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

## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle)					Security Num				4. Effective Date			
LEGACKI, CAITLIN A				(b)	` /	(b) (6)			06/07/2021			
FIRST ACTION SECOND ACTION												
5-A. Code 170	5-B. Nature of Action EXC APPT				A. Code 6-B. Nature of Action							
5-C. Code Y7M	5-D. Legal Authority SCH C 213 3301 A				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 SENIOR ADVISOR (STRATEGIC COMMUNICATIO 66466305 COM840							
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. Step or I	Rate 12. Total Salary	13. Pay Basis	16. Pay Plan GS	17. Occ. Cod	18. Grade o		.Step or Rate	e 20. Total Sal 172,500.		21. Pay Basis PA	
12A. Basic Pay	ic Pay 12B. Locality Adj. 12C. Adj. Ba		12D. Other Pay	20A. Basic Pay 132,552.00		20B. Local 39,948		20C. Adj. Basic Pay 172,500.00		20D. Other	Pay	
14. Name and Location of Position's Organization  OFFICE OF THE SECRETARY IMMEDIATE OFFICE OFF OF COUNSELLOR/CH OF STAFF  CM 51010300000000000 PP 12 2021												
EMPLOYEE DATA												
23. Veterans Preference  (b) (6)					24. Tenure  25. Agency Use  26. Veterans Preference for RIF  1 - Permanent 3 - Indefinite  25. Agency Use  26. Veterans Preference for RIF						ce for RIF	
27. FEGLI (b) (6)					28. Annuitant Indicator 9 NOT APPLICABLE					29. Pay Rate Determinant  7 SUPERIOR QUALIFICATI		
30. Retirement Plan 31. Service Comp. Date (Leave)					32. Work Schedule 33. P					3. Part-Time Hours Per		
(b) (6) (b)(6)				F FULL TIME					Biweekly Pay Period			
POSITION DATA  34. Position Occupied 35. FLSA Category					oriation Code				37. Bargain	ing Unit St	entrue	
1 - Competitive S 2 - Excepted Ser	Service 3 – SES General	E-	E - Exempt		con appropriation code				8888			
38. Duty Station Coo 11-0010-001		1	tion (City – County TON DIST OF			on)						
40. Agency Data 41. 42.		42.	43.		44.							
45. Remarks												
(b) (6) (b) (6) (b) (6) (b) (6) (b) (6)  (b) (6)  (b) (6)  (c) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e												
DEPARTMENT OF COMMERCE					ELECTRONICALLY SIGNED BY:							
47. Agency Code CM51	48. Personnel Office ID 1426	49. Approva 06/15/202		KURT BERSANI DIRECTOR, HCCS								