

NOTIFICATION OF PERSONNEL ACTION

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|--|-------------------------------------|----------------------------|--|
| 1. Name (Last, First, Middle) WILSON, LAURENCE JAMES | 2. Social Security Number (b)(6) | 3. Date of Birth (b)(6) | 4. Effective Date 05/10/2021 |
|--|-------------------------------------|----------------------------|--|

| FIRST ACTION | | SECOND ACTION | |
|-------------------------|--|---------------|-----------------------|
| 5-A. Code 170 | 5-B. Nature of Action EXC APPT | 6-A. Code | 6-B. Nature of Action |
| 5-C. Code Y7M | 5-D. Legal Authority SCH C, 213.3316 AGENCY- UNIQUE SCHEDULE C AU1 | 6-C. Code | 6-D. Legal Authority |
| 5-E. Code ZLM | 5-F. Legal Authority OPM FORM 1019 DATED 05-06-2021 | 6-E. Code | 6-F. Legal Authority |

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| 7. FROM: Position Title and Number | 15. TO: Position Title and Number ADVANCE REPRESENTATIVE PD:GS0569 POSITION:00456568 |
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|----------------|--------------|--------------------|------------------|--------------------|---------------|---------------------|---------------|--------------------|------------------|------------------------|---------------|
| 8. Pay Plan | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary | 13. Pay Basis | 16. Pay Plan | 17. Occ. Code | 18. Grade or Level | 19. Step or Rate | 20. Total Salary/Award | 21. Pay Basis |
| | | | | | | GS | 0301 | 12 | 01 | \$83,523.00 | PA |
| 12A. Basic Pay | | | | 12B. Locality Adj. | | 12C. Adj. Basic Pay | | 12D. Other Pay | | | |
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| 14. Name and Location of Position's Organization | 22. Name and Location of Position's Organization OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES IMMEDIATE OFFICE OF THE SECRETARY DALLAS TX USA |
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EMPLOYEE DATA

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| 23. Veterans Preference (b)(6) | 24. Tenure 3 | 25. Agency Use | 26. Veterans Preference for RIF (b)(6) |
| 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/50% | 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite | | |
| 27. FEGLI (b)(6) | | 28. Annuitant Indicator (b)(6) | |
| 30. Retirement Plan (b)(6) | | 31. Service Comp. Date (Leave) (b)(6) | |
| | | 32. Work Schedule F FULL TIME | |
| | | 33. Part-Time Hours Per Biweekly Pay Period | |

POSITION DATA

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| 34. Position Occupied 2 | 35. FLSA Category E | 36. Appropriation Code 11990362 | 37. Bargaining Unit Status 8888 |
| 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved | E - Exempt N - Nonexempt | | |
| 38. Duty Station Code 481730113 | | 39. Duty Station (City - County - State or Overseas Location) DALLAS DALLAS TX USA | |

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| 40. Agency Data | 41. | 42. | 43. | 44. PAR NUMBER: |
|-----------------|-----|-----|-----|-----------------|

45. Remarks
 APPOINTMENT IS INDEFINITE.
 AFFIDAVIT EXECUTED 05-10-2021.
 CREDITABLE MILITARY SERVICE: (b)(6)
 PREVIOUS RETIREMENT COVERAGE: (b)(6)
 (b)(6)

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| 46. Employing Department or Agency DEPARTMENT OF HEALTH AND HUMAN SERVICES | 50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES |
| 47. Agency Code HE10 | 48. Personnel Office ID 1704 |
| 49. Approval Date 05/14/2021 | |

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| FIRST ACTION | | SECOND ACTION | |
|-------------------------|---|------------------|------------------------------|
| 5-A. Code 317 | 5-B. Nature of Action RESIGNATION | 6-A. Code | 6-B. Nature of Action |
| 5-C. Code RPM | 5-D. Legal Authority REG 715.202. RESIGNATION | 6-C. Code | 6-D. Legal Authority |
| 5-E. Code | 5-F. Legal Authority | 6-E. Code | 6-F. Legal Authority |

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| 7. FROM: Position Title and Number ADVANCE REPRESENTATIVE PD:GS0569 POSITION:00456568 | 15. TO: Position Title and Number |
| 8. Pay Plan 9. Occ. Code 10. Grade or Level 11. Step or Rate 12. Total Salary 13. Pay Basis GS 0301 12 01 \$83,523.00 PA | 16. Pay Plan 17. Occ. Code 18. Grade or Level 19. Step or Rate 20. Total Salary/Award 21. Pay Basis |
| 12A. Basic Pay 12B. Locality Adj. 12C. Adj. Basic Pay 12D. Other Pay \$66,829.00 \$16,694.00 \$83,523.00 \$0 | 20A. Basic Pay 20B. Locality Adj. 20C. Adj. Basic Pay 20D. Other Pay |
| 14. Name and Location of Position's Organization OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES IMMEDIATE OFFICE OF THE SECRETARY DALLAS TX USA | 22. Name and Location of Position's Organization |

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| EMPLOYEE DATA | | |
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| 40. Agency Data | 41. | 42. | 43. | 44. PAR NUMBER: |
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| 45. Remarks (b)(6) |
| FORWARDING ADDRESS: (b)(6) LUMP-SUM PAYMENT TO BE MADE FOR ANY UNUSED ANNUAL LEAVE. (b)(6) |

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| 46. Employing Department or Agency DEPARTMENT OF HEALTH AND HUMAN SERVICES | 50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES |
| 47. Agency Code 48. Personnel Office ID 49. Approval Date HE10 1704 10/19/2021 | |