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		
RODRIGUEZ, JASON					(b) (6)		(b) (6)		03/15/2021			
FIRST ACTION SECOND ACTION												
5-A. Code 146	5-B. Nature of Action SES NONCAREER APPT				6-A. Code 6-B. Nature of Action							
5-C. Code V4L	5-D. Legal Authority 5 USC 3394(A)				6-C. Code 6-D. Legal Authority			y				
5-E. Code 5-F. Legal Authority OPM FORM 1652					6-E. Code 6-F. Legal Authority							
7. FROM: Position Title and Number					15. TO: Position Title and Number CHIEF OF STAFF TO THE DEP SECY 66224944 ES0821							
8. Pay Plan 9. Occ. Code	10. Grade or Level 11. Step or	Rate 12. Total Salary	13. Pay Basis	16. Pay Pl ES	an 17. Oct		3. Grade or Level	19.Step or Ra	20. Total Sal 183,100.			
12A. Basic Pay	12B. Locality Adj. 12C. A	adj. Basic Pay	12D. Other Pay	20A. Basic Pay 183,100.00			OB. Locality Adj.	20C. Adj. Basic Pay 183,100.00		20D. Other Pay .00		
14. Name and Location of Position's Organization 22. Name and Location of Position's Organization OFFICE OF THE SECRETARY OFFICE OF THE DEPUTY SECRETARY CM 51030000000000000 PP 06 2021												
EMPLOYEE DATA												
23. Veterans Preference (b) (6)					24. Tenure 0 0 - None 2 - Conditional 25. Agency Use 25. Agency Use					26. Veterans Preference for RIF (b) (6)		
27. FEGLI (b) (6)					28. Annuitant Indicator 9 NOT APPLICABLE					29. Pay Rate Determinant 0 NOT APPLICABLE		
30. Retirement Plan (b) (6) (b)(6) 31. Service Comp. Date (Leav				32. Work Schedule F FULL TIME]	ime Hours Per Biweekly Pay Period		
POSITION DATA												
34. Position Occupie 1 - Competitive S 2 - Excepted Serv	ervice 3 – SES General	E E	E E Exempt N - Nonexempt		36. Appropriation Code				37. Bargaining Unit Status 8888			
38. Duty Station Coo 11-0010-001	le			- State or Overseas Location) COLUMBIA DC								
40. Agency Data 41. 42.			43.	44.								
45. Remarks (b) (6)												
(b) (6)												
(b) (6) (b) (6)												
46. Employing Department or Agency					nature/Anth	entication	and Title of A	oproving Off	icial			
DEPARTMENT OF COMMERCE					50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:							
47. Agency Code	48. Personnel Office ID											
CM51	1426	03/15/202	21	DIRECTOR, HCCS								