the recently appointed Presidential Commission on Violence because that commission is aimed at determining causes and cures for a phenomenon presumed to be afflicting our American culture. - - - My bill is targeted on that special aspect of crime that involves the United States internationally with other nations or citizens of other nations. This might be because the motivation for the crime or the criminal had come from abroad or it might be because the perpetrator of a crime in America had fled to another nation and foreign cooperation in apprehension, detection and extradition thus had been made necessary. Perhaps time will prove that the assassinations of Dr. King and Senator Kennedy involve none of these matters. This has yet to be determined." He included newspaper articles relating to the FBI's international search for James Earl Ray.

Original filed in: 66-11191-3347

In the original of a memorandum captioned and dated as above, the Congressional Record for 7-18-68 was reviewed and pertinent items were marked for the Director's attention. This form has been prepared in order that portions of a copy of the original memorandum may be clipped, mounted, and placed in appropriate case or subject matter files.

56 AUG 23 1968

NOT RECORDED
47 JUL 25 1968

F B I

Date: 7/18/68

Transmit the following in _____
(Type in plaintext or code)Via AIRTEL AIRMAIL
(Priority)

TO: DIRECTOR, FBI (44-38861)
 FROM: SAC, ST. LOUIS (44-775)
 RE: MURKIN
 CR
 OO: Memphis

Re KC airtel to Bureau, 7/12/68; Buairtel to KC, 7/15/68; and SL tel to KC, 7/17/68.

RE: CLIFFORD W. EDMONDSON, Air Force
Service Number 17 460 248

Enclosed for Bureau and receiving offices are one copy each of Special Progress Reports, dated 3/6/61 (consisting 9 pages); 8/11/65; 7/18/67; and Form NR 95-1 (current data for Restoration, Clemency and Parole Review), dated 8/21/67.

On 7/16/68, Fort Leavenworth, Kansas, Confinement File #31463, on file at the Military Personnel Records Center (MPRC), St. Louis, Mo., for CLIFFORD W. EDMONDSON, revealed he enlisted in U. S. Air Force (USAF) on 6/25/56 and dishonorably discharged on 7/26/58 as an Airman Third Class pursuant to sentence of a General Court-Martial. However, additional records were located and a review on 7/17/68 of the USAF service record for CLIFFORD WARDELL EDMONDSON, AF 17 460 248, indicated that he was honorably discharged and permanently retired on 7/26/58 as an Airman First Class at the U. S. Disciplinary Barracks, Fort Leavenworth, Kansas,

3 - Bureau (Encl-4)
 2 - Kansas City (44-760) (Encl-4)
 2 - Memphis (Encl-4)
 1 - St. Louis
 GTJ:pjh
 (8)

ENCLO. BEHIND FILE

C. C. - Bishop

Approved: _____
 Special Agent in Charge

Sent _____ M Per _____

JUL 24 1968
JUL 25 1968

REC'D - CIV RIGHTS
FBI

JUL 22 7 29 AM '68

the N° 2° DISCIPLINARY REGULATION, FOR THE REGULATION, KANSAS, BELMONT, LESTER ON 11/20/28 AS IN VILSON LESTER CRESS AT 11 400 348, INDICATED THAT HE WAS HONORARY DISCIPLINED AND THE NAVE RELATIVE RECORD FOR GILFORD MYNDETT EDMONDSON, VE ADDITIONAL RECORDS WERE LOCATED AND A LETTER ON 11/11/28 OF BELMONT TO SENTENCE OF A GENERAL COURT-MARTIAL. HOWEVER, HONORARY DISCIPLINED ON 11/20/28 AS IN VILSON LESTER CRESS HE EMPLOYED IN N° 2° VII. FORCE (NAVE) ON 11/22/28 AND DIS- (MHC) 24. FORMS, NO. 101 GILFORD M. EDMONDSON, RELEVANT THE 23423, ON THE 24 THE MILITARY PERSONNEL RECORDS CENTER ON 11/10/28, FOR REGULATION, KANSAS, CONTINUENT

(CHALLENGE QUESTIONS FOR REFORMATION, CLEMENCY AND HOLY BELIEF),
(CONSTITUTION & BY-LAWS): 8\11\02: 1\18\01: AND FORM IN 22-1
ONE COPY EACH OF 250,000 BLOODLESS REVOLTS, QUESTED 3\0\01
ENCLOSED FOR BUREAU AND LEGISLATING OFFICES ARE

26LAJCG NUMBER 1A 420 548
RE: CRILFORD M. EDWARDS, VII. FORCE

J\12\88: sup 27 let to KC' J\13\88:
 BG KC suplet to Buletan' J\15\88: Buletan' to KC'

CK

FROM: SAC, ST. LOUIS (44-112)

TO: DIRECTOR, FBI (44-38861)

VIHNVIT

88\81\5

SL

44-775

by reason of physical disability; that the diagnosis in his case was "Schizophrenic reaction paranoid type, chronic, severe, VA Code 9203, rated at 100%"; that the disability was permanent, and that the date he became unfit was about June 1957.

He was tried and convicted by a General Court-Martial on 12/12/57, for on or about 6/23/57, did at Goose Air Force Base, Labrador, with premeditation, murder another Airman by means of shooting him with a .45 caliber pistol. He was sentenced dishonorably discharge, forfeiture of all pay and allowances, and confinement at hard labor for the term of his natural life. However, by General Court-Martial Order Number 38, dated 10/10/67, pursuant to the direction of the Secretary of the Air Force, the findings of guilty and the sentence in the general court-martial case of EDMONDSON, were set aside. Also, all rights, privileges, and property of which EDMONDSON had been deprived by virtue of the findings of guilty and sentence were restored. He was released from confinement at the Medical Center for Federal Prisoners, Springfield, Missouri.

Special Progress Report of the U. S. Medical Center, Springfield, Mo., revealed the following diagnosis for EDMONDSON: "Schizophrenic Reaction, Paranoid Type, Chronic, with acute exacerbation as characterized by an individual with a life history which demonstrates the incipient seeds of a schizophrenic type personality with the evidence of mounting paranoid type of reaction throughout the years culminating in a gross psychotic disorganization at this time with only partial amelioration seen currently." The records further indicated that EDMONDSON had made two suicide attempts and that in 1963 electro shock therapy was initiated following self-mutilation attempt.

His relatives were listed as JOHN ADAMS, father; Mrs. JOHN ADAMS, aka Imogene E. Adams, mother; RICHARD EUGENE EDMONDSON, brother; and sister, ALFREDA ADAMS, all of 1315 North Lynn St., Independence, Mo. Sister, BESSIE MAE ADAMS, Route #1, Box 680, East Prairie, Missouri. EDMONDSON was described as Negro male, born [redacted], Kansas City, Mo., 170-175 pounds, and 72" tall. Scars and marks were shown as 2" scar over left temporal.

SL

44-775

His Veterans Administration Claim Number was shown as [REDACTED] Friends were listed as Mr. FREEMAN JACKSON, 311 E. Elizabeth, and Miss PAMELA TUCKER, 312 No. Hocker, Both Independence, Mo.

No photograph of EDMONDSON was contained in the records.

UNITED STATES DEPARTMENT OF JUSTICE
BUREAU OF PRISONS

MEDICAL CENTER FOR FEDERAL PRISONERS
Springfield, Missouri
SPECIAL PROGRESS REPORT

Committed Name EDMONDSON, Clifford T. Reg. No. 13218-H Date July 18, 1967

MILITARY CLEMENCY REVIEW

Edmondson, a 27-year old single-Negro male, continues to serve a 35-year sentence imposed by military court martial for murder. His adjusted release date with lost and extra good time is 4-17-81. Sentence expires full term on 12-11-92. There are no detainers on file.

Edmondson continued in residence in the institution's Maximum Security Unit from 5-3-66 to 8-22-66, at which time he was transferred to a unit of relatively close structure, but one from which he could leave daily in order to participate in institutional employment and other programs. During his residence in Maximum Security, he was reviewed on two occasions by the Psychiatric Treatment Planning Council held on 3-15-67; recommendations-transfer to a unit of relatively less structure, work assignment as unit Orderly, continue residence on that unit until personnel determine his preparedness to transfer to a more open unit, and medication and referral to Maximum Security physician will be the primary responsibility of the physician on his unit of residence. Since his transfer to a moderately structured unit, the patient/unit supervisor states that he is in fact, no problem to the unit. A positive behavioral difference was noted, and he has created no trouble among inmates or officers. His attitude toward those with whom he comes in contact has been one of cooperation. Edmondson functioned as ward Orderly until 6-27-67. His work supervisor stated that he held duties of general sanitation and performed these duties well. He accepts responsibility well although the opinion was presented that his compliance with authority was motivated only by necessity, not by willingness. An interest in self-improvement was indicated by his frequent studying in the unit. The education department states that he is presently enrolled in bookkeeping, Algebra I, and Economics. His intentions are apparently of self-improvement, and designed to improve occupational skills. Edmondson received his high school diploma from the Lake Shore High School in May, 1967. Beta IQ score is 91. On 6-27-67, he was assigned as typist to the Parole Record's Office. He has thus far functioned satisfactorily in that position. This is a job requiring skill as a competent typist and recorder. The volume of work is at times quite heavy, and Edmondson has handled this challenge well, displaying no evidence of stress. He has received approximately four visits from family members since the time of his 1966 review. The Catholic Chaplain states that Edmondson has been attending services every Sunday. He has done considerable reading regarding the Catholic Church.

Since his release from Maximum Security, Edmondson has made definite attempts to involve himself in institution programs which would provide him educational and vocational development, as well as insight into numerous personality problems. There is no doubt, much manipulative behavior in evidence, however this behavior is directed toward positive goals. There has been no report of adverse behavior within the past year, and his known associations are not with a homosexual element. His contention is that he is becoming aware that his life will not be spent entirely in penal institutions, and the longer his behavior is adverse, there exists the possibility that his institution time may be extended. This present approach to institutionalization may well reverse itself in the future through psychotic deterioration, however at this time, it is this writer's impression that Edmondson is making a considerable effort for self-improvement vocationally, educationally, and through the acceptance, reluctant as it may be, that he does have psychiatric problems compounded by a great amount of time yet to be served.

JUL 13 1965

SPECIAL PROGRESS REPORT

Committed Name

Reg. No.

Date

MEDICAL AND PSYCHIATRIC:

Admitting diagnosis: "Schizophrenic Reaction, Paranoid type. . ." Patient is being seen in individual therapy by Dr. Kinzel. Has also been attending group therapy for past month. On 10-Month since March, 1967 and has done relatively well. Dr. Kinzel may be able to give more accurate evaluation regarding release suitability.

Joel J. Haffner 6/7/67

RESIDENCES:

Independence, Missouri

USPO:

Kansas City, Missouri

RECEIVED BY:

J. H. Hirsch 7/18/67/ab

COMMITTEE RECOMMENDATIONS:

The Classification Committee refers this report to military authorities with the recommendation that because of his continued ability to display attitudes and behavior indicative of developing emotional maturity, personal acceptance of responsibility, and sound reality testing in relation to society's expectations, these growth factors be encouraged through the granting of a modicum of clemency to be determined specifically by military authority.

UNITED STATES DEPARTMENT OF JUSTICE
BUREAU OF PRISONS

MEDICAL CENTER FOR MENTAL ILLNESS
SPRINGFIELD, MASSACHUSETTS

SPECIAL PROGRESS REPORT

Committed Name EDMONDSON, Clifford W.

Reg. No. 1218-H

Date 8-11-65

ANNUAL MILITARY CLEMENCY REVIEW

Clifford Edmondson is a 26 year old Negro man who is serving a 35 year sentence for murder under GCMO #3 & #125. His life sentence was reduced on 8-17-64. His release date with good time is 12-11-92. He has no dependents in this.

He began serving his sentence at Leavenworth on December 31, 1957. On June 23, 1957, while Edmondson was stationed at Goose Air Base, Labrador, he murdered a fellow airman with a .45 calibre pistol. Shortly after he committed the crime he was seen by a psychiatrist in Labrador, who was of the opinion that he was psychotic and incompetent. His diagnosis was schizophrenic reaction, paranoid type. Later, after transfer, another psychiatrist diagnosed him as suffering from severe behavior or character disorders and close to mild psychosis, and as competent. During the trial the first psychiatrist continued to consider Edmondson psychotic, but changed his thinking that he was then competent to stand trial.

Edmondson was transferred to Terre Haute on August 25, 1957. He was unable to adjust to the life there and was considered a disciplinary problem since May 1960. In August 1960 he was placed in administrative segregation, where he remained until September 10 when he was transferred to Leavenworth. At Leavenworth he was diagnosed as suffering from a schizophrenic reaction, paranoid type, acutely disturbed, potentially dangerous, assaultive.

He was transferred to the Medical Center on November 23, 1960, as a certified psychotic patient. He was placed on the maximum treatment ward, and then one month later to the maximum control ward. From then until February 1962 he remained on either of these two wards most of the time. He was then transferred to an open ward and remained for four months. He was given a behavior report at this time because he was on a ward other than his own.

Nine months later he was transferred to an open ward. Dr. Nilofsky, a psychiatrist, wrote this in a report after Edmondson had to be removed from the ward. "Patient continues as schizophrenic reaction, schizoaffective type, much improved. Presently is mildly depressed following loss of his open ward status after a fight into which he was apparently provoked. Unfortunately his control was poor and he injured the other patient rather badly. His last fight was about three years ago. Nevertheless response to treatment has been very good. Patient has demonstrated a greater capacity for trust, some evidence of conscience, and some capacity to acknowledge depression."

Nine months later he was again transferred to an open ward (12-26-63). He was assigned to industries on 4-9-64, and was able to maintain

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MEDICAL CENTER FOR FEDERAL PRISONERS
SPRINGFIELD, MISSOURI

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SPECIAL PROGRESS REPORT

Committed Name EDMONDSON, Clifford W. Reg. No. 13218-H Date _____

that job for 8½ months. His progress had been such that he was recommended for reduction of sentence which was granted (to 35 years).

On June 18, 1964, he was removed from certified psychotic status. In May 1964 he received his high school diploma as a result of much concerted effort.

On 3-31-64 he was transferred to the maximum treatment ward because he was becoming emotionally upset and needed closer structure. He had received no behavior report at this time, but it was felt to be to his benefit to place him in a less threatening area. At first this was difficult for Edmondson to understand but during the ensuing months he has seen the advisability of the move.

Edmondson was placed in individual therapy with the writer, a psychiatric social worker, in February 1965. At first the hours were bi-weekly, but in the past four months weekly interviews have been maintained.

On March 12, 1965, Edmondson had again become depressed and it was necessary to place him on the maximum treatment ward. Great precautions are always taken when he begins showing suicidal tendencies, since he has almost successfully taken his life on two different occasions. On one occasion he jumped from the second story pier onto his head. Another time he slit his throat with a razor. He has been in a more open ward in the security unit since May 4, 1965. He was assigned to the industries' brush factory on that ward on July 23, 1965.

The ward personnel, including the doctor, recognize the progress this man has made and believe that this has come about through a change of attitude toward himself and others. His chart indicates that he is getting along well with both patients and staff. He has a sense of humor and a sense of fair play.

Through awareness of himself as a person and insight therapy this man has discontinued homosexual activities during the past 6 months. It is this writer's contention that this man's identity was tied up with a neurotically based conflict. The homosexual acting out was the symptom. The transference relationship with the writer, a woman, has also aided in this reworking of identification. It remains to be seen whether the separation from the writer, who is leaving soon, will affect this.

Edmondson's aggressive behavior of the past has been a defense against depression. This was also tied in with his feeling of manliness and that he was hiding the fact that he was a sensitive person. Through recognition with the therapist that it is alright to be his true self he has been able, at least for the present, to drop

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SPECIAL PROGRESS REPORT

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this defense. One of the best signs of progress is Edmondson's ability to express his guilt and sorrow over his offense. He had thoughts in the past that if he took his life it would somehow even the score. He now is able to recognize that being his true creative self is the best solution. This is an intelligent man who does much introspective thinking and weighing of ethical values. Another sign of progress is his ability to have a deep meaningful relationship with the writer.

Although there have been some emotional setbacks in the past 2 1/2 years we see a gradual upward trend in this man. Continued therapy is recommended.

RESIDENCE: Independence, Missouri.
USPO: Kansas City, Missouri.
DICTATED BY: JK:bkp:3-2-65

MEDICAL AND PSYCHIATRIC

Patient is at present on certified status. He is at present serving a sentence for first degree murder while in the service. His admission

diagnosis at the Medical Center was schizophrenic reaction, paranoid type (11-28-63). For the past six months he has been quite cooperative with the medical staff and has presented no problem in the unit. It is felt that he could certainly be moved off maximum security unit.

A. M. Kildreth, M.D.
Staff Psychiatrist

COMMITTEE RECOMMENDATION: 3-11-65; The Committee recommends reduction of sentence to 25 years instead of the present 35 years.

CURRENT DATA FOR RESTORATION, CLEMENCY AND PAROLE REVIEW

Ix

LAST NAME - FIRST NAME - MIDDLE INITIAL EDMONDSON, CLIFFORD W.	SERVICE NUMBER AF 17 640 248	EXPIRATION DATE 18 Apr 81	INSTITUTION Med Center, Springfield, Mo.
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CONFINEMENT DATA (Conduct and adjustment, work assignment, custody)

PRESENT: Edmondson has experienced extreme difficulty in effecting an adequate overall institutional adjustment during the past year. He has been very unpredictable, impulsive, and in all probability has at least been borderline psychotic at times. At the present time he is vocationally unassigned

PSYCHIATRIC DIAGNOSIS (Include IQ, intelligence classification and profile)

(over)

PSYCHIATRIC REPORT: DIAGNOSIS: Schizophrenic Reaction. Patient currently on 2-1-E for "Administrative reasons". Symptoms include: Blunting of affect, compulsivity, self-righteousness and grandiosity. Paralogia, Rationalization. Intellectualization.

Impression: Patient remains mentally ill and should be hospitalized. I do not feel parole is indicated at this time.

DISCIPLINARY BARRACKS BOARD VOTES

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input type="checkbox"/> YES	<input type="checkbox"/> NO
PAROLE	<input type="checkbox"/> YES	<input type="checkbox"/> NO

COMMANDANT RECOMMENDS

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input type="checkbox"/> YES	<input type="checkbox"/> NO
PAROLE	<input type="checkbox"/> YES	<input type="checkbox"/> NO

RESTORATION DESIRE NOT INDICATED

US PROBATION OFFICER RECOMMENDS

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input type="checkbox"/> YES	<input type="checkbox"/> NO

FEDERAL CLASSIFICATION COMMITTEE RECOMMENDS

N/C	RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	CLEMENCY	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO

DATE PAROLED OR CONDITIONAL RELEASE

N/A

☒ SENTENCED

☐ ADJUDGED

INITIALS

DATE 18 Jul 66

SRS/mew/AIF: 6 Jul 66

SED: 17 APR 81

X

=H

MCFP, Springfield, Mo.

CONFINEMENT DATA (Conduct and adjustment, work assignment, custody)

PRESENT: Transferred to lesser, structural unit in order to participate in institution employment and other programs. Attitude cooperative-caused no problems.

EMPLOYMENT: Ward Orderly until 27 Jun 67-interested in self-improvement, taking school courses-assigned as typist on 27 Jun 67. Satisfactory- (OVER)

PSYCHIATRIC DIAGNOSIS (Include IQ, intelligence classification and profile)

D IAGNOSIS: Being seen in individual therapy.

DISCIPLINARY BARRACKS BOARD VOTES

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input type="checkbox"/> YES	<input type="checkbox"/> NO
PAROLE	<input type="checkbox"/> YES	<input type="checkbox"/> NO

COMMANDANT RECOMMENDS

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input type="checkbox"/> YES	<input type="checkbox"/> NO
PAROLE	<input type="checkbox"/> YES	<input type="checkbox"/> NO

US PROBATION OFFICER RECOMMENDS

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input type="checkbox"/> YES	<input type="checkbox"/> NO

FEDERAL CLASSIFICATION COMMITTEE RECOMMENDS

RESTORATION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
CLEMENCY	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

DATE PAROLED OR CONDITIONAL RELEASE

N/A

☒ SENTENCED

☐ ADJUDGED

INITIALS

DATE 21 Aug 67

CLS/acb AIF: 18 Jul 67

PMG(K) FORM NR. 95-1
15MAY58

REPLACES EDITION OF 1 APR 58, WHICH MAY BE USED.

A 17518

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CONFINEMENT DATA CONT'D:

and housed on our acute treatment unit. During the past year he has received several adverse behavior reports for refusing to move to designated area; fighting another patient, plus housed in maximum security units for control. He is ingratiating and manipulative in interviews and attempts to play different disciplines against others to achieve his needs being gratified. In May, 1966, he was observed sleeping outside the office after allegedly, in company of another patient, to have made a homicidal threat against the patient being interviewed. After he wrote a note to another patient indicating that he had a knife secreted in his shoe and he planned to use it on one of the staff members. A knife was found in his shoes as he indicated. In summary, Edmondson has required approximately 45 ward changes, 13 job assignments, and has required maximum security housing for approximately 20 months since his admission here in 1960. Historically he has shown evidence of depression and has made two suicide attempts. In 1963 electro shock therapy was initiated following self-mutilation attempt.

CUSTODY: Acute treatment unit, or in max. security housing.

EMPLOYMENT: Unassigned.

CONFINEMENT DATA CONT'D:

complies with authority of necessity not willingness.

UNITED STATES DEPARTMENT OF JUSTICE
BUREAU OF PRISONS
MEDICAL CENTER FOR FEDERAL PRISONS
SPRINGFIELD, MISSOURI

SPECIAL PROGRESS REPORT

EDMUNDSON, Clifford W.

13218-H

Committed Name

Reg. No.

Date

REPORT OF NEUROPSYCHIATRIC EXAMINATION

I. REASON FOR COMMITMENT: This 21-year old, single Negro male is serving a life sentence for premeditated murder of a fellow Air Force companion. Sentence began 12-12-57 at Leavenworth Barracks and the patient was transferred to Terre Haute on 8-25-59 because of intransigent inadaptability. Because of continuing aggressive and impulsively uncontrolled activity, the patient was transferred to Leavenworth on 9-17-60 where he displayed evidences of increasing psychic disorganization and was accordingly certified as psychotic and transferred to the Medical Center on 11-23-60 with a diagnosis of Schizophrenic Reaction, Paranoid Type, Acute.

II. SOURCES OF INFORMATION: (a) The patient who is considered only partially reliable because of the confusion inherent in his acute psychotic episode as well as the underlying anxieties the patient has concerning his intrapsychic functioning. (b) Institutional records. (c) Questionnaires from his mother. (d) Transcripts of official military proceedings surrounding the instant offense.

III. FAMILY HISTORY: The patient's mother has led a turbulent life. At age 17 she had the illegitimate older brother to the patient. At age 19 she bore the patient who was also illegitimate. Six months later she married but was divorced within a year. She subsequently has had four husbands, the first three of which were unsuccessful. The fourth husband, however, turned into a stable marital partner and there has been a stable home both socially and economically for the past ten years. During this time a half-sister has been born to the marriage and the family now lives in acceptably comfortable social economic circumstances. The social history of the mother reveals that she was an unstable, irresponsible, nervous woman who was a chronic alcoholic in her late "teen years. She acknowledges that she drank heavily and maintained a very unstable home for approximately ten years. During the early years of the patient he was placed in several foster homes in succession and would frequently live with his grandmother for short periods of time. One of his earliest memories is being in an orphanage and the janitor threatening to throw he and his brother in the furnace because they were misbehaving. During this period the children were removed from the mother she being declared an unfit parent. However when the patient was five the mother regained custody of the two boys and they intermittently lived with the mother, the grandmother and relatives. The patient's memory of his life up till age 10 is one of chaos, insecurity, anxiety, helpless ness, dependency and frustrated anger and unresponsive love. Records indicate that the patient and his brother would frequently keep the home together by working at odd jobs to provide for their own clothes and food. The patient recalls from a vivid memory of his mother standing naked in the kitchen while she was dead drunk throwing dishes out the window. Seeing such as this, the patient recalls with a good deal of anxiety, hostility and guilty love. Suffice to say that the patient's childhood until age 10 was marked by lack of any father figure whatsoever and a very chaotic ambivalent mother figure whose relationship to the boy is most evidently traumatic. The records indicate that when the patient was 10 the mother quite suddenly reformed and ceased her alcoholic pattern of living, settled down to a stable marital existence with her fourth husband and became deeply and devoutly religious. She has continued this quite respectable adjustment throughout the ensuing ten years. However, it is apparent that the

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groundwork for psychic distortion in the boy was already laid.

The patient and his older brother were constant companions throughout infancy and childhood. He states that he and his brother were always getting in fights and that he could usually provoke his brother to become angry at him. However his recollections that he, the patient, would win the fights when he grew older, his brother would win the fights. His earliest childhood memory centers around an Easter egg hunt in which his brother found all the eggs and he found none. That there are deep seated hostile, competitive oedipal strivings with the brother is manifest in much of the material. He mentions that his brother has at the present time twin illegitimate children but has not assumed any responsibilities and continues to live at home with the mother. Records indicate that the brother has a probable congenital hip deformity and hence partially crippled. He has not completed school and has been in minor difficulties. Records indicate also that the patient was often quite impulsively aggressive toward the older brother trying to stab him with a broken bottle at age 5 and later with a dart and when 16, attempted to kill his brother with a broken bottle which the brother prevented by overpowering the patient. Toward the younger half-sister the patient does not express his hostilities consciously but in some of his prior recorded psychotic letters there are many evident hostile allusions to the coveted position the young daughter maintains within the sheltered stable household provided for her which has and was denied to the patient.

The patient furthermore in his psychotic material of his letters reveals marked ambivalent feelings toward his mother. He, at this time, consciously relates that he has both love and hate for his mother and that he cannot decipher which of these feelings is the strongest and most important to him. He does however state that his mother hates him and that he feels this most assuredly especially since he hears her voice talking to him and telling him very bad things. As we approach these areas of his mother's attitude toward him and his reciprocal emotions, the patient becomes exceedingly tense, begins to display a good deal of confusion and begins to act much more disorganized in his mental functioning. Hence we may assume that the patient's relationship to his brother is the area of probable gross psychopathology. This will be of importance in considering the crime the patient committed.

IV. PERSONAL HISTORY: Apparently the patient was born after a 32-hour labor and the mother states he was weak and sickly as a baby. He refused to eat anything except milk until six months old and then the mother would withhold milk until he would willingly take any food offered to him. She notes that he was slow to talk because of stuttering, even in infancy, and only began to walk at 14 months. He was, however, easily toilet trained. The mother notes that as he began school he was noted as a shy, retiring, timid child who made friends very slowly and tended to remain withdrawn within himself. Throughout childhood he had frequent attacks of asthma, virus infections and minor maladies which the mother says he bore quite well until he reached the teen age years at which time he began to become very concerned about his physical condition and became preoccupied with his recurrent illnesses being very anxious about the state of his health. It is noted that he disregarded the health of the rest of his family, however. The patient made steady progress in

SPECIAL PROGRESS REPORT

EDMUNDSON, Clifford W.

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school although he was frequently picked on by the larger boys and was often involved in fights and scraps. It is noted that he often seemed to taunt or tantalize people into anger toward him and that he himself was always known to be prone to impulsive outbursts of anger and acting out aggressive behavior. The patient seemed to resent discipline as a child and when punished would always retaliate. It was noted that when he would be slapped he would slap back and if this continued he would always get the last slap in against his mother. She also noted that he would frequently taunt her to see how far he could push her before being severely punished. She notes that if she punished him only lightly he would continue to flaunt her until she gave him a severe thrashing at which time he would then seem to be properly chastened and behave properly for awhile. Although the patient was pushed around by the more aggressive children, as he came to his 'teen age years he began to become the aggressive dominant person himself and by the time he entered high school was known to the school authorities as a rather aggressive juvenile. He was brought to the attention of juvenile authorities rather frequently over a period of ages 12 to 15 usually because of street juvenile gang activities such as streetwalking, street fights, violating curfew and general insolence. The peace officers report that the boy had a cocky chip on his shoulder attitude and would not form any rapport with authorities and maintained aloof reserve without apparent concern. Finally at age 16 he was expelled from high school along with several other boys because of their intransigent belligerent attitude and constant petty misbehavior in the school. It was felt that their chronic, antisocial attitudes and behavior would soon involve them in serious difficulties. The mother however notes that during this time of his early 'teens he was always very polite and cooperative at home and always contributed to the welfare and care of the home and seemed to have a very protective concern for her welfare and for the sustenance of the home functioning. He would help with the chores and volunteer for tasks requested of him and worked regularly at several odd jobs to contribute to his own support. It is also noted that the patient was an extremely nervous child who was noted to wet the bed, be incontinent, would often run away from home to his grandmother's but would quickly return on his own accord. Interestingly the patient claims that he had a nervous breakdown shortly after his mother remarried for the fourth time and that he had to be taken to a hospital. We might surmise that this "nervous breakdown" was an acute reaction of the boy to a competitor in the form of the new foster-father. Juvenile authorities report that the mother was always quite concerned about the boy but that the step-father was rather blasé and diffident about the whole matter. The mother reports that there was constant friction in the home during all this time centering around rivalry between the two boys and also friction between them and the step-father.

Upon reaching his 17th birthday the patient enlisted in the Air Force with his parents' consent. He finished basic training without incident and went to Wyoming for clerical training. While there he became involved in the instant offense with a training instructor whom he alleged hit him in the stomach and physically abused him. He was found to be carrying a razor blade in a block of wood with which he alleged he would slit the officer to pieces were he to ever approach him again. This incident apparently was accepted without further comment and the patient was

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EDMUNDSON, Clifford W.

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transferred to the Joeso Air Force Base in Labrador. There, as elaborated in the trial proceedings, the patient very quickly developed animosities and rancor between himself and his fellow workers and superiors. They noted that he often acted rather bizarre and strange. He was noted to frequently forget things, to wander off his job or to perform tasks contrary to explicit instructions just given him. He claims several times that he would pass out when he was about to become involved in some assaultive behavior and was known as a moody, impulsive, withdrawn, depressed individual. On the evening prior to the offense the patient was in a canteen when an argument arose between him and another fellow concerning the patient's dancing and playing his records too loudly in his room. The patient says he called the other man a liar who replied "your mother." The patient says that he felt this was an insult and slur to his mother and his first impulse was to hit the man. However, controlling himself, he decided that he would kill him. That night he obtained a pistol, a rifle and a knife and the following morning proceeded to kill the man. However another soldier happened into the patient's way and he shot him instead. Stating that he had to get this fellow out of the way so he could kill the man he wanted to kill, he shooting the one soldier merely because he was in his way. The patient has given many different accounts of exactly what happened although he has never proffered a reason so far as any records show. However he now states that he had a list of things for which he lived for and on this list was his girl friend and his mother. Shortly before the offense his girl wrote him saying that she was no longer going to continue corresponding with him. He states that when this fellow cast aspersions upon his mother that this removed the only other thing from his list worth living for and that he was ready to die. He states that he has been wondering whether it was worth living for quite a while and that this ended it all. One may infer that the patient reacted so violently to the alleged insult to his mother because it pin-pointed the fact that he had indeed massive hostile aggressive impulses toward his own mother which he could not consciously accept and hence there was a strong need for him to kill the man who had expressed his own unacceptable conscious desires of death toward his own mother. It is noteworthy that the patient had prepared a list of eight fellow officers and soldiers whom he was going to kill because they had been making insults and slighting remarks concerning him. That an innocent bystander was killed rather than the real offender is not particularly surprising in view of the fact that the patient's hostilities were actually an expression of his own self-anger which he needed to express against somebody else since he could not express them against himself and we see indeed that he had been battling with his own suicidal wishes for some time prior to the murder he committed. Hence we can see the actual murder as being an alternative to his own suicide and he was in fact making a suicide gesture since murder would mean that he would be executed.

The patient was brought to the U. S. for trial and after the adjudication of the court and sentencing he was incarcerated at Leavenworth Barracks and has been in the various Federal institutions since.

V. PHYSICAL & NEUROLOGICAL EXAMINATION:

The patient has a negative physical history except for complaints of failing eyesight and the patient has a recorded loss of visual acuity 20/1000S and 20/30 OD which he claims has only commenced since incarceration. Because of this being acute it may be on a hysterical basis, must be ruled out and we are having ophthalmological

SPECIAL PROGRESS REPORT

EDMUNDSON, Clifford W.

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consultation. The neurological history and examination and physical examination are the rest of the physical examination.

VI. PRESENT ILLNESS: As has been noted, the patient had a very traumatic childhood with a very pathological mother figure and no father figure. He sees early in life the seeds of personality formation beginning to form. Early in life he is noted to have been aggressive and impulsive with very poor control of his aggressive hostile impulses. Furthermore there is a very ambivalent mother figure who is the only source of support and yet is a repelling, rejecting, despicable figure who is herself dependent on her sons. Nevertheless she is the mother and must be loved despite her unlovableness. To add to this the mother is openly provocative to the boys in a sexual manner such as is seen in the patient's mother standing naked. It is not surprising then that we find very intense rivalry between the patient and his older brother with attempts to kill the brother repeatedly noted in the patient's history. Nor is it surprising now to note the unconscious hostility toward the younger half-sister who occupies the position that the patient so covets and yet cannot have. We note that the patient is a sickly baby which developed slowly and has many neurotic mannerisms during infancy and early childhood with many psychosomatic complaints and that when the 'teen age years come here is a boy who becomes hypochondriacal in his self-concerns. Furthermore we note a shy, diffident, timid individual who has difficulty making friends and is bullied by other people. Later again as he emerges into adolescence we find the timidity being compensated for by open aggressiveness. Of note is the fact that the mother writes that the patient had many girl friends with whom he would very easily and deeply fall in love. He would give them expensive presents and would often give them every cent that he had in his pocket and would be exuberant in lavishing gifts upon them. The mother states that the girls very often had very little affection for him but that he would seem to almost knock himself out in trying to demonstrate his overwhelming love for the girl friend. A rather obvious displacement of affection on to the girls as the mother figure would seem to be appropos here. As noted, we see a boy who has never had any satisfactory models from which to learn ego control and as a matter of fact has rather aptly copied the alcoholic uncontrollable ego of the infantile mother which is a hedonistic ego. Therefore we are not surprised to find him demonstrating antisocial behavior during his 'teen age years nor are we surprised to find that he demonstrates very poor ego control of his hostile and aggressive impulses while in the service and the development of feelings of suspicion, persecution and hostility from other people with a projection on to other people of his own hostility toward them. The dynamics of his behavior resulting in the murder have been elucidated.

Following the murder the patient was seen by a psychiatrist in Labrador who made a diagnosis of Schizophrenic Reaction, Paranoid Type, Chronic, Severe and was of the opinion that the patient was psychotic and incompetent. Accordingly the patient was transferred to the States and while enroute was very disturbed, confused and apparently disoriented although full records are not available. However, the patient finally arrived at Sheppard Air Force Base where further psychiatric examination was performed by a second psychiatrist who felt that the patient represented an extremely severe behavior or character disorder who was close to mild psychosis. It was the second psychiatrist's opinion that the patient was severely ill but probably competent. At the time of trial the first psychiatrist who had seen the patient in

SPECIAL PROGRESS REPORT

EDMUNDSON, Clifford W.

13218-H

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Labrador maintained his original diagnosis of psychotic mental illness but felt that it was not of such a degree as to render the patient incompetent because of the fact that the patient had planned the murder before hand and had also planned to kill the eight officers and soldiers. He maintained the diagnosis of Paranoid Schizophrenia however. The only other opinion was rendered by a physician who saw the patient just after the time of offense for a brief period of time and thought that he represented a paranoid schizophrenic as well as a major character disorder. Following the trial in which it was concluded that the patient was mentally competent and knew right from wrong, he was sentenced to life, the said conclusion being reviewed and accepted by the reviewing officials. Upon admission to Leavenworth Barracks the patient presented a picture of immature, childish behavior with an inability to remain on one job for any length of time, requiring close supervision and unable to refrain from juvenile mischievous behavior. His attitude varied from poor to very good depending upon the particular supervisors or the job. He received a number of behavior reports for fighting, insolence and disobedience which finally resulted in his transfer to Terre Haute after the psychiatrist at Leavenworth Barracks felt that the patient represented a case of emotionally immature personality disorder which is to say a sociopath who is emotionally immature. Upon arrival at Terre Haute the patient continued his former belligerent chip on the shoulder attitude provoking other people to fights, frequently being involved in impulsive aggressive behavior which was very reminiscent of his behavior at the time of the murder. The psychiatrist at Terre Haute noted that the patient was seclusive and tended to conceal his thoughts and was not too cooperative with psychiatric examination. Because of his continued adverse behavior the patient was transferred to Leavenworth where shortly after admission he was noted to be moody, depressed, expressing suicidal thoughts and was transferred to the psychiatric unit for closer observation. There he became progressively more disorganized, began to have auditory and visual hallucinations, became grossly disorganized and did not respond to acute tranquilizing therapy. He was accordingly certified as psychotic with a diagnosis of Schizophrenic Reaction, Acute Paranoid Type and was transferred to the Medical Center. Upon arrival at the Medical Center the patient was placed in the acute treatment ward where he rapidly reorganized himself although there were evidences that he had continuing auditory hallucinations. The patient remained withdrawn and seclusive without revealing much of his thought content to the different psychiatrists. He has since that time progressed slowly through three of the maximum security units to the most liberal regime available under maximum supervision. Only now has he begun to demonstrate some of the more juvenile, immature demanding aggressive behavior that has been recorded in the past since up to this time he has been very passive, quiet, withdrawn and obsequious in his behavior.

At the present time the patient voices much material which is obviously psychotic in nature and he continues to have auditory hallucinations which he denies. He would consider this man actively and still acutely psychotic suffering from a paranoid type of schizophrenic reaction. More important than the patient's actual mental status at this time, however, is the longitudinal picture of this man's illness since it becomes apparent at this time that what has superficially on the surface appeared to be a sociopathic type of personality has in actuality been a longer term chronic paranoid schizophrenic reaction which was perhaps in a more insidious state in earlier

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years and we see now blossoming the more overt and obvious manifestations of his illness. It is a rather moot point as to whether he was competent at the time of his offense or at the time of trial since the patient received several psychiatric examinations. It would seem from this vantage point that the patient has been rather obviously a chronic paranoid schizophrenic for most of his life but to what extent it actually interfered with his competency and responsibility is something that cannot be determined at this time and from what we see of the patient it would appear that any such determination must be made at the moment such as was indeed actually done at the time of trial quite adequately.

VII. MENTAL STATUS: The patient has been seen by this examiner several times as ward doctor and in interview sessions as well as the administration of psychological materials. The patient is a tall, muscular Negro male in excellent physical condition with a slight obesity because of tranquillizing regime. The patient very superficially appears to be in good contact but then obviously demonstrates marked anxiety and very tenuously controlled personality organization upon closer scrutiny. There is marked psychomotor agitation throughout the interviews and when the patient begins to become pressed, rapidly disintegrates into stuttering, stammering and automatic motions. Frequently his thought patterns are broken by autistic preoccupation and frequently the patient displays marked inappropriate mood elisions and cries spontaneously throughout the interview. Rapport is established and maintained only by the use of massive support mechanisms by the examiner to help the patient maintain ego integrity throughout the interviews. Were not this support maintained the patient would frequently lapse into gross psychotically disorganized relationships and only by the external ego support is he able to maintain a coherent relationship.

The patient's perceptual processes demonstrate hyperalertness to the interviewing situation although he is frequently distracted from the interview by his own preoccupation and autistic thought. He is only tenuously oriented to time and place and certainly is confused and anxious about his own person with evidences of inherent depersonalization very close to the surface. He admits to me on an off moment that he had marked hallucinatory experiences at night which are extremely threatening to his ego integrity and then later he vehemently denies his admission since he fears that he will be given shock treatment if he admits hallucinations. The hallucinations center around (1) his mother's denial of him, (2) the accusatory hostile feelings of the witnesses at his trial and (3) the anguished cries of the man he murdered.

The patient's intellectual functioning demonstrates an excellent memory for recent and remote events although this is frequently contaminated by his own conscious suppression of very psychically conflicting and destructive material such as his memories of the distorted pathological figure of his mother whom he alternately loves and hates. At the present time he is able to bring things into memory only after the examiner gives him support and the patient is able to approach threatening material via circumstantial avenues. His store of knowledge is commensurate with a WAS IQ of 106 and he demonstrates an acceptable store of knowledge compatible with about an eighth grade education. His range and type of ideas are markedly constricted.

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He completely dismisses anything that has happened prior to his incarceration, feeling that he has never lived before this time and there are repeated evidences of conscious impoverishment of his thought material. He is constantly preoccupied with the hallucinatory voices which speak to him and the obsessions he has concerning his own hostility and aggression. The patient does not confabulate at this time nor does he present any delusional material although he certainly feels at times persecuted and maligned by authority.

His functional aspects of intellectual functioning demonstrate some rigidity of thought pattern although chiefly there is noted the psychomotor retardation, the very frequent anxiety provoked blocking and the marked over-symbolization and over-determined responses that he presents. In general the patient's intellectual functioning is well preserved and does not show the gross and obvious distortions of schizophrenic disorganization but are rather the distortions of interpersonal perception and interpersonal acceptance such as we see in the paranoid type of schizophrenic reaction.

His emotional responses are retarded and inappropriate at times with bursts of laughter and flights of thought with alternating periods of weeping, self-deprecation and at other times hostility, suspiciousness, withdrawal and apprehensiveness.

In his relationship to other people he reveals withdrawal, hostility, suspiciousness, inability to form rapport with projection of his own feelings on to other people leading to feelings of persecution and hostility. The patient feels that he was being made into a homosexual at Leavenworth and voices many strong feelings of persecution in regards to racial prejudice. He denies any prior homosexual experiences or activity which one might expect in the acute psychotic state which he is in. Contrariwise we would expect that he would possibly be more homosexual were he to become reconstituted again.

The patient has a good deal of current anxiety in part engendered by his active hallucinatory experiences as well as his limited ability to control aggression or relate successfully to other people. The patient has used flight or flight mechanisms to deal with uncomfortable situations and we see his current flight into illness as a way of escaping from expressing hostility too openly toward other people. The patient is ambivalently torn in his acceptance toward his illness expressing at times a desire to be helped and at other times fearful of the implications of mental illness.

The patient's reality contact at the present time is very tenuous indeed. He is caught up in his own ambivalence toward his mother, his ambivalence toward authority, his inability to develop an adequate psychosexual identification and he is loaded down with massive guilt feelings which he has centered around his aggression toward his mother. This leaves either one of two situations; either he internalizes the guilt and aggression upon himself which produces more psychotic disorganization or else he organizes himself more efficiently and expresses his hostility externally toward his environment. Either one of these solutions which he uses is self-destructive and hence the patient is caught in a perpetuating triangle of affairs. The patient

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is presently better organized than at the time of his initial acute disorganization at Leavenworth but he continues to maintain personality organization only at the expense of great psychic effort and very limited internal economy.

VIII. FORMULATION: This is a 21-year old, single Negro male doing life for pre-meditated murder. He was the second illegitimate son born to a woman who was irresponsible and alcoholic for approximately ten years of the patient's life producing a very chaotic and hectic home life for the patient. The incipient seeds of a paranoid schizophrenic personality are repeatedly documented from earliest childhood. The chief psychopathology is centered around the patient's own ambivalence toward the mother figure which culminated in the instant offense which was murder of another soldier. Psychically this represents an expression of the hostility which he had toward his mother being expressed for him by another individual. Since this expressed the patient's own hostility he murdered as an expression of his hostility rather than committing suicide. Following the patient's incarceration he has demonstrated juvenile immaturity, belligerent attitude, withdrawal, seclusive mien and progressive psychic disorganization until he at last became grossly psychotic. The patient at the present time makes only a tenuous contact with reality and is striving hard to maintain a marginal personality integration.

IX. DIAGNOSIS: 000-x24 Schizophrenic Reaction, Paranoid Type, chronic, with acute exacerbation as characterized by an individual with a life history which demonstrates the incipient seeds of a schizophrenic type personality with the evidence of mounting paranoid type of reaction throughout the years culminating in a gross psychotic disorganization at this time with only partial amelioration seen currently.

X. RECOMMENDATIONS: This young Negro is severely mentally ill with gross personality disorganization. As formulated above, our therapeutic aims must be aimed at breaking the perpetuating circle of guilt induced aggression toward either himself or his environment. This would include developing some rapport with the patient so that he can form acceptable relationship with a parental surrogate hence relieving some of the intense ambivalence which he feels at the present time. Further therapeutic efforts might be bent toward developing some acceptance of the mother which the patient continues to have large amounts of hostility toward. Were this to happen we could ameliorate some of the internalized aggression and hence increase personality organization and a larger degree of self-acceptance. Having accomplished this goal it would then be possible to start a program of ego strengthening of his externally directed aggression toward authority and parental symbols. This means that the patient is going to need long term supportive and later interpretive therapy which he seems to have the intellectual equipment to handle. First efforts must be directed toward ameliorating his more psychotic mechanisms of defense and shoring up his meager ego resources. It is anticipated that the patient will require well defined limits for some time until his ego develops more adequately.



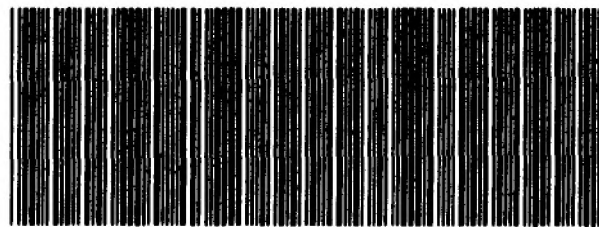
E. MANSELL PATTISON, M. D.
Staff Psychiatrist

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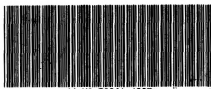
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Mobile Ala July 18th 68-

Mr J. Edgar Hoover, Director F.B.I.

Dear Mr Hoover: Washington D.C.

NR 1000000000

On April 8th I wrote a letter to Mr Frank

Holloman, Director of fire and police depts Memphis Tenn telling him of something I had seen on T.V. on the night of April the 3rd which was something quite unusual, I thought, to happen at one of Martin Luther King meetings.

I think the meeting was held in an auditorium or a large church as there was a very large group of people. I think I can explain to you what I saw.

During King's talk there was a Negro sitting down in about the second or third row of seats, just a little to King's left. It seemed he seemed to be about 28 to 30 years old about King's color. I never saw this man's hands at no time, he never moved just sat there with his eyes glued on King. Never turned his head at no time. People all around him - was

1968

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1 COPIES MADE, DATE 5/4/78 BY
RBC/SS RE M.L. King, Jr.
FOR REVIEW AT FBIHQ AND/OR DELIVERY
TO HSCA RE REQUEST DATED 5/3/78
(SEE BUFILE 62-117490)

screaming and shouting. He just sit there with
the most hateful look on his face I have ever
seen, staring right at King. He never once took
his eyes off of King. never moved, and his
looking down at him just about as bad as he (Cass)

looking at him all through his (Cass) talk.
During King talk he seemed to be questioning from the
Bible. He said, quote - "I do a lot of walking. I
and walked until I come to a mountain. Then
walked up that mountain, step-by-step until I got
the top. (all this time King was looking down at that
and that mans eyes was glued on King) And when
got to the top I looked out into the vast valleys.
It was a beautiful sight. (still looking at that man)
When I got to the top of that mountain I was
alive - but I don't know if I will come back
alive or not." When King finished his talk
entire audience gave King a standing ovation
except that man. He never moved, still with
look of hate in his eyes. Just sat there.
I explained all this to my Holloman. It
to find out what station made the T.V. of
of the picture.

and see if he ~~could~~ ^{could recognize} that man.
I received a very nice letter of thanks from Mr. Hollo-
man.

Regarding that assassination, there is something
else I would like to speak about. Dr. King was living
in a Motel, at that time, on the second floor, on the
afternoon of April 4th, that was the day Dr. King was shot,
he and 4 or 5 other colored men, ministers I understand,
was sitting in Dr. King's room talking, during the
conversations Dr. King got up and walked out onto the
balcony, as he did so another colored man, Dr. Andrew
Young, arose and walked out there behind Dr. King and
stood along beside Dr. King. I understand Dr. King be-
gan to talk to someone down on the ground, while
leaning on the railing. I presume, as the man was
right under Dr. King I understand, now the bullet that
killed Dr. King supposedly came from the window of a
bathroom directly across from where Dr. King was standing
talking to someone on the ground, Now if that bullet
came from a window directly across from Dr. King and
Dr. King was leaning on the railing talking to some-
one below it seems to me that bullet would have
hit Dr. King in the top of his head and not in the
neck. And all this time Dr. Young was standing.

4
Miss Dr. King

Mr Hoover please pardon me for this lengthy letter, but I hope it will be of some service to you

Sincerely

S. F. Williams
S. F. Williams

182 South St.
Mobile, Alabama
36606.

July 18, 1968

Honorable J. Edgar Hoover
Director
Federal Bureau of Investigation
Washington, D. C.

Dear Mr. Hoover:

I would like to take this opportunity of expressing my sincere thanks for the outstanding manner in which Mr. John Minnich, Legal Attache of the Embassy, has conducted himself concerning the extradition of James Earl Ray. I know this has been a most difficult case to handle on all sides and Mr. Minnich has worked very closely with the Consul General of the Embassy, the Deputy Chief of Mission and myself. He has proved to be an excellent officer at the Embassy not only with respect to this particular case but in the years he has been assigned here.

I am glad to have Mr. Minnich as a member of my official family and wish to commend him for his superior contributions.

Sincerely yours,

David K. E. Bruce
Ambassador

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