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

## NOTIFICATION OF PERSONNEL ACTION

11 M Supp. 250 55, Sub-	CH. 4										
1. Name (Last, First, Middle) BUCKLAND, KELLY JAY				2. Social Security Number (b) (6)		3. Date of Birth		4. Effective Date 09/26/2021			
- 2				. ,	. ,	TON	(b) (6)		09/26/	2021	
FIRST ACTIO	JN 5-B. Nature of Action		-	SECON 6-A. Code	D ACI		Jatura of Action				
5-A. Code 170	EXC APPT		6-A. Code 6-B. Nature of Action								
5-C. Code	5-D. Legal Authority			6-C. Code	6-C. Code 6-D. Legal Authority						
Y7M	SCH C, 213.3394 DTGS60787										
5-E. Code 5-F. Legal Authority				6-E. Code 6-F. Legal Authority							
7. FROM: Position	Title and Number			15. TO: Po:							
				DISABI	LITY PO	LICY	ADVISOR				
	7 7	79		7000	GS6078	- 40			ř.		
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. Step or Rate 1	2. Total Salary 13. Pay	Basis	16. Pay Plan GS	17. Occ. 0		8. Grade or Level	19.Step or Ra 01	\$144128		21. Pay Basis PA
12A. Basic Pay	12B. Locality Adj. 12C. Adj. Ba	sic Pay 12D. Other	Pay	20A. Basic Pa	y	2	0B. Locality Adj.	20C. Adj	Basic Pay	20D. Other	Pay
				\$110460	.00		\$33668.00	\$144	128.00	\$0.00	
14. Name and Locati	ion of Position's Organization			22. Name and Location of Position's Organization TD01 OFFICE OF THE SECRETARY							
							ADMINISTR	ATION			
						_					
				WASHIN	GTON,D	C					
EMPLOYEE	7////						9.		10		
23. Veterans Preference (b) 1-None 3-10-Point/Disability 5-10-Point/Other 2-5-Point 4-10-Point/Compensable 6-10-Point/Compensable/30%				24. Tenure (b) O-None 2-Conditional 3-Indefinite 25. Agency Use (b) YES (b) NO							
27. FEGLI		***************************************		28. Annuitant Indicator 29. Pay Rate Determinant					ant		
(b) (6)				(b) (6	,				(b) (6		
30. Retirement Plan		31. Service Comp. Date	(Leave)	ACCUPACION ACCUPACIONAL DE ACCUPACIONAL DE ACCUPACION DE CONTRA DE ACCUPACIONAL DE ACCUPACION DE ACC				ime Hours l Biweekly	Per		
(b) (6)		(b) (6)		F	ULL-TIN	ME				Pay Period	
POSITION D.  34. Position Occupie		25 FI SA C-4		26 1	detien Cer	1			27. Pi	.i Tii. Ca	
1 - Competitive Service 3 - SES General E - Exem				36. Appropriation Code				37. Bargaining Unit Status 8888			
2 2 - Excepted Services 38. Duty Station Cod		N - Nonexempt 00016  tty Station (City - County - State of			470.63						
11-0010-001	ue	WASHINGTON,DIS									
40. Agency Data FUNC CLS 00	(b) (6) 42. ED	UC LVL 17 ST	JPV ST	AT 8	44. POS	ITION	SENSITIVIT	Y HIGH R	ISK		
					-						
	AFFIDAVIT EXECUTED MILITARY SERVICE: (										
PREVIOUS RE	ETIREMENT COVERAGE:	b) (6)									
ELIGIBLE FOR SICK AND ANNUAL LEAVE											
EMPLOYEE SUBJECT TO DRUG TESTING AS PROVIDED IN THE DOT DRUGFREE DEPARTMENTAL WORKPLACE PLAN.											
YOU HAVE 60 DAYS FROM THE DATE OF THIS ACTION TO ENROLL IN THE FEDERAL EMPLOYEES DENTAL AND VISION PROGRAM (FEDVIP) AND THE											
FEDERAL EMPLOYEES LONG TERM CARE INSURANCE PROGRAM (FLTCIP).											
YOU HAVE 60 DAYS FROM THE DATE OF THIS ACTION OR UNTIL SEPTEMBER 30 OF THE PLAN YEAR TO ENROLL IN THE FLEXIBLE SPENDING ACCOUNT (FSA).											
REGISTRATION FOR HEALTH BENEFITS AND LIFE INSURANCE MUST BE RECEIVED											
BY HUMAN RESOURCES NLT 60 DAYS FROM THE EFFECTIVE DATE OF THIS ACTION YOU ARE AUTOMATICALLY ENROLLED IN THE THRIFT SAVINGS PLAN UNLESS											
YOU OPT OUT. A RATE OF 5 PERCENT WILL BE DEDUCTED FROM YOUR BASIC PAY. PLEASE CONTACT YOUR HUMAN RESOURCES OFFICE FOR MORE INFORMATION											
	GE CONTACT YOUR HUMA CONTINUED ON THE N		TCE I	FOR MOR	S INFO	RMA'I'I	.ON				
	Paragraphy Company						ations -				
46. Employing Department or Agency TD - OFFICE OF THE SECRETARY				50. Signature/Authentication and Title of Approving Official 211965501 / ELECTRONICALLY SIGNED BY:							
47. Agency Code 48. Personnel Office ID 49. Approval Date JOAN SIMPS						INON	ICALLI SIG	LU DI.			
TD01	3297	09/28/2021		STRATE		VISOP	FPRC				

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## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle)				2. Social Security Number 3. Date of Birth 4. Effective Date				Date		
BUCKLAND, KELLY JAY				(b) (6)		(b) (6)	09/26/20	09/26/2021		
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, 213.3394 DTGS60787	6-C. Code 6-D. Legal Authority								
5-E. Code 5-F. Legal Authority				6-E. Code 6-F. Legal Authority						
7. FROM: Position T	15. TO: Position Title and Number DISABILITY POLICY ADVISOR									
	7000 GS60787									
8. Pay Plan 9. Occ. Code	10. Grade or Level 11. Step or Rate 1	2. Total Salary 13	3. Pay Basis	16. Pay Plan 17. Occ. o GS 0301		Grade or Level 19.Sto	ep or Rate 20. Total Salar \$144128.0			
12A. Basic Pay	12B. Locality Adj. 12C. Adj. Ba	sic Pay 12D. (	Other Pay	20A. Basic Pay \$110460.00		3. Locality Adj. 2	20C. Adj. Basic Pay \$144128.00	20D. Other Pay \$0.00		
14. Name and Locati	on of Position's Organization			·			ψ144120.00	ψ0.00		
	on or control of gamzanon		22. Name and Location of Position's Organization TD01 OFFICE OF THE SECRETARY ASST SECRETARY FOR ADMINISTRATION WASHINGTON,DC							
EMPLOYEE I										
23. Veterans Prefere (b) 1 - None 2 - 5-Point	3 – 10–Point/Disability 5 – 1	0-Point/Other 0-Point/Compensable/30%		(b) 0 - None 1 - Permanent	2 – Conditi 3 – Indefin		Use 26. Veterans (b) YES	Preference for RIF  (b) NO		
27. FEGLI (b) (6)				(b) (6)	28. Annuitant Indicator (b) (6) (c) (b) (6)					
30. Retirement Plan		31. Service Comp.	Date (Leave)	32. Work Schedule			33. Part-Tim			
(b) (6)		(b) (6)		F FULL-TIN	МЕ			weekly ay Period		
POSITION DA										
34. Position Occupied  35. FLSA Category  1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved  E E - Exempt N - Nonexempt				36. Appropriation Co	de	37. Bargainin	37. Bargaining Unit Status 8888			
38. Duty Station Code 11-0010-001  39. Duty Station (City – County WASHINGTON,DISTRICT										
40. Agency Data FUNC CLS 00	41. (b) (6) ED	JC LVL 17	43. SUPV ST	44. FAT 8 POS	ITION SI	ENSITIVITY HI	IGH RISK			
SERVICE COU EMPLOYEE IS SALARY INCI	CONTINUED *** NTING TOWARD CAREER AUTOMATICALLY COVE	RED UNDER FE	RŠ, FĒR	S-RAE OR FERS % (IN BLOCK 2	0B)					
46. Employing Depar TD - OFFICE Of	50. Signature/Authentication and Title of Approving Official 211965501 / ELECTRONICALLY SIGNED BY:									
47. Agency Code TD01	48. Personnel Office ID 3297	49. Approval Date 09/28/2021	,	JOAN SIMPSON STRATEGIC ADVISOR, EPRC						