## NOTIFICATION OF PERSONNEL ACTION

n. 4														
Middle)							4. Effective Date							
OLICK, KAREN L FIRST ACTION					(b)(6) 01/20/2021									
5-B. Nature of Action PROVISIONAL APPT NTE 05/20/21					6-A. Code 6-B. Nature of Action									
5-D. Legal Authority	6-C. Code	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						15. TO: Position Title and Number SENIOR ADVISOR 90988438 083877								
10. Grade or Level 11.	16. Pay Plan GS													
12B. Locality Adj.	12C. Adj. Basi	c Pay	12D. Other Pay		-				20D. Other	Pay				
on of Position's Organ	nization			IMMEDI OSEM Imm Off CHIEF O	ATE OFFICE of the Sec F STAFF	E OF THE SI	ECRETARY	,						
DATA														
23. Veterans Preference						- Conditional	(b)(6)	26. Veterans Preference for RIF (b)(6)						
				28. Annuita	nt Indicator			29. Pay Ra	te Determin	ant				
		31. Service	Comp. Date (Leav	ve) 32. Work S	chedule			33. Part-T	ime Hours l	Per				
			, , , , , , , , , , , , , , , , , , ,	1				Biweekly						
TA									Tay Terrou					
d		35. FLSA C	ategory	36. Approp	riation Code		37. Bargai	37. Bargaining Unit Status						
ervice 3 – SES General ice 4 – SES Career Rese	erved						8888	8888						
e				•		on)								
41.	42.		43.		44.									
LOYEES' HEAL DAYS FROM T F-2809 TO (D) PLANS AND GE /INSURE LOYEES' GROU OMATICALLY E HE DATE OF H TED SF-2817 INFORMATION OPM.GOV/INSU	TH BENEF THE DATE (6) T MORE I INROLLED LIRE TO E TO (b)(6) AND USE TRE/LIFE.	ITS (FE OF HIRE NFORMAT NSURANC IN BASI LECT OP	HB): TO ENROLI D)(6) ION, VISIT E (FEGLI): C COVERAGI TIONAL COV (b)(6) GLI CALCUI	r : E. YOU HA VERAGE. S	VE 60 END									
46. Employing Department or Agency						50. Signature/Authentication and Title of Approving Official								
				_										
CURITY  48. Personnel Office	•••	49. Approv	ID.	ELECTI	RONICALLY	SIGNED BY	Y:							
	Middle)  N 5-B. Nature of Action PROVISIONAL 5-D. Legal Authority SCH C 213.33XX 5-F. Legal Authority itle and Number  10. Grade or Level 11 12B. Locality Adj00 On of Position's Organ  OATA  Ince 3-10-Point/Disability 4-10-Point/Compensal  ATA Ince 4-SES Career Rese 41.  AFFIDAVIT E NED BY DHS/H  LOYEES' HEAL DAYS FROM T F-2809 TO (E) PLANS AND GE /INSURE LOYEES' GROU OMATICALLY E HE DATE OF H TED SF-2817 INFORMATION OPM. GOV/INSU CONTINUED OF CONTINUED	Middle)  N 5-B. Nature of Action PROVISIONAL APPT NTE ( 5-D. Legal Authority SCH C 213.33XX 5-F. Legal Authority  itle and Number  10. Grade or Level 11. Step or Rate 12.  12B. Locality Adj. 12C. Adj. Basi .00  on of Position's Organization  DATA  Ice 3-10-Point/Disability 5-10-4-10-Point/Compensable 6-10  ATA  Ice 4-10-Point/Compensable 6-10  ATA  Ice 4-10-Point/Compensable 6-10  ATA  Ice 1-10-Point/Compensable 6-10  Ic	Middle)  N 5-B. Nature of Action PROVISIONAL APPT NTE 05/20/21 5-D. Legal Authority SCH C 213.33XX 5-F. Legal Authority itle and Number  10. Grade or Level 11. Step or Rate 12. Total Salary  12B. Locality Adj. 12C. Adj. Basic Pay .00 on of Position's Organization  DATA  In 10-Point/Compensable 5-10-Point/Other 6-10-Point/Compensable 6-10-Point/Compensable 6-10-Point/Compensable 6-10-Point/Compensable 6-10-Point/Compensable 6-10-Point/Compensable 9-10-Point/Compensable 19-10-Point/Compensable 19-10-Point/C	Middle)  N 5-B. Nature of Action PROVISIONAL APPT NTE 05/20/21 5-D. Legal Authority SCH C 213.33XX 5-F. Legal Authority  itle and Number  10. Grade or Level 11. Step or Rate 12. Total Salary 12B. Locality Adj. 12C. Adj. Basic Pay 12D. Other Pay .00 on of Position's Organization  12B. Locality Adj. 12C. Adj. Basic Pay 12D. Other Pay .00 on of Position's Organization  13. Flast Category Frice 3-10-Point/Compensable 6-10-Point/Compensable/30%  31. Service Comp. Date (Leat 11. Step or Rate 12. Total Salary 13. Pay Basis 12B. Locality Adj00  31. Service Comp. Date (Leat 12. Total Salary 12D. Other Pay .00  31. Service Comp. Date (Leat 12. Total Salary .00  32. TA  33. FLSA Category Frice 3-SES General (D)(6) E-Exempt N-Nonexempt (D)(6) E-Exempt N-Non	Second   S	2. Social Security Number	2. Social Security Number	2. Social Security Number	2. Social Security Number   Ditto   Ditto	2. Social Security Number   3. Date of Birch   60/60   4. Effective Date   61/20/2021				

## NOTIFICATION OF PERSONNEL ACTION

FPM Supp. 296-33, Sub	ch. 4													
1. Name (Last, First	, Middle)				2. Socia	2. Social Security Number 3. Date			th	4. Effective	e Date			
OLICK, KAREN L					(b)(	(b)(6)				01/20/2021				
FIRST ACTIO	ON				SECO	ND ACT	ION							
5-A. Code	5-B. Nature of Action				6-A. Cod	6-A. Code 6-B. Nature of Action								
190	PROVISIONAL A	APPT NTE	05/20/21		6.0.0	6.6.6.1								
5-C. Code Y7M	5-D. Legal Authority SCH C 213.33XX				6-C. Cod	e	6-D.	Legal Authority						
5-E. Code	5-F. Legal Authority				6-E. Cod	6-E. Code 6-F. Legal Authority								
7. FROM: Position Title and Number						15. TO: Position Title and Number SENIOR ADVISOR 90988438 083877								
8. Pay Plan   9. Occ. Code   10. Grade or Level   11. Step or Rate   12. Total Salary   13. Pay Basis					s 16. Pay Pla	17. Occ. 0				Rate 20. Total Salary/Award 21. Pay Basis 144,128.00 PA				
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basi	c Pay	12D. Other Pay	20A. Basic	Pay	2	0B. Locality Adj.	20C. A	dj. Basic Pay	20D. Other	Pay		
	.00			.00	110,40	50.00		33,668.00	144	,128.00	.00			
					OSEM Imm Of CHIEF	f of the Sec OF STAFF		F THE SECRE	ETARY					
EMPLOYEE	DATA				1113 030	1010200000	700000	11 02 2021						
23. Veterans Prefere	ence	5 - 10	-Point/Other		24. Tenu	re D – None	2 – Cone		ency Use		ns Preferenc	ce for RIF		
b)(6) 1 - None 2 - 5-Point	3 – 10–Point/Disability 4 – 10–Point/Compensab		-Point/Compensab	ole/30%	(b)(6)	(D)(G) I – Permanent 3 – Indefinite				(b)(6)				
27. FEGLI					28. Annu	itant Indicate	or			29. Pay Ra	te Determin	ant		
(b)(6) 30. Retirement Plan			21 Complex (	Comm. Data (Lea	32 Work	Schedule				22 Powt 7	ime Hours	Don		
(b)(6)			31. Service C	Comp. Date (Lea	F	FULL TIN	Æ			33. Fart-1	Biweekly Pay Period			
POSITION D	ATA										Tay Teriou			
34. Position Occupi			35. FLSA C	ategory	36. Appr	opriation Co	de			37. Bargai	ning Unit St	atus		
2 1 - Competitive 2 - Excepted Ser		and.	(b)(6)	- Exempt - Nonexempt							8888			
38. Duty Station Co	2.00	veu	39. Duty Sta	tion (City - Cou	ınty – State or	Overseas Lo	cation)							
11-0010-001			WASHING	GTON DIST	OF COLUM	BIA DC								
40. Agency Data	41.	42.		43.		44.								
FLEXIBLE SI YOU HAVE 60 TO ENROLL : ON/AFTER OO OPEN SEASON WWW.FSAFED FEDERAL DEN YOU HAVE 60 SUPPLEMENT: INFORMATION ENROLLMENT THRIFT SAV: YOU ARE EL: ENROLLED A' CONTRIBUTION	S CONTINUED * PENDING ACCOUNTY D DAYS FROM TO IN A HEALTH COON. IN TO GET MORE COM. ONLINE D DAYS FROM TO ALDENTAL AND N AND ENROLL IS MANDATORY INGS PLAN (TS) IGIBLE TO CONTINUED OF S CONTINUED OF	NT(FSA): HE DATE ARE OR D LL BE EL E INFORM ENROLLME ON PROGR HE DATE /OR VISI ONLINE, . P): TRIBUTE 3%. TO MPLETE A	EPENDEN' IGIBLE ' ATION AI NT IS MA AM (FED' OF HIRE ON PLAN VISIT WI TO TSP. INCREASI TSP-1	T CARE FS TO ENROLL ND ENROLL ANDATORY. VIP): TO ENROL . TO GET WW.BENEFE  YOU ARE E OR DECR AND SEND	A. IF HI DURING ONLINE, L IN A MORE DS.COM O AUTOMATI EASE YOU	RED THE FSA VISIT NLINE CALLY	ST							
46. Employing Depa								and Title of App	proving O	fficial				
HOMELAND S								GNED BY:						
47. Agency Code HSAA	48. Personnel Office I 5500	D	49. Approva					.E-PERRY DIRECTOR, H	IRMS					

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

## NOTIFICATION OF PERSONNEL ACTION

FPM Supp. 296-33, Sub							of Birth			7.			
1. Name (Last, First, Middle)					2. Social Security Number (b)(6)			→ <sup>4.1</sup>	4. Effective Date				
OLICK, KAREN													
FIRST ACTIO			SECOND ACTION										
5-A. Code 190	5-B. Nature of Action PROVISIONAL APPT N		6-A. Code 6-B. Nature of Action										
5-C. Code	5-D. Legal Authority		6-C. Code 6-D. Legal Authority										
Y7M	SCH C 213.33XX 5-F. Legal Authority												
5-E. Code	5-F. Legal Authorny					6-E. Code 6-F. Legal Authority							
7. FROM: Position	Fitle and Number	15. TO: Position Title and Number SENIOR ADVISOR 90988438 083877											
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. Step or Ra	ate 12. Total Salary	13. Pay Basis	16. Pay Plan GS	17. Occ. Code 0301	18. Grade or Level 19.Step 15 01					21. Pay Basis PA		
12A. Basic Pay	12B. Locality Adj. 12C. Adj									Adj. Basic Pay 20D. Other Pay 4,128.00 .00			
14. Name and Locat	ion of Position's Organization		22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM Imm Off of the Sec CHIEF OF STAFF  HS OS010102000000000 PP 02 2021										
EMPLOYEE	DATA												
23. Veterans Prefere		5 - 10-Point/Other		24. Tenure	one 2 – (	Conditional	25. Agency	_	Veterans P	referenc	e for RIF		
(b)(6) 1 - None 2 - 5-Point	4 – 10–Point/Compensable	6 - 10-Point/Compensable	/30%	(b)(6) 1 - Permanent 3 - Indefinite  28. Annuitant Indicator					(b)(6) 29. Pay Rate Determinant				
27. FEGLI (b)(6)				28. Annuitant	Indicator			29.	Pay Rate I	)etermin:	ant		
30. Retirement Plan		31. Service Co	omp. Date (Leave)	32. Work Sche	dule			33.	Part-Time	Hours P	'er		
(b)(6)				F FU	LL TIME					veekly y Period			
POSITION D										2.000			
2 1 - Competitive S	Service 3 – SES General		egory Exempt Nonexempt	36. Appropriation Code					37. Bargaining Unit Status 8888				
38. Duty Station Co.		39. Duty Stati	on (City – County ΓΟΝ DIST OF			1)							
	41			COLUMBIA	-								
40. Agency Data	41.	42.	43.		44.								
(b)(6) AUTOMATIC (	CONTINUED *** FERS EMPLOYEES ON: CONTRIBUTION OF 1% CO GET INFORMATION	OF YOUR PA	Y AND QUAL	IFY FOR U	P TO 4%	GENCY							
46. Employing Depar				50. Signature				ing Official					
HOMELAND SI				ELECTRO									
47. Agency Code HSAA	48. Personnel Office ID 5500	49. Approval		NICOLE C				ıc					
шала	5500	01/21/2021		ACTINGE	AECUIIVI	DIKECT	OK, HKM	13					

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 Birth 4. Effective Date										
1. Name (Last, First, Middle) OLICK, KAREN L					(b)(6) (b)(6)			DII (II	02/14/2021							
FIRST ACTIO					SECOND ACTION											
5-A. Code	5-B. Nature of Action				6-A. Code 6-B. Nature of Action											
002	CORRECTION									EER APPT						
5-C. Code	5-D. Legal Authority					le	6-D. L	egal Autho	rity							
								C 3394(A)								
5-E. Code 5-F. Legal Authority						i–E. Code 6–F. Legal Authority AWM OPM FORM 1652										
7. FROM: Position Title and Number SENIOR ADVISOR 90988438 083877						15. TO: Position Title and Number CHIEF OF STAFF 90959456 060837										
8. Pay Plan 9. Occ. Cod GS				13. Pay Basis PA	16. Pay Pla	17. Occ. 0	Code 18.	. Grade or Le	vel 19.Step or	Rate 20. Total Sa 183,100		21. Pay Basis PA				
12A. Basic Pay	12B. Locality Adj. 1	2C. Adj. Basic I	Pay 12	D. Other Pay	20A. Basic	Pay	20	B. Locality A	dj. 20C.	20C. Adj. Basic Pay 2		Pay				
110,460.00	33,668.00	144,128.00		.00	183,1	00.00		.00	18	3,100.00	.00					
	14. Name and Location of Position's Organization							IMMEDIATE OFFICE OF THE SECRETARY OSEM Imm Off of the Sec CHIEF OF STAFF  HS OS0101020000000000 PP 22 2021								
23. Veterans Prefere					24 75			25	A TI	26 11-4	D 6	f DIE				
(b)(6) 1 - None 2 - 5-Point	3 – 10–Point/Disability 4 – 10–Point/Compensable		oint/Other oint/Compensable/30	9%	<b>24. Tenu</b> (b)(6)	O None 2 Conditional			26. Veterans Preference for RIF (b)(6)							
27. FEGLI	-				28. Annuitant Indicator					29. Pay Rate Determinant						
(b)(6)																
(b)(6)		3	1. Service Con	np. Date (Leave)	F FULL TIME					33. Part-1	33. Part—Time Hours Per Biweekly Pay Period					
POSITION D	ATA										- 47 - 41104					
34. Position Occupi			35. FLSA Cate	empt	36. Appropriation Code					37. Bargaining Unit Status 8888						
3 2 - Excepted Ser  38. Duty Station Co		3	9. Duty Station	n (City – County			cation)			0000						
11-0010-001			VASHINGTO	ON DIST OF	COLUM											
40. Agency Data	41.	42.		43.		44.										
CORRECTS I	TEM 30 FROM (b)(6) TEM 31 FROM JSED FOR 5 USC		NOT APP	LICABLE T	O THE	SENIOR 1	EXECU	TIVE								
46. Employing Depa					_	ature/Auther				Official						
HOMELAND SI 47. Agency Code			40 4	Nata .		FRONICAI LE C. BARI										
HSAA	48. Personnel Office ID 5500	(	49. Approval I 02/15/2021	rate		LE C. BAKI UTIVE DIR										