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

1. Name (Last, First,		2. Social Security Number 3. Date of Birth 4. Effective Date							
GONZALUDO, A	(b) (6)	(b) (6) 01/31/2021							
FIRST ACTIO	DN		SECOND ACTION						
5-A. Code 002	5-B. Nature of Action CORRECTION		6-A. Code 170						
5-C. Code	5-D. Legal Authority		6-C. Code	6-D. Legal A	uthority				
			Y7M		.3394 (DTGS6069	99)			
5-E. Code	5-F. Legal Authority		6-E. Code	6-E. Code 6-F. Legal Authority					
7. FROM: Position 7	SPECIAL ASSIS								
			GS 0301	GS 0301 11 04 \$80027.00 PA					
12A. Basic Pay	12B. Locality Adj. 12C. Adj. Ba	sic Pay 12D. Other Pay	20A. Basic Pay \$61333.00						
	on of Position's Organization		TD01 OFFICE OF	22. Name and Location of Position's Organization TD01 OFFICE OF THE SECRETARY WASHINGTON,DC					
EMPLOYEE 1 23. Veterans Prefere			24 Tamura		25 Agonov Ugo	26. Veterans Preference for RIF			
(b) 1 - None 2 - 5-Point	3 – 10–Point/Disability 5 – 1	D-Point/Other D-Point/Compensable/30%	24. Tenure (b) 0 - None 1 - Permanent	2 – Conditional 3 – Indefinite	25. Agency Use	(b) YES (b) NO			
(b) (6)			28. Annuitant Indicat (b) (6)	28. Annuitant Indicator (b) (6) (c) (b) (6)					
30. Retirement Plan (b) (6)		31. Service Comp. Date (Lea (b) (6)		Biweekly					
POSITION D	ATA								
34. Position Occupie		35. FLSA Category	36. Appropriation Co	36. Appropriation Code 37. Bargaining Unit Status					
2 1 - Competitive S 2 - Excepted Ser		E - Exempt N - Nonexempt	0001686	0001686 8888					
38. Duty Station Co. 11-0010-001	le	39. Duty Station (City - Cou WASHINGTON,DISTR)	•						
40. Agency Data FUNC CLS 00	41. (b) (6) EDI	JC LVL 13 43. SUPV	STAT 8 POS						
		02/01/2021							
46. Employing Depa	rtment or Agency		50. Signature/Authe	ntication and Tit	le of Approving Off	ricial			
	F THE SECRETARY	_	210805009 / ELECTRONICALLY SIGNED BY:						
47. Agency Code	48. Personnel Office ID	JOAN SIMPSON	JOAN SIMPSON						
TD01	3297	04/07/2021	STRATEGIC AD	VISOR, EPRC	;				

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

1. Name (Last, First, Middle)			2. Social Security Number 3. Date of Birth 4. Effective Date								
GONZALUDO, ALEXIS CHRISTINA				(b) (6) (b) (6) 02/01/2021							
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					6-C. Code 6-D. Legal Authority						
Y7M	SCH C, 213.3394 (DTGS606	99)									
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							
				SPECIAL ASSISTANT TO THE SECRETARY							
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. Step or Rate	2. Total Salary 13.	Pay Basis	1000 GS60699							
8. Pay Plan 9. Occ. Code 10. Grade or Level 11. Step or Rate 12. Total Salary 13.			Tuy Dusis	GS	0301		1	04	\$80027.0	-	PA
12A. Basic Pay	12B. Locality Adj. 12C. Adj. Ba	sic Pay 12D. Ot	ther Pay					20C. Adj. \$8002	1j. Basic Pay 20D. Other Pay 027.00 \$0.00		
14. Name and Locat	ion of Position's Organization			22. Name and				7	27.00	ψ0.00	
					TD01 OFFICE OF THE SECRETARY WASHINGTON,DC						
EMPLOYEE											
23. Veterans Prefere (b) 1 - None 2 - 5-Point					24. Tenure (b) 0-None 2-Conditional 3-Indefinite 25. Agency Use (b) YES (b) NO						
27. FEGLI				28. Annuitant Indicator (b) (6) 29. Pay Rate Determinant (b) (6)							
(b) (6) 30. Retirement Plan 31. Service Comp. Date (Leave)											
(b) (6)		(b) (6)		F FULL-TIME Biweekly Pay Period							
POSITION D				I							
34. Position Occupie		35. FLSA Category E - Exempt		36. Appropriation Code 37. Bargaining Unit Status							
2 2 - Excepted Ser		E N - Nonexemp		0001686	erseas Loca	ition)			8888		
38. Duty Station Cod 11-0010-001	ie	WASHINGTON,I				ition)					
40. Agency Data FUNC CLS 00	41. (b) (6) ED	UC LVL 13	43. SUPV ST	AT 8	44. POSI	TION SE	NSITIVIT	Y CRITICA	AL-SENSI	TIVE	
45. Remarks APPOINTMENT AFFIDAVIT EXECUTED 02-01-21. CREDITABLE MILITARY SERVICE: PREVIOUS RETIREMENT COVERAGE ELIGIBLE FOR SICK AND ANNUAL LEAVE 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 EMPLOYEE SUBJECT TO DRUG TESTING AS PROVIDED IN THE DOT DRUGFREE DEPARTMENTAL WORKPLACE PLAN. *** REMARKS CONTINUED ON THE NEXT PAGE ***											
46. Employing Department or Agency TD - OFFICE OF THE SECRETARY				50. Signature/Authentication and Title of Approving Official 210432688 / ELECTRONICALLY SIGNED BY:							
47. Agency Code 48. Personnel Office ID 49. Approval Date				JOAN SIMPSON							
TD01	3297	02/10/2021		STRATEGIC ADVISOR, EPRC							

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

FPM Supp. 296-33, Sub	ch. 4									
1. Name (Last, First, Middle) GONZALUDO, ALEXIS CHRISTINA				2. Social Security Number (b) (6) 4. Effective Date (b) (6) 02/01/2021						
FIRST ACTION				SECOND ACTION						
5-A. Code 5-B. Nature of Action				6-A. Code		3. Nature of Action				
170	EXC APPT									
5-C. Code	5-D. Legal Authority	(00)		6-C. Code	6-	D. Legal Authority				
Y7M 5-E. Code	SCH C, 213.3394 (DTGS600 5-F. Legal Authority	599)		6-E. Code	6-	F. Legal Authority				
D El Code	o 11 Degai Maniority			0 27 23 3 27 27 27 27 27 27 27 27 27 27 27 27 27						
7. FROM: Position	Fitle and Number			15. TO: Position Title and Number SPECIAL ASSISTANT TO THE SECRETARY						
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. Step or Rate	12. Total Salary 13	. Pay Basis	1000 GS60699 16. Pay Plan 17. Occ. Code 18. Grade or Level 19. Step or Rate 20. Total Salary/Award 21. Pay Basis						
7 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	201 01 11 1 20 1 1 1 1 1 1 1 1 1 1 1 1 1	101111 5111111,	u,	GS	0301	11	04 \$8002			
12A. Basic Pay	12B. Locality Adj. 12C. Adj. I	Basic Pay 12D. O	ther Pay	20A. Basic Pay 20B. Locality Adj. 20C. Adj. Basic Pay 20D. Other Pay \$61333.00 \$18694.00 \$80027.00 \$0.00						
14. Name and Locat	ion of Position's Organization					osition's Organizat		ψ0.00		
						SECRETARY				
				WASHING	TON,DC					
EMPLOYEE	DATA									
23. Veterans Prefere	ence	- 10-Point/Other		24. Tenure	None 2 – 0	25. Age	ency Use 26. Veter	ans Preference for RIF		
(D) 2 - 5-Point	2 20 20110231011119	- 10-Point/Compensable/30%		(b) 1-	Permanent 3 - 1	Indefinite	()	(b) yes (b) no		
27. FEGLI (b) (6)				28. Annuitant Indicator (b) (6) (c) (b) (6)						
30. Retirement Plan		31. Service Comp. I	Date (Leave)							
(b) (6)		(b) (6)			JLL-TIME			Biweekly Pay Period		
POSITION D.	ATA	, , , ,								
34. Position Occupio	ed	35. FLSA Category	,	36. Appropri	ation Code		37. Barga	aining Unit Status		
2 1 - Competitive S 2 - Excepted Ser		E - Exempt N - Nonexen	npt	0001686						
38. Duty Station Co. 11-0010-001	de	39. Duty Station (Ci				1)				
40. Agency Data	41. 4	2.	43.		44.					
FUNC CLS 00	(b) (6)	DUC LVL 13	SUPV ST	TAT 8	POSITIO	N SENSITIVIT	Y CRITICAL-SENS	SITIVE		
45. Remarks REMARKS	S CONTINUED ***									
EMPLOYEE IS	S AUTOMATICALLY COVE LUDES A LOCALITY-BA					AE.				
SABAKI INCI	JODES A LOCALITI DA	JED PATRENT OF	50.40	0 (IN DL	OCK ZOB)					
46. Employing Department or Agency TD - OFFICE OF THE SECRETARY				50. Signature/Authentication and Title of Approving Official 210432688 / ELECTRONICALLY SIGNED BY:						
47. Agency Code	48. Personnel Office ID	49. Approval Date		JOAN SIN		MICALLI SIG	NED DI.			
TD01	3297		02/10/2021 STRATEGIC ADVISOR, EPRC							

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

FPM Supp. 296-33, Sub	ch. 4									
1. Name (Last, First, Middle) GONZALUDO, ALEXIS CHRISTINA				2. Social Security Number (b) (6) 3. Date of Birth (b) (6) 4. Effective Date 01/02/2022						
FIRST ACTIO	SECOND ACTION									
5-A. Code 894	5-B. Nature of Action GEN ADJ	6-A. Code 6-B. Nature of Action								
5-C. Code OWM	5-D. Legal Authority REG 531.207	6-C. Code	6-D. Lega	al Authority						
5-E. Code 5-F. Legal Authority ZLM E.O. 14061 DATED 12/22/21				6-E. Code 6-F. Legal Authority						
7. FROM: Position T SPECIAL ASSIS	Fitle and Number TANT TO THE SECRETARY			15. TO: Position Title and Number SPECIAL ASSISTANT TO THE SECRETARY						
1000 0000										
1000 GS6069 8. Pay Plan 9. Occ. Code		2. Total Salary	13. Pay Basis	1000 GS60699						
GS 0301		\$80027.00	PA	GS 0301 11 04 \$82443.00						
12A. Basic Pay \$61333.00	12B. Locality Adj. 12C. Adj. Ba \$18694.00 \$80027.0		12D. Other Pay \$0.00	20A. Basic Pay \$62680.00		Locality Adj. 9763.00	20C. Adj. Basic Pay \$82443.00	20D. Other Pay \$0.00		
14. Name and Locati TD01 OFFICE OI	22. Name and Location of Position's Organization TD01 OFFICE OF THE SECRETARY									
WASHINGTON,I				WASHINGTON,D	C					
23. Veterans Prefere				24 Tomano		25 Agon	ov Use 26 Vete	wans Duefenouse for DIE		
(b) 1 - None 2 - 5-Point	3 – 10–Point/Disability 5 – 1	0-Point/Other 0-Point/Compensable	e/30%	24. Tenure (b) 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite 25. Agency Use (b) YES (b) NO						
(b) (6)				28. Annuitant Indicator (b) (6) (29. Pay Rate Determinant (b)						
30. Retirement Plan (b) (6)		31. Service C (b) (6)	omp. Date (Leave)	32. Work Schedule F FULL-TIN	ИE		33. Part	Time Hours Per Biweekly Pay Period		
POSITION DA	ATA	. , , ,						14, 14110		
34. Position Occupie	d	35. FLSA Ca	tegory	36. Appropriation Co	de		37. Barg	gaining Unit Status		
2 1 - Competitive S 2 - Excepted Serv			Exempt Nonexempt	0001686			8888			
38. Duty Station Coc 11-0010-001	le			γ – State or Overseas Location) Γ OF COLUMBIA						
40. Agency Data FUNC CLS 00	41. (b) (6) ED	JC LVL 13	43. SUPV ST	44. POS	ITION SE	NSITIVITY	CRITICAL-SEN	SITIVE		
45 Remarks SALARY INCI RATE (OR OT	UDES A GENERAL INCRI	EASE OF 2	2.2 PERCENT OR THIS AR	AND, IF APPL	ICABLE,	A LOCAI	JITY PAYMENT	[/SUPPLEMENTAL		
46. Employing Department or Agency TD - OFFICE OF THE SECRETARY				50. Signature/Authentication and Title of Approving Official 220106236 / ELECTRONICALLY SIGNED BY:						
47. Agency Code	48. Personnel Office ID	ANNE H. AUDET								
TD01	3297	01/06/2022	۷	DOT AUTHORIZ	ANG OFFI	ICIAL				