

## NOTIFICATION OF PERSONNEL ACTION

<b>1. Name (Last, First, Middle)</b> SCHECHTER, ALIA RACHEL	<b>2. Social Security Number</b> (b)(6)	<b>3. Date of Birth</b> (b)(6)	<b>4. Effective Date</b> 04/12/2021
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FIRST ACTION		SECOND ACTION	
<b>5-A. Code</b> 170	<b>5-B. Nature of Action</b> EXC APPT	<b>6-A. Code</b>	<b>6-B. Nature of Action</b>
<b>5-C. Code</b> Y7M	<b>5-D. Legal Authority</b> SCH C, 213.3316 AGENCY- UNIQUE SCHEDULE C AU1	<b>6-C. Code</b>	<b>6-D. Legal Authority</b>
<b>5-E. Code</b> ZLM	<b>5-F. Legal Authority</b> OPM FORM 1019 DATED 04-09-2021	<b>6-E. Code</b>	<b>6-F. Legal Authority</b>

<b>7. FROM: Position Title and Number</b>	<b>15. TO: Position Title and Number</b> SPECIAL ASSISTANT TO THE SECRETARY PD:HHS307 POSITION:00417547
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<b>8. Pay Plan</b>	<b>9. Occ. Code</b>	<b>10. Grade or Level</b>	<b>11. Step or Rate</b>	<b>12. Total Salary</b>	<b>13. Pay Basis</b>	<b>16. Pay Plan</b>	<b>17. Occ. Code</b>	<b>18. Grade or Level</b>	<b>19. Step or Rate</b>	<b>20. Total Salary/Award</b>	<b>21. Pay Basis</b>
						GS	0301	09	01	\$60,129.00	PA
<b>12A. Basic Pay</b>	<b>12B. Locality Adj.</b>	<b>12C. Adj. Basic Pay</b>	<b>12D. Other Pay</b>	<b>20A. Basic Pay</b>	<b>20B. Locality Adj.</b>	<b>20C. Adj. Basic Pay</b>	<b>20D. Other Pay</b>				
				\$46,083.00	\$14,046.00	\$60,129.00	\$0				

<b>14. Name and Location of Position's Organization</b>	<b>22. Name and Location of Position's Organization</b> OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES IMMEDIATE OFFICE OF THE SECRETARY WASHINGTON DC USA
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### EMPLOYEE DATA

<b>23. Veterans Preference</b> (b)(6) 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%	<b>24. Tenure</b> 3 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite	<b>25. Agency Use</b>	<b>26. Veterans Preference for RIF</b> (b)(6)
<b>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 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved	<b>35. FLSA Category</b> E E - Exempt N - Nonexempt	<b>36. Appropriation Code</b> 11990362	<b>37. Bargaining Unit Status</b> 8888
<b>38. Duty Station Code</b> 110010001		<b>39. Duty Station (City - County - State or Overseas Location)</b> WASHINGTON DIST COLUMBIA DC USA	

<b>40. Agency Data</b>	<b>41.</b>	<b>42.</b>	<b>43.</b>	<b>44. PAR NUMBER:</b>
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**45. Remarks**  
 APPOINTMENT IS INDEFINITE.  
 APPOINTMENT AFFIDAVIT EXECUTED 04-12-2021.  
 CREDITABLE MILITARY SERVICE: (b)(6)  
 PREVIOUS RETIREMENT COVERAGE: (b)(6)  
 (b)(6)

<b>46. Employing Department or Agency</b> DEPARTMENT OF HEALTH AND HUMAN SERVICES	<b>50. Signature/Authentication and Title of Approving Official</b> ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES
<b>47. Agency Code</b> HE10	<b>48. Personnel Office ID</b> 1704
<b>49. Approval Date</b> 04/20/2021	

### NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>SCHECHTER, ALIA RACHEL</b>	2. Social Security Number <b>(b)(6)</b>	3. Date of Birth <b>(b)(6)</b>	4. Effective Date <b>05/07/2022</b>
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FIRST ACTION		SECOND ACTION	
5-A. Code <b>352</b>	5-B. Nature of Action <b>TERMINATION-APPT IN (WH)</b>	6-A. Code	6-B. Nature of Action
5-C. Code <b>DBM</b>	5-D. Legal Authority <b>5 CFR PART 715 / AGY AUTH MOVE TO ANOTHER AC</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 <b>SPECIAL ASSISTANT TO THE SECRETARY PD:HHS307 POSITION:00417547</b>						15. TO: Position Title and Number					
8. Pay Plan <b>GS</b>	9. Occ. Code <b>0301</b>	10. Grade or Level <b>09</b>	11. Step or Rate <b>02</b>	12. Total Salary <b>\$64,012.00</b>	13. Pay Basis <b>PA</b>	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
12A. Basic Pay <b>\$48,667.00</b>	12B. Locality Adj. <b>\$15,345.00</b>	12C. Adj. Basic Pay <b>\$64,012.00</b>	12D. Other Pay <b>\$0</b>	20A. Basic Pay	20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay				

14. Name and Location of Position's Organization <b>OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES IMMEDIATE OFFICE OF THE SECRETARY WASHINGTON DC USA</b>						22. Name and Location of Position's Organization <b>TRANSFER TO: THE WHITE HOUSE OFFICE (WH)</b>					
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<b>EMPLOYEE DATA</b>											
23. Veterans Preference <b>(b)(6)</b>			24. Tenure <b>3</b>			25. Agency Use			26. Veterans Preference for RIF <b>(b)(6)</b>		
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					

34. Position Occupied <b>2</b>			35. FLSA Category <b>E</b>			36. Appropriation Code <b>21990362</b>			37. Bargaining Unit Status <b>8888</b>		
38. Duty Station Code <b>110010001</b>						39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON DIST COLUMBIA DC USA</b>					

40. Agency Data	41.	42.	43.	44. <b>PAR NUMBER:</b>
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45. Remarks  
FORWARDING ADDRESS: **(b)(6)**  
REASON FOR RESIGNATION: **(b)(6)**

46. Employing Department or Agency <b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b>				50. Signature/Authentication and Title of Approving Official <b>ELECTRONICALLY SIGNED BY: TISA TOLLIVER SUPERVISORY, HUMAN RESOURCES S</b>			
47. Agency Code <b>HE10</b>	48. Personnel Office ID <b>1704</b>	49. Approval Date <b>05/20/2022</b>					