

## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>LOPEZ, DIANA VILLARNOVO</b>				2. Social Security Number <b>(b)(6)</b>		3. Date of Birth <b>(b)(6)</b>		4. Effective Date <b>01/20/2021</b>				
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>							
5-A. Code <b>170</b>		5-B. Nature of Action <b>EXC APPT</b>			6-A. Code		6-B. Nature of Action					
5-C. Code <b>Y7M</b>		5-D. Legal Authority <b>SCH C, 213.3394 (DTGS60624)</b>			6-C. Code		6-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 <b>SENIOR ADVISOR TO THE ADMINISTRATOR</b>							
					<b>11000 GS60624</b>							
8. Pay Plan		9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
							<b>GS</b>	<b>0301</b>	<b>15</b>	<b>03</b>	<b>\$153737.00</b>	<b>PA</b>
12A. Basic Pay		12B. Locality Adj.	12C. Adj. Basic Pay		12D. Other Pay		20A. Basic Pay		20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay	
							<b>\$117824.00</b>		<b>\$35913.00</b>	<b>\$153737.00</b>	<b>\$0.00</b>	
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>TD05 OFFICE OF THE ADMINISTRATOR</b>							
					<b>WASHINGTON,DC</b>							
<b>EMPLOYEE DATA</b>												
23. Veterans Preference <b>(b)(6)</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>(b)(6)</b> - None 2 - Conditional 1 - Permanent 3 - Indefinite				25. Agency Use		26. Veterans Preference for RIF <b>(b)(6)</b> YES <b>(b)(6)</b> NO		
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> 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved			35. FLSA Category <b>E</b> E - Exempt N - Nonexempt			36. Appropriation Code <b>0034040</b>			37. Bargaining Unit Status <b>8888</b>			
38. Duty Station Code <b>11-0010-001</b>			39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON, DISTRICT OF COLUMBIA</b>									
40. Agency Data <b>FUNC CLS 00</b>		41. <b>(b)(6)</b>		42. <b>EDUC LVL 15</b>		43. <b>SUPV STAT 8</b>		44. <b>POSITION SENSITIVITY HIGH RISK</b>				
45. Remarks APPOINTMENT AFFIDAVIT EXECUTED 01-20-21. CREDITABLE MILITARY SERVICE: <b>(b)(6)</b> PREVIOUS RETIREMENT COVERAGE: ELIGIBLE FOR SICK AND ANNUAL LEAVE SCD SUBJECT TO CHANGE UPON VERIFICATION OF PRIOR SERVICE. DATE OF LAST EQUIVALENT INCREASE 01/20/21. EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS, FERS-RAE OR FERS-FRAE. 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 *** REMARKS CONTINUED ON THE NEXT PAGE ***												
46. Employing Department or Agency <b>TD - FRA</b>						50. Signature/Authentication and Title of Approving Official <b>210409011 / ELECTRONICALLY SIGNED BY:</b>						
47. Agency Code <b>TD05</b>		48. Personnel Office ID <b>4108</b>		49. Approval Date <b>01/20/2021</b>		JOAN SIMPSON STRATEGIC ADVISOR, EPRC						

**NOTIFICATION OF PERSONNEL ACTION**

1. Name (Last, First, Middle) <b>LOPEZ, DIANA VILLARNOVO</b>				2. Social Security Number <b>(b)(6)</b>		3. Date of Birth <b>(b)(6)</b>		4. Effective Date <b>01/20/2021</b>					
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>								
5-A. Code <b>170</b>		5-B. Nature of Action <b>EXC APPT</b>			6-A. Code		6-B. Nature of Action						
5-C. Code <b>Y7M</b>		5-D. Legal Authority <b>SCH C, 213.3394 (DTGS60624)</b>			6-C. Code		6-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 <b>SENIOR ADVISOR TO THE ADMINISTRATOR</b>								
					<b>11000 GS60624</b>								
8. Pay Plan		9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary		13. Pay Basis	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
								<b>GS</b>	<b>0301</b>	<b>15</b>	<b>03</b>	<b>\$153737.00</b>	<b>PA</b>
12A. Basic Pay		12B. Locality Adj.	12C. Adj. Basic Pay		12D. Other Pay		20A. Basic Pay		20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay		
							<b>\$117824.00</b>		<b>\$35913.00</b>	<b>\$153737.00</b>	<b>\$0.00</b>		
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>TD05 OFFICE OF THE ADMINISTRATOR</b>								
					<b>WASHINGTON,DC</b>								
<b>EMPLOYEE DATA</b>													
23. Veterans Preference <b>(b)(6)</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>(b)(6)</b> 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite			25. Agency Use	26. Veterans Preference for RIF <b>(b)(6)</b> YES <b>(b)(6)</b> NO				
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> 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved			35. FLSA Category <b>E</b> E - Exempt N - Nonexempt		36. Appropriation Code <b>0034040</b>			37. Bargaining Unit Status <b>8888</b>					
38. Duty Station Code <b>11-0010-001</b>			39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON, DISTRICT OF COLUMBIA</b>										
40. Agency Data <b>FUNC CLS 00</b>		41. <b>(b)(6)</b>		42. <b>EDUC LVL 15</b>	43. <b>SUPV STAT 8</b>	44. <b>POSITION SENSITIVITY HIGH RISK</b>							
45. Remarks *** REMARKS CONTINUED *** YOU ARE AUTOMATICALLY ENROLLED IN THE THRIFT SAVINGS PLAN UNLESS YOU OPT OUT. A RATE OF 3 PERCENT WILL BE DEDUCTED FROM YOUR BASIC PAY. PLEASE CONTACT YOUR HUMAN RESOURCES OFFICE FOR MORE INFORMATION. SALARY INCLUDES A LOCALITY-BASED PAYMENT OF 30.48% (IN BLOCK 20B)													
46. Employing Department or Agency <b>TD - FRA</b>					50. Signature/Authentication and Title of Approving Official <b>210409011 / ELECTRONICALLY SIGNED BY:</b>								
47. Agency Code <b>TD05</b>		48. Personnel Office ID <b>4108</b>	49. Approval Date <b>01/20/2021</b>		<b>JOAN SIMPSON</b> <b>STRATEGIC ADVISOR, EPRC</b>								

## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>LOPEZ, DIANA VILLARNOVO</b>				2. Social Security Number (b)(6)		3. Date of Birth (b)(6)		4. Effective Date <b>01/20/2021</b>		
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>					
5-A. Code <b>170</b>		5-B. Nature of Action <b>EXC APPT</b>			6-A. Code		6-B. Nature of Action			
5-C. Code <b>Y7M</b>		5-D. Legal Authority <b>SCH C, 213.3394 (DTGS60624)</b>			6-C. Code		6-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 <b>SENIOR ADVISOR TO THE ADMINISTRATOR</b>					
					<b>11000 GS60624</b>					
8. Pay Plan		9. Occ. Code		10. Grade or Level		11. Step or Rate		12. Total Salary		13. Pay Basis
<b>GS</b>		<b>0301</b>		<b>15</b>		<b>03</b>		<b>\$153737.00</b>		<b>PA</b>
12A. Basic Pay		12B. Locality Adj.		12C. Adj. Basic Pay		12D. Other Pay		20A. Basic Pay		20B. Locality Adj.
								<b>\$117824.00</b>		<b>\$35913.00</b>
								<b>\$153737.00</b>		<b>\$0.00</b>
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>TD05 OFFICE OF THE ADMINISTRATOR</b>					
					<b>WASHINGTON,DC</b>					
<b>EMPLOYEE DATA</b>										
23. Veterans Preference (b)(6) 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)(6) 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite			25. Agency Use		26. Veterans Preference for RIF (b)(6) YES (b)(6) NO	
27. FEGLI (b)(6)				28. Annuitant Indicator (b)(6)			29. Pay Rate Determinant (b)(6)			
30. Retirement Plan (b)(6)			31. Service Comp. Date (Leave) (b)(6)		32. Work Schedule <b>F FULL-TIME</b>		33. Part-Time Hours Per Biweekly Pay Period			
<b>POSITION DATA</b>										
34. Position Occupied 2 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved			35. FLSA Category <b>E</b> E - Exempt N - Nonexempt		36. Appropriation Code <b>0034040</b>			37. Bargaining Unit Status <b>8888</b>		
38. Duty Station Code <b>11-0010-001</b>			39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON, DISTRICT OF COLUMBIA</b>							
40. Agency Data <b>FUNC CLS 00</b>		41. (b)(6)		42. <b>EDUC LVL 15</b>		43. <b>SUPV STAT 8</b>		44. <b>POSITION SENSITIVITY HIGH RISK</b>		
45. Remarks APPOINTMENT AFFIDAVIT EXECUTED 01-20-21. CREDITABLE MILITARY SERVICE: (b)(6) PREVIOUS RETIREMENT COVERAGE: (b)(6) ELIGIBLE FOR SICK AND ANNUAL LEAVE SCD SUBJECT TO CHANGE UPON VERIFICATION OF PRIOR SERVICE. DATE OF LAST EQUIVALENT INCREASE 01/20/21. EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS, FERS-RAE OR FERS-FRAE. 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 *** REMARKS CONTINUED ON THE NEXT PAGE ***										
46. Employing Department or Agency <b>TD - FRA</b>					50. Signature/Authentication and Title of Approving Official <b>210409011 / ELECTRONICALLY SIGNED BY:</b>					
47. Agency Code <b>TD05</b>		48. Personnel Office ID <b>4108</b>		49. Approval Date <b>01/20/2021</b>		JOAN SIMPSON <b>STRATEGIC ADVISOR, EPRC</b>				

**NOTIFICATION OF PERSONNEL ACTION**

1. Name (Last, First, Middle) <b>LOPEZ, DIANA VILLARNOVO</b>				2. Social Security Number <b>(b)(6)</b>		3. Date of Birth <b>(b)(6)</b>		4. Effective Date <b>01/20/2021</b>				
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>							
5-A. Code <b>170</b>		5-B. Nature of Action <b>EXC APPT</b>			6-A. Code		6-B. Nature of Action					
5-C. Code <b>Y7M</b>		5-D. Legal Authority <b>SCH C, 213.3394 (DTGS60624)</b>			6-C. Code		6-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 <b>SENIOR ADVISOR TO THE ADMINISTRATOR</b>							
					<b>11000 GS60624</b>							
8. Pay Plan		9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
							<b>GS</b>	<b>0301</b>	<b>15</b>	<b>03</b>	<b>\$153737.00</b>	<b>PA</b>
12A. Basic Pay		12B. Locality Adj.	12C. Adj. Basic Pay		12D. Other Pay		20A. Basic Pay		20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay	
							<b>\$117824.00</b>		<b>\$35913.00</b>	<b>\$153737.00</b>	<b>\$0.00</b>	
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>TD05 OFFICE OF THE ADMINISTRATOR</b>							
					<b>WASHINGTON,DC</b>							
<b>EMPLOYEE DATA</b>												
23. Veterans Preference				24. Tenure				25. Agency Use		26. Veterans Preference for RIF		
<b>(b)(6)</b>	1 - None	3 - 10-Point/Disability	5 - 10-Point/Other	<b>(b)(6)</b>	0 - None	2 - Conditional			<b>(b)(6)</b>	YES	<b>(b)(6)</b> NO	
	2 - 5-Point	4 - 10-Point/Compensable	6 - 10-Point/Compensable/30%		1 - Permanent	3 - Indefinite						
27. FEGLI				28. Annuitant Indicator				29. Pay Rate Determinant				
<b>(b)(6)</b>				<b>(b)(6)</b>				<b>(b)(6)</b>				
30. Retirement Plan			31. Service Comp. Date (Leave)		32. Work Schedule			33. Part-Time Hours Per Biweekly Pay Period				
<b>(b)(6)</b>			<b>(b)(6)</b>		<b>F FULL-TIME</b>							
<b>POSITION DATA</b>												
34. Position Occupied				35. FLSA Category				36. Appropriation Code			37. Bargaining Unit Status	
<b>2</b>	1 - Competitive Service	3 - SES General		<b>E</b>	E - Exempt	N - Nonexempt		<b>0034040</b>			<b>8888</b>	
	2 - Excepted Service	4 - SES Career Reserved										
38. Duty Station Code <b>11-0010-001</b>				39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON, DISTRICT OF COLUMBIA</b>								
40. Agency Data <b>FUNC CLS 00</b>		41. <b>(b)(6)</b>		42. <b>EDUC LVL 15</b>		43. <b>SUPV STAT 8</b>		44. <b>POSITION SENSITIVITY HIGH RISK</b>				
45. Remarks APPOINTMENT AFFIDAVIT EXECUTED 01-20-21. CREDITABLE MILITARY SERVICE: <b>(b)(6)</b> PREVIOUS RETIREMENT COVERAGE: <b>(b)(6)</b> ELIGIBLE FOR SICK AND ANNUAL LEAVE SCD SUBJECT TO CHANGE UPON VERIFICATION OF PRIOR SERVICE. DATE OF LAST EQUIVALENT INCREASE 01/20/21. EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS, FERS-RAE OR FERS-FRAE. 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 *** REMARKS CONTINUED ON THE NEXT PAGE ***												
46. Employing Department or Agency <b>TD - FRA</b>						50. Signature/Authentication and Title of Approving Official <b>210409011 / ELECTRONICALLY SIGNED BY:</b>						
47. Agency Code <b>TD05</b>		48. Personnel Office ID <b>4108</b>		49. Approval Date <b>01/20/2021</b>		<b>JOAN SIMPSON</b> <b>STRATEGIC ADVISOR, EPRC</b>						