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 Numb			ar 3. Date of Birth		4. Effective Date			
LEE, THEODORE T							(b) (6)			(b) (6)		07/22/2021			
FIRST	ACTIC	N	SECOND ACTION												
5-A. Cod 170	le	5-B. Nature of Action EXC APPT					6-A. Code 6-B. Nature of Action								
5-C. Cod Y7M		5-D. Legal Authority SCH C 213 3301 A					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 ADVSR 66237675 COM186								
8. Pay Plan	9. Occ. Code	2 10. Grade or Level 1	1. Step or Rate 12	2. Total Salary	13. Pay Basis	16. Pay Pla	an 1	7. Occ. Code 0301	18. Grade	or Level	19.Step or Ra	20. Total Sa 126,614		21. Pay Basis PA	
12A. Basic Pay		12B. Locality Adj. 12C. Adj. Ba		-	2D. Other Pay	20A. Basic Pay 97,037.00			20B. Loca 29,577			Basic Pay 20D. Other Pay 14.00 .00		Pay	
14. Name and Location of Position's Organization							22. Name and Location of Position's Organization								
			CM 52000000000000000000000000000000000000												
EMPLO	OYEE I	DATA				CM 529	CM 5299000000000000 PP 15 2021								
23. Veterans Preference 1 - None							re 0 – Noi		Conditional Indefinite	25. Age	ency Use	26. Veterar (b) (6	ns Preferenc	ce for RIF	
27. FEGLI (b) (6)							28. Annuitant Indicator 29. Pay Rate Determinant						nant R QUALIFICATI		
30. Retirement Plan 31. Service Comp. Date (Leave)							32. Work Schedule 33. Part-Time Hours Per								
(b) (6)							F FULL TIME						Biweekly Pay Period		
POSIT			26.4	•					25 D						
					egory xempt onexempt	36. Appropriation Code						37. Bargaining Unit Status 8888			
38. Duty S 11-0010-0		le	1	89. Duty Station (City – County WASHINGTON DIST OF C											
40. Agency	Data	41.	42.		43.			44.							
45. Remar	·ks				'										
		(b) (6	5)												
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46.5	-t D	<u> </u>	50.0		A41		41 6 4		* -! -1						
46. Employing Department or Agency DEPARTMENT OF COMMERCE							50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:								
47. Agency Code 48. Personnel Office ID 49. Appro-					Date	_	KURT BERSANI								
CM52 1426 08/04/2021							DIRECTOR, HCCS								