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46. Employing Depa DEPARTMENT 47. Agency Code HE36	rtment or Agency OF HEALTH AND HUM 48. Personnel Office ID 1189	IAN SERVICES 49. Approval D 09/22/2023		Е	0. Signature LECTROI DIRECTOR	NICALLY	SIGNE	ED BY: MI	ELAN		ELLER		

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5-A. Code 891	5-B. Nature of Action PERFORMANCE-BAS	SED PAY INC PRO	OVIDED ONREC	6-A. Co	le (5-B. Nature o	of Action			3-3-10-6	
5-C. Code Q3A	5-D. Legal Authority CITE APPROP LAW,	E.O. OR REG TH	AT AUTH THE A	6-C. Coo	le	6-D. Legal A	uthority		***************************************		
5-E. Code	5-F. Legal Authority			6-E. Coo	le	6-F. Legal A	uthority				
7. FROM: Position DIRECTOR, HC PD:ES7153 POSITION:0026	Œ			DIREC PD:ES7	Position Title an TOR, HCE 153 ION:00264538						
8. Pay Plan 9. Occ. Coo ES 1001	de 10. Grade or Level 11. Step o	Rate 12. Total Salary \$203,700.00	13. Pay Basis PA	16. Pay Pl	17. Occ. Coc 1001	le 18. Grade	or Level 1	9.Step or Rate	20. Total Sa \$212,10		21. Pay Basis PA
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46. Employing Depa	artment or Agency		5	50. Signatur	re/Authenticatio	n and Title o	f Approvir	ng Official			
	OF HEALTH AND HUN	MAN SERVICES	E	ELECTRO	ONICALLY S	IGNED BY	: MELA	NIE M. KE	LLER		
47. Agency Code HE36	48. Personnel Office ID 1189	49. Approval Dat 01/11/2023	te D	DIRECTO	R, OFF OF T	ALENT SO	OLUTI				
							Name and Address of the Owner, where		-		

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1. Name (Last, First CROSBY, KATH				Section 19 and 1	al Security N 2), (b) (6)	umber		AND DESCRIPTION OF THE PERSON	(6)			
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45. Remarks												
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DEPARTMENT OF HEALTH AND HUMAN SERVICES					ELECTRO	ONIC	thentication : ALLY SIG	NED BY	: MEL		ELLER		ALL PRINCES
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Standard Form 50 Rev. 7/91 U.S. Office of Personnel Management

1. Name (Last, First, Middle) 2. Social Security Number 3. Date of Birth 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/02/2022 10/05 01/05/2022 10/05/202	PA ther Pay
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5-B. Nature of Action PERFORMANCE-BASED PAY INC PROVIDED ONREG 5-C. Code Q3A CITE APPROP LAW, E.O. OR REG THAT AUTH THE A 5-E. Code 5-D. Legal Authority CITE APPROP LAW, E.O. OR REG THAT AUTH THE A 5-E. Code 5-E. Legal Authority 5-E. Code 5-E. Code 5-E. Legal Authority 5-E. Code 6-E. C	PA ther Pay
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241450031 SILVER SPRING MONTGOMERY MD USA	
40. Agency Data 41. 42. 43. 44. PAR NUMBER;	
45. Remarks HES SECRETARY APPROVED PERFORMANCE-BASED PAY ADJUSTMENT PURSUANT TO E.O. DECEMBER 22, 2021.	
46. Employing Department or Agency 50. Signature/Authentication and Title of Approving Official DEPARTMENT OF HEALTH AND HUMAN SERVICES ELECTRONICALLY SIGNED BY: MELANIE M. KELLER	

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47. Agency Code HE36	48. Personnel Office ID 1189	49. Appro-		DIREC	TOR, OFF	OF TAL	ENT SO	DLUTI	Į.				

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