Standard Form 50 Rev. 7/91 U.S. Office of Personnel Management FPM Supp. 296–33, Subch. 4

## NOTIFICATION OF PERSONNEL ACTION

| 1. Name (Last, First, Middle)  |                     |                                  |              |                              |               | 2. Social Security Number              |  |                                | 3. Date of                    | 3. Date of Birth |                                  | 4. Effective Date                               |                     |  |
|--|---------------------|----------------------------------|--------------|------------------------------|---------------|--|--|--------------------------------|-------------------------------|------------------|----------------------------------|---|---------------------|--|
| MESSICK, MARIA L   |                     |                                  |              |                              |               | (b)                                    | (6)  |                                | (b) (6)                       |                  | 05/17/2021                       |   |                     |  |
| FIRST  | ACTIO               | )N                               |              |                              |               | SECOND ACTION                          |  |                                |                               |                  |                                  |   |                     |  |
| 5-A. Code 5-B. Nature of Action EXC APPT   |                     |                                  |              |                              | 6-A. Co       | 6-A. Code 6-B. Nature of Action        |  |                                |                               |                  |                                  |   |                     |  |
| 5-C. Code 5-D. Legal Authority<br>Y7M SCH C 213 3314   |                     |                                  |              |                              |               |  |  | 6-C. Code 6-D. Legal Authority |                               |                  |                                  |   |                     |  |
| 5-E. Code 5-F. Legal Authority   |                     |                                  |              |                              |               | 6-E. Co                                | 6-E. Code 6-F. Legal Authority   |                                |                               |                  |                                  |   |                     |  |
| 7. FROM: Position Title and Number   |                     |                                  |              |                              |               |  | 15. TO: Position Title and Number  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  | SPECIAL ADVISOR<br>66167679 COM181   |                                |                               |                  |                                  |   |                     |  |
| 8. Pay Plan  | 9. Occ. Code        | e 10. Grade or Level 11. Ste     | p or Rate 12 | . Total Salary               | 13. Pay Basis | 16. Pay Pl<br>GS                       |  | Occ. Code 1                    | 8. Grade or Le                | vel 19.Step or R | 20. Total Sal<br>95,920.0        |   | 21. Pay Basis<br>PA |  |
| 12A. Basic Pay   |                     | 12B. Locality Adj. 12C. Adj. Bas |              | -                            | 2D. Other Pay | 20A. Basic Pay 73,513.00               |  |                                | 20B. Locality Ac<br>22,407.00 |                  | 20C. Adj. Basic Pay<br>95,920.00 |   | · Pay               |  |
| 14. Name and Location of Position's Organization  22. Name and Location of Position's Organization  ECONOMIC DEVELOPMENT ADMINISTRATION  OFF OF ASST SECY FOR ECON DEV  CM 5299000000000000 PP 10 2021 |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
| EMPL   | OYEE I              | DATA                             |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
| 23. Veterans Preference   1 - None   3 - 10-Point/Disability   5 - 10-Point/Other   2 - 5-Point   4 - 10-Point/Compensable   6 - 10-Point/Compensable/30%  |                     |                                  |              |                              |               |  | 24. Tenure  3 O None 2 - Conditional 1 - Permanent 3 - Indefinite 25. Agency Use 26. Veterans Preference for RIF (b) (6) |                                |                               |                  |                                  |   | ce for RIF          |  |
| 27 FEGLI<br>(b) (6)  |                     |                                  |              |                              |               |  | 28. Annuitant Indicator 9 NOT APPLICABLE   |                                |                               |                  |                                  | 29. Pay Rate Determinant 7 SUPERIOR QUALIFICATI |                     |  |
| 30. Retirement Plan  31. Service Comp. Date (Leave)  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  | 33. Part-Time Hours Per Biweekly                |                     |  |
| (b) (6) (b)(6) POSITION DATA   |                     |                                  |              |                              |               | F FULL TIME                            |  |                                |                               |                  |                                  | Pay Period                                      |                     |  |
| 34. Position Occupied 35. FLSA Category  |                     |                                  |              |                              |               |  | 36. Appropriation Code 37. Bargaining Unit Status  |                                |                               |                  |                                  |   | atus                |  |
| 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved   |                     |                                  |              | E – Exempt<br>N – Nonexempt  |               |  |  |                                | 8888                          |                  |                                  |   |                     |  |
|  |                     |                                  |              | -                            | -             |  | State or Overseas Location) OLUMBIA DC   |                                |                               |                  |                                  |   |                     |  |
| 40. Agen   | Agency Data 41. 42. |                                  | 43.          |                              | 44.           |  |  |                                |                               |                  |                                  |   |                     |  |
| 45. Rema   | arks                |                                  |              |                              | I             |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
| (b) (6)  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     | (b) (6)                          | (b)          | (6)                          |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              | ) (6)                        | (b) (6)       |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              | (0) (0)       |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  |  |                                |                               |                  |                                  |   |                     |  |
|  |                     |                                  |              |                              |               |  | 50. Signature/Authentication and Title of Approving Official   |                                |                               |                  |                                  |   |                     |  |
| DEPARTMENT OF COMMERCE  Code 48. Personnel Office ID 49. Approval Date   |                     |                                  |              |                              |               | ELECTRONICALLY SIGNED BY: KURT BERSANI |  |                                |                               |                  |                                  |   |                     |  |
| CM52   | Code                | 48. Personnel Office ID 1426     |              | 49. Approval I<br>05/17/2021 | Jate          | DIRECTOR, HCCS                         |  |                                |                               |                  |                                  |   |                     |  |