

## NOTIFICATION OF PERSONNEL ACTION

<b>1. Name (Last, First, Middle)</b> PALAFOX, CYNTHIA MICHELLE	<b>2. Social Security Number</b> (b)(6)	<b>3. Date of Birth</b> (b)(6)	<b>4. Effective Date</b> 03/29/2021
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FIRST ACTION		SECOND ACTION	
<b>5-A. Code</b> 170	<b>5-B. Nature of Action</b> EXC APPT	<b>6-A. Code</b>	<b>6-B. Nature of Action</b>
<b>5-C. Code</b> Y7M	<b>5-D. Legal Authority</b> SCH C, 213.3316 AGENCY- UNIQUE SCHEDULE C AU1	<b>6-C. Code</b>	<b>6-D. Legal Authority</b>
<b>5-E. Code</b> ZLM	<b>5-F. Legal Authority</b> OPM FORM 1019 DATED 03-16-2021	<b>6-E. Code</b>	<b>6-F. Legal Authority</b>

<b>7. FROM: Position Title and Number</b>	<b>15. TO: Position Title and Number</b> DIR OF SCHEDULING AND ADVANCE PD:GS0259 POSITION:00454060
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<b>8. Pay Plan</b>	<b>9. Occ. Code</b>	<b>10. Grade or Level</b>	<b>11. Step or Rate</b>	<b>12. Total Salary</b>	<b>13. Pay Basis</b>	<b>16. Pay Plan</b>	<b>17. Occ. Code</b>	<b>18. Grade or Level</b>	<b>19. Step or Rate</b>	<b>20. Total Salary/Award</b>	<b>21. Pay Basis</b>
GS	0301	14	01	\$122,530.00	PA	GS	0301	14	01	\$122,530.00	PA

<b>12A. Basic Pay</b>	<b>12B. Locality Adj.</b>	<b>12C. Adj. Basic Pay</b>	<b>12D. Other Pay</b>	<b>22. Name and Location of Position's Organization</b>  OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES IMMEDIATE OFFICE OF THE SECRETARY WASHINGTON DC USA
\$93,907.00		\$28,623.00	\$0	

### EMPLOYEE DATA

<b>23. Veterans Preference</b> (b)(6)	<b>24. Tenure</b> 3	<b>25. Agency Use</b>	<b>26. Veterans Preference for RIF</b> (b)(6)
<b>27. FEGLI</b> (b)(6)	<b>28. Annuitant Indicator</b> (b)(6)	<b>29. Pay Rate Determinant</b> (b)(6)	<b>30. Retirement Plan</b> (b)(6)
<b>31. Service Comp. Date (Leave)</b> (b)(6)	<b>32. Work Schedule</b> F FULL TIME	<b>33. Part-Time Hours Per Biweekly Pay Period</b>	

### POSITION DATA

<b>34. Position Occupied</b> 2	<b>35. FLSA Category</b> E	<b>36. Appropriation Code</b> 11990362
<b>37. Bargaining Unit Status</b> 8888	<b>38. Duty Station Code</b> 110010001	<b>39. Duty Station (City - County - State or Overseas Location)</b> WASHINGTON DIST COLUMBIA DC USA

<b>40. Agency Data</b>	<b>41.</b>	<b>42.</b>	<b>43.</b>	<b>44. PAR NUMBER:</b>
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**45. Remarks**  
 APPOINTMENT IS INDEFINITE.  
 APPOINTMENT AFFIDAVIT EXECUTED 03-29-2021.  
 CREDITABLE MILITARY SERVICE: (b)(6)  
 PREVIOUS RETIREMENT COVERAGE: (b)(6)  
 (b)(6)

<b>46. Employing Department or Agency</b> DEPARTMENT OF HEALTH AND HUMAN SERVICES	<b>50. Signature/Authentication and Title of Approving Official</b> ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES
<b>47. Agency Code</b> HE10	<b>48. Personnel Office ID</b> 1704
<b>49. Approval Date</b> 04/01/2021	