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						2. Soci	al Securit	y Number	3. Date of B	irth	4. Effectiv	ve Date						
HIMMEL, CHLOE I						(b)(6)			(b)(6)		08/16	08/16/2021						
FIRST ACTIO	ON					SECOND ACTION												
5-A. Code	5-B. Nature of Action	1				6-A. Co	6-A. Code 6-B. Nature of Action											
170	EXC APPT																	
5-C. Code Y7M	5-D. Legal Authority SCH C 213 3311					6-C. Co	6-C. Code 6-D. Legal Authority											
5-E. Code 5-F. Legal Authority						6-E. Coo	6-E. Code 6-F. Legal Authority											
7. FROM: Position Title and Number						15. TO: Position Title and Number CHIEF OF STAFF 91021166 086186												
8. Pay Plan 9. Occ. Coo	de 10. Grade or Level 11	. Step or Rate 12.	Total Salary	13.	Pay Basis	16. Pay Pl		cc. Code 18	3. Grade or Leve	19.Step or 04	r Rate 20. Total Salary/Award 21. Pay Basis 158,541.00 PA							
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basi	c Pay		her Pay	20A. Basic	-		0B. Locality Adj		Adj. Basic Pay	20D. Other	Pay					
	.00			.00		121,5			37,035.00 tion's Organiz		8,541.00	.00						
14. Name and Location of Position's Organization						IMMEDIATE OFFICE OF THE SECRETARY OSEM Off of Legislative Affairs  HS OS010800000000000 PP 17 2021												
EMPLOYEE  23. Veterans Prefere						24. Tenu	re		25. A	gency Use	26. Vetera	ns Preferenc	ce for RIF					
(b)(6) 1 - None 2 - 5-Point	3 – 10–Point/Disability 4 – 10–Point/Compensab		-Point/Other -Point/Compense	able/30%		(b)(6)	(b)(6) 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite (b)(6)											
27. FEGLI						28. Annuitant Indicator 29. Pay Rate Determinant												
(b)(6)			21.6	G D		22 Word	. Cabadada				22 P 4 F							
30. Retirement Plan 31. Service Comp. Date (Leave)										33. Part-1	3. Part-Time Hours Per Biweekly							
POSITION D	АТА					F	FULL	IIVIE				Pay Period						
34. Position Occupi			35. FLSA (	Category		36. Appr	opriation	Code			37. Bargai	ning Unit St	atus					
2 1 - Competitive			(b)(6) F	E – Exempt N – Nonexemp								8888						
2 - Excepted Ser 38. Duty Station Co		rved	39. Duty St			– State or	Overseas	Location)			0000							
11-0010-001			WASHIN	GTON	DIST OF	COLUM	BIA DO	C										
40. Agency Data	41.	42.			43.		44											
(b)(b)	I AFFIDAVIT E																	
YOU HAVE 60 COMPLETED 3 TO COMPARE WWW.OPM.GOV FEDERAL EMITOU ARE AUTOUR COMPLITO GET MORITTP://WWWFLEXIBLE SI	PLOYEES' HEAL 0 DAYS FROM T SF-2809 TO YO PLANS AND GE V/INSURE PLOYEES' GROU IOMATICALLY E IHE DATE OF H ETED SF-2817 E INFORMATION .OPM.GOV/INSU PENDING ACCOU S CONTINUED O	HE DATE UR SERVI T MORE I P LIFE I NROLLED IRE TO E TO YOUR AND USE RE/LIFE. NT (FSA):	OF HIRE CING HF NFORMAT NSURANC IN BASI LECT OF SERVICI THE FE	TO E  BENE  TION,  EE (FE  C COV  TIONA  ING HR  GGLI C	FITS P VISIT GLI): ERAGE. L COVE BENEF	OC. YOU H RAGE. ITS PC	AVE 60 SEND	0										
46. Employing Depa HOMELAND S						50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:												
47. Agency Code	48. Personnel Office	ID	Agency Code 48. Personnel Office ID 49. Approval Date (SAA 5500 08/17/2021							NICOLE C. BARKSDALE-PERRY 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

FPM Supp. 296-33, Sub	och. 4					_						1,000	F 55 FF		
1. Name (Last, First, Middle)						2. Social Security Number 3. Date of Birth			th	4. Effective Date					
HIMMEL, CHLO	DE I					(b)(6) <b>08/16/2021</b>									
FIRST ACTIO	ON					SECO	ND AC	CTION							
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. Cod	6-C. Code 6-D. Legal Authority								
5-E. Code	5-F. Legal Authority					6-E. Cod	6-E. Code 6-F. Legal Authority								
7. FROM: Position Title and Number						15. TO: Position Title and Number CHIEF OF STAFF 91021166 086186									
8. Pay Plan   9. Occ. Code   10. Grade or Level   11. Step or Rate   12. Total Salary   13. Pay Basis						16. Pay Pla GS	in 17. O		Code 18. Grade or Level 19.Step or 15 04			Rate 20. Total Salary/Award 21. Pay Basis 158,541.00 PA			
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basi	c Pay	12D. Other	Pay	20A. Basic	20A. Basic Pay 20B. Locality Adj. 20C.			20C. Adj.	Basic Pay	20D. Other	Pay		
	.00			.00		121,506.00 37,035.00 158,541.00 .00									
14. Name and Location of Position's Organization						22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM Off of Legislative Affairs  HS OS010800000000000 PP 17 2021									
EMPLOYEE															
23. Veterans Preference  (b)(6)						<b>24. Tenu</b> (b)(6)	(I-) (C) 0 - None 2 - Conditional					(b)(6)	(6) Veterans Preference for RIF		
27. FEGLI						28. Annuitant Indicator 29. Pay Rate Determinant									
(b)(6)															
30. Retirement Plan (b)(6)	1		31. Service	Comp. Date	(Leave)							33. Part-Time Hours Per Biweekly			
	1.00.1					F	FULL 1	TIME					Pay Period		
POSITION D  34. Position Occupi				0.0		25.									
1 - Competitive			35. FLSA C	ategory – Exempt		36. Appropriation Code						37. Bargaining Unit Status			
2 2 - Excepted Ser		ved	(D)(O) N	- Nonexempt		y – State or Overseas Location)						8888			
38. Duty Station Co 11-0010-001	de		WASHING					,							
40. Agency Data	41.	42.		43	3.		44.	•							
YOU HAVE 60 TO ENROLL ON/AFTER 00 OPEN SEASON WWW.FSAFED FEDERAL DEN YOU HAVE 60 SUPPLEMENT INFORMATION ENROLLMENT THRIFT SAV YOU ARE EL ENROLLED A CONTRIBUTION BENEFITS PO	S CONTINUED ** O DAYS FROM THE IN A HEALTH CA CT 1ST YOU WIT N. TO GET MORE .COM. ONLINE HE NTAL AND VISIO O DAYS FROM THE AL DENTAL AND N AND ENROLL OF IS MANDATORY. INGS PLAN (TSE IGIBLE TO CONTINUED ON S CONTINUED ON	HE DATE ARE OR D LL BE EL E INFORM ENROLLME ON PROGR HE DATE /OR VISI ONLINE, P): FRIBUTE 3%. TO MPLETE A YEES ONL	EPENDEN IGIBLE ATION A NT IS M AM (FED OF HIRE ON PLAN VISIT W  TO TSP. INCREAS TSP-1 Y: YOU	T CARE TO ENRO ND ENRO ANDATOF VIP): TO ENF . TO GE WW.BENE  YOU AF E OR DE AND SEN WILL IM	FSA. DLL D DLL O RY. ROLL CT MO EFEDS RE AU CCREA	IF HI URING NLINE,  IN A RE .COM O  TOMATI SE YOU TO YO	RED THE FS VISIT NLINE CALLY R UR SEF	SA C							
46. Employing Depa HOMELAND S						_		hentication			proving Offi	cial			
47. Agency Code	48. Personnel Office II	D	49. Approv			NICOI	LE C. BA	RKSDAL	E-PERI	RY					
HSAA	5500 08/17/2021 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

	ch. 4														
1. Name (Last, First,	Middle)	2. Social Securi	ity Number	3. Date of Birt	h	4. Effective Date									
HIMMEL, CHLO	ΕI				(b)(6)		(b)(6)		08/16/20	021					
FIRST ACTIO	ON				SECOND A	SECOND ACTION									
5-A. Code 170	5-B. Nature of Action EXC APPT	n			6-A. Code	6-B. N	ature of Action								
5-C. Code Y7M	5-D. Legal Authority SCH C 213 3311	,			6-C. Code	6-C. Code 6-D. Legal Authority									
5-E. Code	6-E. Code 6-F. Legal Authority														
7. FROM: Position T	15. TO: Position Title and Number CHIEF OF STAFF 91021166 086186														
8. Pay Plan 9. Occ. Code	e 10. Grade or Level 11	. Step or Rate 12	. Total Salary	13. Pay Basis			3. Grade or Level	Grade or Level   19.Step or Rate   20. Total Salary/Award   21. Pay Ba							
								04	158,541.0		PA				
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Bas	ic Pay	12D. Other Pay	20A. Basic Pay					Basic Pay 20D. Other Pay					
14. Name and Locati	121,506.00 37,035.00 158,541.00 .00  22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM Off of Legislative Affairs														
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23. Veterans Prefere (b)(6)  1 - None 2 - 5-Point	24. Tenure (b)(6) 0 - None 1 - Perma	25. Age	ncy Use	26. Veterans Preference for RIF (b)(6)											
27. FEGLI (b)(6)					28. Annuitant Indicator 29. Pav Rate Determinant										
30. Retirement Plan			31. Service	Comp. Date (Leave)	32. Work Schedu	le			33. Part-Tim	ne Hours I	Per				
				Biweekly											
(b)(6)			DI BUTTE												
(b)(6)	A T A		DI SCI VICE			TIME				iweekly ay Period					
			35. FLSA (			TIME				ay Period	atus				
POSITION DA	ed Service 3 – SES General	erved	35. FLSA ((b)(6)		F FULL	TIME			P	ay Period	atus				
POSITION DA  34. Position Occupie  1 - Competitive S	ed  iervice 3 – SES General  vice 4 – SES Career Rese	erved	35. FLSA (b)(6)	Category E – Exempt	F FULL  36. Appropriation	n Code			37. Bargainir	ay Period	atus				
(b)(6)  POSITION DA  34. Position Occupie  1 - Competitive S  2 - Excepted Serv	ed  iervice 3 – SES General  vice 4 – SES Career Rese	erved	35. FLSA (b)(6)	Category E – Exempt N – Nonexempt	F FULL  36. Appropriation y – State or Oversea	n Code			37. Bargainir	ay Period	atus				
(b)(6)  POSITION DA  34. Position Occupie  2   1 - Competitive S 2 - Excepted Serv  38. Duty Station Coc	ed  iervice 3 – SES General  vice 4 – SES Career Rese	erved 42.	35. FLSA (b)(6)	Category  - Exempt - Nonexempt ation (City - County	F FULL  36. Appropriation y – State or Oversea COLUMBIA D	n Code			37. Bargainir	ay Period	atus				
(b)(6)  POSITION DA  34. Position Occupie  2 1- Competitive S 2- Excepted Serv  38. Duty Station Coc 11-0010-001  40. Agency Data  45. Remarks AUTOMATIC C MATCHING. I FEDERAL LON YOU HAVE 60 USING THE A INFORMATION	ed  ervice 3 – SES General  ice 4 – SES Career Rese	** OF 1% OF NATION, V INSURANCE THE DATE NDERWRIT	35. FLSA ( (b)(6)  39. Duty St  WASHING  YOUR F ISIT WW EE PROGF OF HIRE TING APP	Category E-Exempt N-Nonexempt ation (City - County GTON DIST OF  43.  PAY AND QUAI JW.TSP.GOV/F RAM (FLTCIP) C TO APPLY F PLICATION. T JW.LTCFEDS.C	F FULL  36. Appropriation  y - State or Oversea COLUMBIA D  A  JIFY FOR UP CORMS/TSPBKO  TOR COVERAGE TO GET MORE	n Code  s Location)  OC  14.			37. Bargainir	ay Period	atus				
(b)(6)  POSITION DA  34. Position Occupie  2 1- Competitive S 2-Excepted Serv  38. Duty Station Coc 11-0010-001  40. Agency Data  45. Remarks AUTOMATIC C MATCHING. I FEDERAL LON YOU HAVE 60 USING THE A INFORMATION APPLY ONLIN	ed dervice 3-SES General de 4-SES Career Reservice 41.  CONTINUED * CONTRIBUTION CO GET INFORM IG TERM CARE DO DAYS FROM TABBREVIATED UNITED AND APPLY CONTRIBUTION OF CONTRIBUTION CO GET INFORM IG TERM CARE DO DAYS FROM TABBREVIATED UNITED AND APPLY CONTRIBUTION OF CONT	** OF 1% OF NATION, V INSURANCE THE DATE NDERWRIT	35. FLSA ( (b)(6)  39. Duty St  WASHING  YOUR F ISIT WW EE PROGF OF HIRE TING APP	Category E-Exempt N-Nonexempt ation (City - County GTON DIST OF  43.  PAY AND QUAI JW.TSP.GOV/F RAM (FLTCIP) C TO APPLY F PLICATION. T JW.LTCFEDS.C	F FULL  36. Appropriation  y – State or Oversea COLUMBIA D  A  JIFY FOR UP FORMS/TSPBKO FOR COVERAGE COM. YOU MAY  50. Signature/A	TIME  n Code  is Location)  ic  it  TO 4%  08.PDF	and Title of App	proving Offi	37. Bargainir 8888	ay Period	atus				
(b)(6)  POSITION DA  34. Position Occupie  2 1- Competitive S 2-Excepted Serv  38. Duty Station Coc 11-0010-001  40. Agency Data  45. Remarks *** REMARKS AUTOMATIC C MATCHING. I FEDERAL LON YOU HAVE 60 USING THE A INFORMATION APPLY ONLIN	ed dervice 3-SES General de 4-SES Career Reservice 41.  CONTINUED * CONTRIBUTION CO GET INFORM IG TERM CARE DO DAYS FROM TABBREVIATED UNITED AND APPLY CONTRIBUTION OF CONTRIBUTION CO GET INFORM IG TERM CARE DO DAYS FROM TABBREVIATED UNITED AND APPLY CONTRIBUTION OF CONT	** OF 1% OF NATION, V INSURANC HE DATE NDERWRIT NLINE, V D AN APP	35. FLSA ( (b)(6)  39. Duty St  WASHING  YOUR F ISIT WW EE PROGF OF HIRE TING APP	Category E-Exempt A Nonexempt ation (City - County GTON DIST OF  43.  PAY AND QUAI IW.TSP.GOV/F RAM (FLTCIP) E TO APPLY F TURNING TO THE STATE OF TH	F FULL  36. Appropriation  y – State or Oversea COLUMBIA D  A  JIFY FOR UP FORMS/TSPBKO FOR COVERAGE CO GET MORE COM. YOU MAY	n Code  s Location)  C  44.  TO 4%  08.PDF  E	GNED BY:	proving Offi	37. Bargainir 8888	ay Period	atus				

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## NOTIFICATION OF PERSONNEL ACTION

FPM Supp. 296-33, Subc	h. 4													
1. Name (Last, First, Middle)							2. Social Security Number			th	4. Effective Date			
HIMMEL, CHLO	ΕI					(b)(6)			(b)(6)		08/29/2	2021		
FIRST ACTIO	N					SECO	SECOND ACTION							
5-A. Code 721	5-B. Nature of Action REASSIGNMENT					6-A. Cod	le	6-B. Na	ature of Action					
5-C. Code Y7M	5-D. Legal Authority SCH C 213 3311						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 CHIEF OF STAFF 91021166 086186						15. TO: Position Title and Number CHIEF OF STAFF 90851387 060421								
8. Pay Plan   9. Occ. Code   10. Grade or Level   11. Step or Rate   12. Total Salary   13. Pay Basis						16. Pay Pla	an 17. Oct		Grade or Level	19.Step or Ra	ate 20. Total Salary/Award 21. Pay B 158,541.00 PA		21. Pay Basis PA	
12A. Basic Pay	12B. Locality Adj. 12	2C. Adj. Basi	c Pay	12D. O	ther Pay	20A. Basic Pay 20B. Locality Adj. 20C. A				20C. Adj	. Basic Pay	20D. Other	Pay	
	.00			.00		121,5	06.00		37,035.00	158,5	541.00	.00		
14. Name and Location of Position's Organization						22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM Off of Legislative Affairs  HS OS010800000000000 PP 19 2021								
23. Veterans Preferen						24. Tenu	re		25. Ag	ency Use	26 Veteran	s Preferenc	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) 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite				ency ose	26. Veterans Preference for RIF (b)(6)			
27. FEGLI						28. Annuitant Indicator					29. Pay Rate Determinant			
(b)(6)														
30. Retirement Plan (b)(6)			31. Service	Comp. D	ate (Leave)	32. Work Schedule F FULL TIME					33. Part-Time Hours Per Biweekly			
POSITION DA	ТА					_	10221				Pay Period			
34. Position Occupie			35. FLSA C	ntagary		36 Appr	opriation (	'ada			37. Bargaining Unit Status			
2 1 - Competitive S 2 - Excepted Serv	ervice 3 – SES General	F	(b)(6)	– Exempt – Nonexem	pt	36. Appropriation Code					8888			
38. Duty Station Cod 11-0010-001					ty – County DIST OF			ocation)						
40. Agency Data	41.	42.			43.		44.							
	AT THE FULL P	ERFORM	ANCE LE	VEL C	DR BAND									
46. Employing Depar HOMELAND SE						_			and Title of Ap	proving Off	icial			
47. Agency Code	48. Personnel Office ID		49. Approv	al Date		NICOI	LE C. BA	RKSDALI	E-PERRY					
HSAA	5500	EXEC	UTIVE D	IRECTO	R, HRMS									