

4/17/70

Dear Dick,

I just got your letter of 4/13 which I appreciate. I answer in a little more haste than I would like, but am swamped with other things--on and off of the case.

JFK back measurements: Your caution on the position of the wound is well taken. I believe in the beginning of last summer when you first contacted me, I was a little more ready to argue that the back wound was above the front wound--if I did not actually assert it. Nichols has some good stuff on this. A lot hinges on the exact structure of JFK back and upper thorax muscles which we cannot be sure of until we see the photographs or can get a reliable description of them. Nichols says that for there to be a path through the neck as WC says, bullet had to enter at level of 6th cervical. That is definitely too high.

"pre-autopsy" exam: With Harold's great cautions, I hold this only as a possibility. With something I just learned from Nichols, I put substance in what I earlier stated as a possibility. Sibert-O'Neill is clear that all personnel save the autopsy docs and those needed to take pix were sent out of room during taking of pix. Of course, that is all who should have been there all along. However, Nichols says this is done so that the autopsy findings remain confidential. I don't know, as I say. I think your suggestion that the bullet may have been worked out enough to show and be removed with fingers is good to hold onto also.

JFK back wound: Your comments are good and well taken. I mentioned this only as an alternative to the bullet going into lung which I now know is a distinct possibility.

399base: Nichols already has a color transparency of this and says there is nothing on it.

CE 572-test bullets: I know that one is deformed in some way; I've seen it. Perhaps I am describing it wrong when I say it is twisted. Maybe bent would be better.

Good suggestion on the switching of blank films. I would not be surprised if the lung and internal pix were deliberately destroyed by exposing. This was as close as we could ever hope to come to "dissection." They would let us know partially what went on between the two skin wounds.

Neck fragments: That you find the conditions I stipulated nonsensical suggests to me a possibility which I hope is not true--that Morgan lied to me. You now have on a confidential basis the documents behind my stipulated set-up. Understand that the fact that panel saw only A-P's leaves the back to front question open. From Nichols I learned that Fisher thinks the path of fine dust stretches across the neck. Morgan probably saw it differently. When I learned what Morgan revealed in the letters, I quite honestly had the same thoughts as you.

Chest incisions: You make the same mistake as Harold did on the possibilities of this. I think it foolish to even assert that there was a skin wound to the chest--involves too much. But the possibility of underlying damage is another prospect. It is very

possible that there was more lung damage of a different nature than we know about. I hope to develop this with John. This was suspected by all the Parkland docs, one of which was certain of it (one or two). I can't say how this directly relates to what Humes and Specter did with the chest incisions. I regret that I did not know this when I talked with S; this was one of his more outstanding efforts.

JFK hand: I do consider this possibility remote though not disproven. To disprove it, I'd need pix and X-rays of hands, etc. I am in general agreement with your analysis of Z combined with Wallis and Bennett.

Lifton: The letter he sent you plus what I know from Harold leaves me little but to think that he is a loony--brilliant, devious, but a loony. I believe I have a lever with him with the tape he wants.

All for now.

Best,