

# Assassination Records Review Board Final Determination Notification

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AGENCY : HSCA  
RECORD NUMBER : 180-10068-10312  
RECORD SERIES : STAFF PAYROLL RECORDS  
AGENCY FILE NUMBER :

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**December 8, 1995**

**Status of Document:** Postponed in Part

**Number of releases of previously postponed information: 11**

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: 6**

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Postponements: All the postponements in this document represent Social Security numbers.

Reason for Board Action: The text is redacted because the public disclosure of the redaction could reasonably be expected to constitute an unwarranted invasion of personal privacy, and that invasion of privacy would be so substantial that it outweighs the public interest.

Substitute Language: SSN

Date of Next Review:

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**Board Review Completed: 10/24/95**

Released under the John F. Kennedy Assassination Records Collection Act of 1992 (44 USC 2107 Note). Case#: NW 88326  
Date: 2025

JFK ASSASSINATION SYSTEM

IDENTIFICATION FORM

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AGENCY INFORMATION

AGENCY : HSCA  
RECORD NUMBER : 180-10068-10312

RECORDS SERIES :  
STAFF PAYROLL RECORDS

AGENCY FILE NUMBER :

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DOCUMENT INFORMATION

ORIGINATOR : HSCA  
FROM :  
TO :

TITLE :

DATE : 12/27/76  
PAGES : 12

SUBJECTS :  
HSCA, ADMINISTRATION  
BOLAND, COLLEEN T.

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

OPENING CRITERIA :

COMMENTS :  
Box #:1.

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[R] - ITEM IS RESTRICTED

BOLAND, C. T.  
Name of Employee

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

BALANCE BROUGHT FORWARD FROM PRECEDING YEAR

Annual Leave	Sick Leave
—	—

Address \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Position Title \_\_\_\_\_  
Position Number \_\_\_\_\_ Level \_\_\_\_\_ Step \_\_\_\_\_

DATE OF APPOINTMENT  
12-27-76

ANNUAL LEAVE CATEGORY

- 1.0   
1.5   
2.0

PRIOR FEDERAL SERVICE  
Years \_\_\_\_\_ Months \_\_\_\_\_

Month	DAY OF MONTH																															ACCRUED THIS MONTH		AVAILABLE THIS MONTH		USED THIS MONTH		BALANCE AT CLOSE OF MONTH		EMPLOYEE INITIALS					
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Annual Leave	Sick Leave	Annual Leave	Sick Leave	Annual Leave	Sick Leave	Annual Leave	Sick Leave						
Jan.																																			1	1							1	1	
Feb.																																			1	1							2	2	
Mar.																																		1	1							3	3		
Apr.																																		1	1							4	4		
May																																	1	1							5	5			
June																	X			X <sup>1/2</sup>												1	1	6	6	1 1/2	1/2	4 1/2	5 1/2						
July																																1	1							5 1/2	6 1/2				
Aug.																			X			XXXXX									X <sup>1/2</sup>	SS	1	1	6 1/2	7 1/2	6 1/2	2 1/2	0	5					
Sept.	SS						SSSA			AAAAA																										—	—	0	5		5	0	0		
Oct.																																													
Nov.																																													
Dec.																																													

*Terminated 9/15/77*

- = 0.5 day annual leave
- = 1.0 day annual leave
- = 0.5 day sick leave
- S or  S/S = 1.0 day sick leave
- A = 0.5 day administrative leave
- A or  A/A = 1.0 day administrative leave
- U = 0.5 day unauthorized absence
- U or  U/U = 1.0 day unauthorized absence
- = 0.5 day leave without pay
- = 1.0 day leave without pay

CERTIFIED CORRECT:

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

Chief's Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved: \_\_\_\_\_ Date \_\_\_\_\_  
Clerk of the House

This record will be forwarded to the Clerk of the House at the end of each calendar year, or in case of termination, along with the request for termination. Upon approval, the record will be filed in the employee's official personnel folder.

EXHIBIT I

**PAYROLL AUTHORIZATION FORM**

(Please Use Typewriter  
or Ballpoint Pen)

**U.S. HOUSE OF REPRESENTATIVES**  
Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initialed by the  
authorizing official.)

To the Clerk of the House of Representatives:

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Colleen T. Boland	9/16/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
215 52 9164	<input type="checkbox"/> Appointment <input type="checkbox"/> Salary Adjustment <input checked="" type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Assassinations	

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
Researcher	\$15,000

(If Committee Employee, complete appropriate item below.)

- Standing Committee: Staff— Clerical or  Professional.
- Special or Select Committee: Authority—H. Res. 465 of 95th Congress.
- Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date September 16, 1977

*[Handwritten Signature]*  
\_\_\_\_\_  
(Signature of Authorizing Official)

**Louis Stokes**

(Type or print name of Authorizing Official)

**Chairman**

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED: \_\_\_\_\_

Chairman, Committee on House Administration

Office of Finance use only:
Office Code _____
Monthly Annuity \$ _____ .00

*FO 9/22*

Copy for Initiating Office or Committee

MEMORANDUM

TO: Tom Howarth, Budget Officer  
FROM: G. Robert Blakey, Chief Counsel and Director (RB 8-19-77)  
DATE: August 19, 1977  
RE: Colleen Boland and Kevin Walsh

This Memorandum is written to inform you that Ms. Boland and Mr. Walsh's employment with the Select Committee will be terminated effective September 15, 1977. Ms. Boland and Mr. Walsh will be on administrative leave until that time.

The administrative leave should equal their accrued vacation plus such remaining time between now and September 15th.

M E M O R A N D U M

TO: Thomas Howarth, Budget Officer  
FROM: G. Robert Blakey, Chief Counsel and Director  
DATE: September 15, 1977

GRB  
9-15-77

Effective Friday, September 16, 1977, at 5:00 p.m.,  
Colleen Boland and Kevin Walsh will be terminated from  
the Committee payroll.

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

GRB:jl

**PAYROLL AUTHORIZATION FORM**

(Please Use Typewriter  
or Ballpoint Pen)

**U.S. HOUSE OF REPRESENTATIVES**  
Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initialed by the  
authorizing official.)

**To the Clerk of the House of Representatives:**

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b> Colleen T. Boland	<b>Effective Date</b> 8/1/77
<b>Employee Social Security Number</b> 215-52-9164	<b>Type of Action</b> <input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b> Assassinations	

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

Position Title	Gross Annual Salary
Researcher	15,000

(If Committee Employee, complete appropriate item below.)

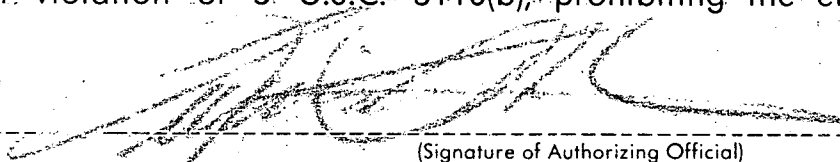
- Standing Committee: Staff— Clerical or  Professional.
- Special or Select Committee: Authority—H. Res. 465 of 95th Congress.
- Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date August 2, 19 77



(Signature of Authorizing Official)

**LOUIS STOKES**

(Type or print name of Authorizing Official)

**CHAIRMAN**

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED: \_\_\_\_\_

Chairman, Committee on House Administration

Office of Finance use only: Office Code _____ Monthly Annuity \$ _____ .00
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**Copy for Initiating Office or Committee**

**PAYROLL AUTHORIZATION FORM**

(Please Use Typewriter  
or Ballpoint Pen)

**U.S. HOUSE OF REPRESENTATIVES**  
Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initialed by the  
authorizing official.)

**To the Clerk of the House of Representatives:**

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Colleen T. Boland	5/1/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
215 52 9164	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Assassinations	

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

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

(If Committee Employee, complete appropriate item below.)

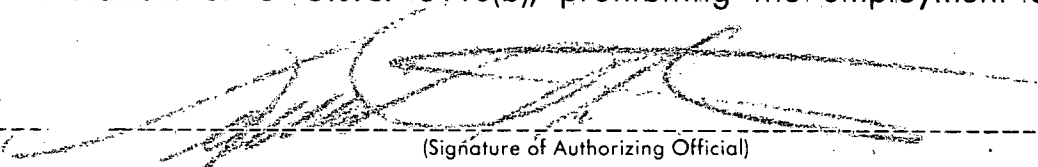
- Standing Committee: Staff— Clerical or  Professional.
- Special or Select Committee: Authority—H. Res. 465 of 95th Congress.
- Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date May 10, 1977



(Signature of Authorizing Official)

**Louis Stokes**

(Type or print name of Authorizing Official)

**Chairman**

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED: \_\_\_\_\_

Chairman, Committee on House Administration

Office of Finance use only:
Office Code _____
Monthly Annuity \$ _____ .00

FD 5/11

**Copy for Initiating Office or Committee**



**PAYROLL AUTHORIZATION FORM**

(Please Use Typewriter  
or Ballpoint Pen)

**U.S. HOUSE OF REPRESENTATIVES**  
Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initialed by the  
authorizing official.)

To the Clerk of the House of Representatives:

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Colleen T. Boland	4/1/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
215 52 9164	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Assassinations	

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$22,000

(If Committee Employee, complete appropriate item below.)

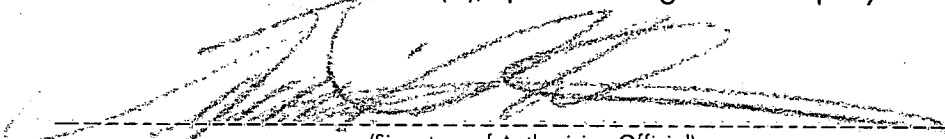
- Standing Committee: Staff— Clerical or  Professional.
- Special or Select Committee: Authority—H. Res. 465 of 95th Congress.
- Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date April 29, 1977



(Signature of Authorizing Official)

**Louis Stokes**

(Type or print name of Authorizing Official)

**Chairman**

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED: \_\_\_\_\_

Chairman, Committee on House Administration

Office of Finance use only:
Office Code _____
Monthly Annuity \$ _____ .00

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM**

(Please Use Typewriter  
or Ballpoint Pen)

**U.S. HOUSE OF REPRESENTATIVES**  
Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initialed by the  
authorizing official.)

**To the Clerk of the House of Representatives:**

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Colleen T. Boland	1/3/77
<b>Employee Social Security Number</b>	<b>Type of Action</b>
215 52 9164	<input type="checkbox"/> Appointment <input checked="" type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Select Committee on Assassinations	

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

<b>Position Title</b>	<b>Gross Annual Salary</b>
	\$10,000.

(If Committee Employee, complete appropriate item below.)

- Standing Committee: Staff— Clerical or  Professional.
- Special or Select Committee: Authority—H. Res. 11 of 95th Congress.
- Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date \_\_\_\_\_, 19 77

(Signature of Authorizing Official)  
Henry B. Gonzalez

(Type or print name of Authorizing Official)  
Chairman

(Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED: \_\_\_\_\_

Chairman, Committee on House Administration

Office of Finance use only:
Office Code _____
Monthly Annuity \$ _____ .00

Copy for Initiating Office or Committee

**PAYROLL AUTHORIZATION FORM**

(Please Use Typewriter  
or Ballpoint Pen)

**U.S. HOUSE OF REPRESENTATIVES**  
Washington, D.C. 20515

(Any erasures, corrections, or changes  
on this form must be initialed by the  
authorizing official.)

**To the Clerk of the House of Representatives:**

I hereby authorize the following payroll action:

<b>Employee Name (First-Middle-Last)</b>	<b>Effective Date</b>
Colleen T. Boland	12/27/76
<b>Employee Social Security Number</b>	<b>Type of Action</b>
215 52 9164	<input checked="" type="checkbox"/> Appointment <input type="checkbox"/> Salary Adjustment <input type="checkbox"/> Termination (At close of business on effective date)
<b>Employing Office or Committee</b>	
Select Committee on Assassinations	

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

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

(If Committee Employee, complete appropriate item below.)

- Standing Committee: Staff— Clerical or  Professional.
- Special or Select Committee: Authority—H. Res. 1540 of 94th Congress.
- Joint Committee.

(If Employee of an Officer of the House, complete item below.)

Position Number \_\_\_\_\_ If applicable, Level \_\_\_\_\_ Step \_\_\_\_\_

I certify that this authorization is not in violation of 5 U.S.C. 3110(b), prohibiting the employment of relatives.

Date December 16, 1976

\_\_\_\_\_  
 (Signature of Authorizing Official)  
 Thomas N. Downing, Chairman  
 (Type or print name of Authorizing Official)  
 Select Committee on Assassinations  
 (Title—If Member, District and State)

All appointments and salary adjustments for employees under the House Classification Act and for Committee employees, except those of the Committee on Appropriations, the Committee on the Budget, and the Joint Committees, must be approved by the Committee on House Administration.

APPROVED: \_\_\_\_\_  
 Chairman, Committee on House Administration

Office of Finance use only:
Office Code _____
Monthly Annuity \$ _____ .00

**Copy for Initiating Office or Committee**

M E M O R A N D U M

TO: All Staff Employees  
FROM: Budget Officer  
DATE: January 3, 1977  
RE: Payroll Certification

Starting with the January, 1977 payroll, the certification to the House Finance Office requires, among other things, the relationship, if any, of each staff employee to any current Member of Congress (those taking office January 3, 1977).

The following are the relationships to be included in the certification:

father	nephew	brother-in-law
mother	niece	sister-in-law
son	husband	stepfather
daughter	wife	stepmother
brother	father-in-law	stepbrother
sister	mother-in-law	stepsister
uncle	son-in-law	half-brother
aunt	daughter-in-law	half-sister
first cousin		

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

Approved  
Richard A. Sprague

I am not related

I am related by the following relationship \_\_\_\_\_

Allen Boland  
Signature of Employee

Feb 10, 77  
Date

M E M O R A N D U M

TO: All Staff Employees  
FROM: Budget Officer  
DATE: January 3, 1977  
RE: Payroll Certification

Starting with the January, 1977 payroll, the certification to the House Finance Office requires, among other things, the relationship, if any, of each staff employee to any current Member of Congress (those taking office January 3, 1977).

The following are the relationships to be included in the certification:

father	nephew	brother-in-law
mother	niece	sister-in-law
son	husband	stepfather
daughter	wife	stepmother
brother	father-in-law	stepbrother
sister	mother-in-law	stepsister
uncle	son-in-law	half-brother
aunt	daughter-in-law	half-sister
first cousin		

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

Approved  
Richard A. Sprague

I am not related  \_\_\_\_\_

I am related by the following relationship \_\_\_\_\_

Colleen F Boland  
Signature of Employee

\_\_\_\_\_  
Date

COLLEEN T. BOLAND

3529 O Street, N. W.  
Washington, D. C. 20007  
(202) 338-6536

Age: 26  
Health: Excellent  
Marital Status: Single

**PROFESSIONAL OBJECTIVE:** Seeking a career where my administrative, research and writing skills can be adapted to the fullest extent for future growth.

**PROFESSIONAL EXPERIENCE:**

9/75 - 7/76 Royal Embassy of Saudi Arabia Washington, D. C.

Saudi Arabian Information Office

Primary responsibilities were to open the Information Office which provided social, cultural, political, economic and commercial information relating to Saudi Arabia, to private citizens, the press, businessmen, members of Congress and officials of government agencies. Compiled a working card catalogue and index for a research library on the history of Saudi Arabia. Coordinated scheduling procedures for visiting foreign dignitaries. Assisted with the publication of a monthly magazine on Saudi Arabia. As required, assisted Ambassador Alireza in administrative matters and research.

11/73 - 1/75 Representative John Dellenback (R-Oregon) Washington, D. C.

In addition to general administrative and secretarial responsibilities, answered constituent inquiries on legislative and administrative matters within the Federal Government.

1/73 - 10/73 The Washington Clinic Chevy Chase, Md.

Medical Assistant to Dr. James Shaper.  
Responsible for managing the office and assisting the physician with minor surgery.

**EDUCATION:**

9/68 - 5/72 Maryville College St. Louis, Missouri

B.A. Degree in English and History  
Dean's List

Midwestern Sailing Society

Volunteer work with under-privileged 9/68 - 5/69

9/64 - 6/68 Stone Ridge Country Day School Bethesda, Md.

**OTHER:** Language: French

**REFERENCES:** Available on request