Standard Form 50 Rev. 7/91 U.S. Office of Personnel Management

NOTIFICATION OF PERSONNEL ACTION

DHS-001-01896-000088

1. Name (Last, First						2. Socia	l Security N	umber	3. Date of Bi	rth	4. Effectiv	e Date			
FERNANDEZ HERNAND, ANGELO						(b)(6)			(b)(6)	04/26	04/26/2021				
FIRST ACTIO	ON					SECO	ND ACT	ION			·				
5-A. Code	5-B. Nature of Action					6-A. Code		6-B. N	Nature of Action	n					
170 5-C. Code	EXC APPT					6-C. Code	,	6-D	Legal Authority	v					
Y7M	5-D. Legal Authority SCH C 213 3311						U-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									
The second secon						ASSISTANT PRESS SECRETARY 91006539 085178									
8. Pay Plan 9. Occ. Code 10. Grade or Level 11. Step or Rate 12. Total Salary 13. Pay Basis						16. Pay Pla	17. Occ.		8. Grade or Level	19.Step or 1	19.Step or Rate 20. Total Sale 02 75,176.00		21. Pay Basis PA		
12A. Basic Pay				12D. Other	Pay	20A. Basic	-	2	OB. Locality Adj.		dj. Basic Pay	20D. Othe	r Pay		
14 Nome or 3 Y	.00 tion of Position's Organ	dantie		.00		57,615		n of D	17,561.00 tion's Organiza		176.00	.00			
						OSEM Off of Pu	blic Affai	rs	F THE SECR PP 09 2021	RETARY					
EMPLOYEE															
23. Veterans Prefere (b)(6) 1 - None 2 - 5-Point								24. Tenure (b)(6) 0 - None 1 - Permanent 2 - Conditional 1 - Permanent 3 - Indefinite				26. Veterans Preference for RIF (b)(6)			
27. FEGLI (b)(6)						28. Annuitant Indicator 29. Pav Rate Determinant									
30. Retirement Plan	1		31. Service C	Comp. Date	(Leave)	32. Work	Schedule				33. Part-T	ime Hours	Per		
(b)(6)]	F FULL TIME					Biweekly Pay Period				
POSITION D	ATA											Tay Terroo	•		
34. Position Occupi			35. FLSA Ca	ategory		36. Appro	priation Co	de			37. Bargai	ning Unit S	tatus		
2 1 - Competitive 2 - Excepted Ser		rved		- Exempt - Nonexempt							8888				
38. Duty Station Co 11-0010-001	de		39. Duty Star WASHING					cation)							
40. Agency Data	41.	42.		43	3.		44.								
(b)(6)	NA CURRA L. HENY		T. T. O. (1919)												
YOU HAVE 60 COMPLETED 3 TO COMPARE WWW.OPM.GOV FEDERAL EMI YOU ARE AU3 DAYS FROM 3 YOUR COMPLI TO GET MORI HTTP://WWW FLEXIBLE SI	PLOYEES' HEAL O DAYS FROM T SF-2809 TO (b) PLANS AND GE V/INSURE PLOYEES' GROU TOMATICALLY E THE DATE OF H ETED SF-2817 E INFORMATION OPM.GOV/INSU PENDING ACCOU S CONTINUED O	HE DATE (6) T MORE I P LIFE I NROLLED IRE TO E TO ((b)(6) AND USE RE/LIFE. NT (FSA):	OF HIRE NFORMAT: NSURANCE IN BASIC LLECT OP:	TO ENFION, VI E (FEGI C COVER FIONAL (b)(6) GLI CAL	SIT LI): RAGE. COVE	YOU HARAGE. S	AVE 60 SEND								
46. Employing Depa HOMELAND S						50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:									
47. Agency Code 48. Personnel Office ID 49. Approval Date						NICOLE C. BARKSDALE-PERRY									
HSAA	5500 04/27/2021 EXECUTIVE DIRECTOR, HRMS														

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

NOTIFICATION OF PERSONNEL ACTION

DHS-001-01896-000089

FPM Supp. 296-33, Subc	h. 4														
1. Name (Last, First, Middle)						2. Social Security Number			th	4. Effective Date					
FERNANDEZ HERNAND, ANGELO						(b)(6)			(b)(6) 04/26/2						
FIRST ACTIO	SECOND ACTION														
5-A. Code 170	5-B. Nature of Action EXC APPT	6-A. Coo	le	6-B. Na	ature of Action										
5-C. Code Y7M	5-D. Legal Authority SCH C 213 3311	6-C. Code 6-			egal Authority										
5-E. Code	6-E. Coo	6-E. Code 6-F. Legal Authority													
7. FROM: Position Title and Number						15. TO: Position Title and Number ASSISTANT PRESS SECRETARY 91006539 085178									
8. Pay Plan 9. Occ. Code	2 10. Grade or Level 11.	Step or Rate 12.	Total Salary	13. Pay Basis	16. Pay Pl	an 17. Occ. 0	Code 18.	. Grade or Level	19.Step or Ra	75,176.0		21. Pay Basis PA			
12A. Basic Pay	12B. Locality Adj.	c Pay	12D. Other Pay	20A. Basic	Pay	20B. Locality Adj.		20C. Adj.	. Basic Pay	20D. Other	Pay				
	.00				57,61	5.00		17,561.00	75,17	76.00	.00				
14. Name and Location of Position's Organization EMPLOYEE DATA						22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM Off of Public Affairs HS OS010700000000000 PP 09 2021									
23. Veterans Preferen					24. Tenu	24. Tenure 25. Agency Use 26. Veterans Preference for RIF						e for RIF			
(b)(6) 1 - None 2 - 5-Point	3 – 10–Point/Disability 4 – 10–Point/Compensable		-Point/Other -Point/Compensa	ble/30%	(b)(6)	(b)(6) 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite				(b)(6)					
27. FEGLI					28. Annu	L itant Indicato	r			29. Pay Rat	e Determin	ant			
(b)(6)															
30. Retirement Plan			31. Service	Comp. Date (Leave)	32. Work Schedule F FULL TIME					33. Part-Time Hours Per Biweekly					
	1 T A				F	FULL III	IL.				Pay Period				
POSITION DA 34. Position Occupie			25 PT C1 C		26.4					25 D :					
2 1 - Competitive S 2 - Excepted Serv	ervice 3 – SES General	end .		- Exempt - Nonexempt	36. Appropriation Code					37. Bargaining Unit Status 8888					
38. Duty Station Cod 11-0010-001		veu .	39. Duty Sta	ation (City – County GTON DIST OF			ation)								
	41.	42.	WASHING	43.	COLUM	44.									
40. Agency Data	41.	42.		43.		44.									
45. Remarks *** REMARKS CONTINUED *** YOU HAVE 60 DAYS FROM THE DATE OF HIRE BUT NO LATER THAN OCT 1ST TO ENROLL IN A HEALTH CARE OR DEPENDENT CARE FSA. IF HIRED ON/AFTER OCT 1ST YOU WILL BE ELIGIBLE TO ENROLL DURING THE FSA OPEN SEASON. TO GET MORE INFORMATION AND ENROLL ONLINE, VISIT WWW.FSAFED.COM. ONLINE ENROLLMENT IS MANDATORY. FEDERAL DENTAL AND VISION PROGRAM (FEDVIP): YOU HAVE 60 DAYS FROM THE DATE OF HIRE TO ENROLL IN A SUPPLEMENTAL DENTAL AND/OR VISION PLAN. TO GET MORE INFORMATION AND ENROLL ONLINE, VISIT WWW.BENEFEDS.COM ONLINE ENROLLMENT IS MANDATORY. THRIFT SAVINGS PLAN (TSP): YOU ARE ELIGIBLE TO CONTRIBUTE TO TSP. YOU ARE AUTOMATICALLY ENROLLED AT THE RATE OF 3%. TO INCREASE OR DECREASE YOUR CONTRIBUTION AMOUNT, COMPLETE A TSP-1 AND SEND IT TO (DYG) [DYG) FERS EMPLOYEES ONLY: YOU WILL IMMEDIATELY RECEIVE AN AGENCY *** REMARKS CONTINUED ON THE NEXT PAGE ***															
46. Employing Department or Agency HOMELAND SECURITY						50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:									
47. Agency Code	48. Personnel Office II	D	49. Approv	al Date	NICOLE C. BARKSDALE-PERRY										
HSAA	5500		04/27/202		EXECUTIVE DIRECTOR, HRMS										

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

NOTIFICATION OF PERSONNEL ACTION

DHS-001-01896-000090

FPM Supp. 296-33, Sub-	ch. 4														
1. Name (Last, First, Middle)						2. Social Security Number			3. Date of Birth		4. Effective Date				
FERNANDEZ HERNAND, ANGELO						(b)(6)			(b)(6)		04/26/2021				
FIRST ACTION							ND ACT	ION							
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 3311						6-C. Code 6-D. Legal Authority								
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7. FROM: Position Title and Number						15. TO: Position Title and Number ASSISTANT PRESS SECRETARY 91006539 085178									
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. St	tep or Rate 12.	Total Salary	13. Pa	y Basis	16. Pay Pla	in 17. Occ.	Code 18	. Grade or Level	19.Step or Rat	te 20. Total Sal	ary/Award	21. Pay Basis		
						GS	0301		11	02	75,176.0	0	PA		
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basi	c Pay	12D. Othe	r Pay	20A. Basic Pay 20			B. Locality Adj.	20C. Adj.	Basic Pay	20D. Other	Pay		
	.00			.00		57,61	5.00		17,561.00	75,17	.00				
14. Name and Locat	14. Name and Location of Position's Organization						22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM Off of Public Affairs								
EMBLOVEE	D 4 70 4					HS OS0	107000000	000000	PP 09 2021						
EMPLOYEE DATA 23. Veterans Preference (b)(6) 1 - None							re 0 – None 1 – Permanent	2 – Cond 3 – Indef	itional	ency Use	26. Veterans Preference for RIF (b)(6)				
27. FEGLI						28. Annuitant Indicator 29. Pay Rate Determinant									
(b)(6)															
30. Retirement Plan			31. Service	Comp. Date	e (Leave)	32. Work Schedule					33. Part-Time Hours Per				
(b)(6)						F	FULL TI	ME			Biweekly Pay Period				
POSITION DA	ATA														
34. Position Occupie		Fa Fa	35. FLSA C			36. Appropriation Code					37. Bargaining Unit Status				
2 2 - Excepted Ser				– Exempt – Nonexempt							8888				
38. Duty Station Cod	le		39. Duty Sta					cation)							
11-0010-001	1.4		WASHING			COLUM									
40. Agency Data	41.	42.		4	13.		44.								
45. Remarks AUTOMATIC CONTRIBUTION OF 1% OF YOUR PAY AND QUALIFY FOR UP TO 4% MATCHING. TO GET INFORMATION, VISIT WWW.TSP.GOV/FORMS/TSPBK08.PDF FEDERAL LONG TERM CARE INSURANCE PROGRAM (FLTCIP) YOU HAVE 60 DAYS FROM THE DATE OF HIRE TO APPLY FOR COVERAGE USING THE ABBREVIATED UNDERWRITING APPLICATION. TO GET MORE INFORMATION AND APPLY ONLINE, VISIT WWW.LTCFEDS.COM. YOU MAY APPLY ONLINE OR DOWNLOAD AN APPLICATION.															
46. Employing Department or Agency HOMELAND SECURITY						50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:									
47. Agency Code 48. Personnel Office ID 49. Approval Date															
HSAA	5500		04/27/202		NICOLE C. BARKSDALE-PERRY EXECUTIVE DIRECTOR, HRMS										