

**NOTIFICATION OF PERSONNEL ACTION**

1. Name (Last, First, Middle) <b>KLEIN, ELIZABETH A.</b>		2. Social Security Number <b>(b) (6)</b>		3. Date of Birth <b>(b) (6)</b>		4. Effective Date <b>01/20/2017</b>	
<b>FIRST ACTION</b>				<b>SECOND ACTION</b>			
5-A. Code <b>317</b>		5-B. Nature of Action <b>RESIGNATION</b>		6-A. Code		6-B. Nature of Action	
5-C. Code <b>RUM</b>		5-D. Legal Authority <b>REG 715.202 OTHER</b>		6-C. Code		6-D. Legal Authority	
5-E. Code		5-F. Legal Authority		6-E. Code		6-F. Legal Authority	
7. FROM: Position Title and Number <b>PRINCIPAL DAS POLICY, MGMT AND BUDGET AND ASSOCIATE DEPUTY SECRETARY 60000000 ES19744</b>				15. TO: Position Title and Number			
8. Pay Plan <b>ES</b>		9. Occ. Code <b>0301</b>		10. Grade or Level <b>00</b>		11. Step or Rate <b>00</b>	
12. Total Salary <b>169495</b>		13. Pay Basis <b>PA</b>		16. Pay Plan		17. Occ. Code	
18. Grade or Level		19. Step or Rate		20. Total Salary/Award		21. Pay Basis	
12A. Basic Pay <b>169495</b>		12B. Locality Adj. <b>0</b>		12C. Adj. Basic Pay <b>169495</b>		12D. Other Pay <b>0</b>	
20A. Basic Pay		20B. Locality Adj.		20C. Adj. Basic Pay		20D. Other Pay	
14. Name and Location of Position's Organization <b>ASST SECY-POLICY, MGMT &amp; BUDGET/CFO</b>  <b>WASHINGTON,DC</b>				22. Name and Location of Position's Organization			
<b>EMPLOYEE DATA</b>							
23. Veterans Preference <b>(b) (6)</b> 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%				24. Tenure <b>0</b> 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite		25. Agency Use	
26. Veterans Preference for RIF <b>(b) (6)</b> YES <b>(b) (6)</b> NO				27. FEGLI <b>(b) (6)</b>		28. Annuitant Indicator <b>(b) (6)</b>	
29. Pay Rate Determinant <b>(b) (6)</b>				30. Retirement Plan <b>(b) (6)</b>		31. Service Comp. Date (Leave) <b>12/09/2008</b>	
32. Work Schedule <b>F FULL-TIME</b>				33. Part-Time Hours Per Biweekly Pay Period			
<b>POSITION DATA</b>							
34. Position Occupied <b>3</b> 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved				35. FLSA Category <b>E</b> E - Exempt N - Nonexempt		36. Appropriation Code	
37. Bargaining Unit Status <b>8888</b>				38. Duty Station Code <b>11-0010-001</b>			
39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON, DISTRICT OF COLUMBIA</b>				40. Agency Data <b>FUNC CLS 00</b>			
41. <b>(b) (6)</b>		42. EDUC LVL 15		43. SUPV STAT 2		44. POSITION SENSITIVITY CRITICAL-SENSITIVE	
45. Remarks EMPLOYEE SUBJECT TO POST-EMPLOYMENT RESTRICTIONS UNDER 18 U.S.C. 207(C) FORWARDING ADDRESS: <b>(b) (6)</b> REASON FOR RESIGNATION: EFFECTIVE NOON TODAY, <b>(b) (6)</b> <b>(b) (6)</b> SF-8 (NOTICE TO FEDERAL EMPLOYEE ABOUT UNEMPLOYMENT INSURANCE) ISSUED. LUMP-SUM PAYMENT TO BE MADE FOR ANY UNUSED ANNUAL LEAVE. SF 2819 WAS PROVIDED. LIFE INSURANCE COVERAGE IS EXTENDED FOR 31 DAYS DURING WHICH YOU ARE ELIGIBLE TO CONVERT TO AN INDIVIDUAL POLICY (NONGROUP CONTRACT). HEALTH BENEFITS COVERAGE IS EXTENDED FOR 31 DAYS DURING WHICH YOU ARE ELIGIBLE TO CONVERT TO AN INDIVIDUAL POLICY (NONGROUP CONTRACT). YOU ARE ALSO ELIGIBLE FOR TEMPORARY CONTINUATION OF YOUR FEHB COVERAGE FOR UP TO 18 MONTHS.							
46. Employing Department or Agency <b>IN - OFC OF THE SECRETARY</b>				50. Signature/Authentication and Title of Approving Official <b>170317167 / ELECTRONICALLY SIGNED BY:</b>			
47. Agency Code <b>IN01</b>		48. Personnel Office ID <b>4342</b>		49. Approval Date <b>01/18/2017</b>		51. Signature/Authentication and Title of Approving Official <b>GARY P. HARDAWAY</b> <b>HUMAN RESOURCES SPECIALIST</b>	