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

NOTIFICATION OF PERSONNEL ACTION

SECOND ACTION	FPM Supp. 296-33, Subch. 4 1. Name (Last, First, Middle) COBLEY, BENJAMIN						2. Social Security Number 3. Date of Birth 4. Effective Date (b)(6) 02/16/2021							
Section Sect	FIRST ACTION													
SCH_C_123.33SCH_C_213.33I7 5-E_Code	5-A. Code	5-B. Nature of Action												
5-F. Code							de 6	6-D. Legal Authority						
SR DIR OF PICITAL STRATEGY	5-E. Code						6-E. Code 6-F. Legal Authority							
Exp Pair 2, Occ. Code 18, Grande tor Level 11, Steps or Rate 12, Total Salary 12, Differ 12, Occ. Code 18, Grande tor Level 18, Steps or Rate 22, Total Salary 12, Differ 12, Occ. Code 18, Grande tor Level 18, Steps or Rate 22, Total Salary 12, Differ 12, Occ. Code 18, Grande tor Level 18, Steps or Rate 22, Total Salary 12, Differ 12, Occ. Code 18, Grande tor Level 18, Steps or Rate 18, Code 18,	7. FROM: Position Title and Number						SR DIR OF DIGITAL STRATEGY							
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22. Name and Location of Position's Organization CDEO OFC OF COMMUNICATIONS & OUTREACH	2A. Basic Pay	12B. Locality Adj.	sic Pay	12D. Other Pay	20A. Basic	: Pay	20B. Locality		20C. Adj. Basic Pay		20D. Other Pay			
22. Vertex Preference 22. Tenure 23. Tenure 25. Agency Use 26. Vertex Preference for RI 25. February 35. February 36. Product Compensable (19%) February 36. Product Compensable (19%) February 36. Product Compensable (19%) February February 75. Agency Use Preference for RI 75. Product Compensable (19%) Preference for RI 75. Preference for RI Preference for RI 75. Preference for RI P						WASHI	INGTON,DC							
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29. Pay Rate Determinant Co BASIC ONLY 29. NOT APPLICABLE 0 30. Retirement Plan 31. Service Comp. Date (Leave) 32. Work Schedule 33. Part—Time Hours Per Bisveckly Pay Period 34. Position Occupied 35. FLSA Category 36. Appropriation Code 37. Bargaining Unit Status 2 2 - Except Service 4 - SIS Career Reserved 39. Duty Station (City - County - State or Overseas Location) WASHINGTON, DISTRICT OF COLUMBIA 40. Agency Data FUNC CLS 00 41. VET STATP 42. SUPV STAT 8 43. SUPV STAT 8 44. POSITION SENSITIVITY NONSENSITIVE/LOW RI 45. POSITION SENSITIVITY NONSENSITIVE/LOW RI 46. Employing Department or Agency ED - OFC OF COMM & OUTREACH 59. Signature/Authentication and Title of Approving Official 210-09891 / ELECTRONICALLY SIGNED BY:	1 - None 3 - 10-Point/Disability 5 - 10-Point/Other						0 - None 2 - Conditional							
31. Service Comp. Date (Leave) 32. Work Schedule 33. Part-Time Hours Per 34. Position Occupied 34. Position Occupied 35. FLSA Category 36. Appropriation Code 2	·													
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A3. Position Occupied 1- Competition Service 3- SSS General 2- Exempt 3- SSS General 4- SSS Career Reserved 8- SSS General 3- SSS General 4- SSS Career Reserved 8- SSS General 4- SSS Career Reserved 8- SSS General 3- SSS General 4- SSS Career Reserved 8- SSS General 8- SSS General 4- SSS Career Reserved 8- SSS General 8- SSS General 4- SSS General 4- SSS General 4- SSS General 4- SSS General 8- SS											Biweekly			
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40. Agency Data 41. 42. 43. SUPV STAT 8 44. POSITION SENSITIVITY NONSENSITIVE/LOW RI 45. Remarks. APPOINTMENT AFFIDAVIT EXECUTED 02/16/21. CREDITABLE MILITARY SERVICE: 03 YRS 11 MOS PREVIOUS RETIREMENT COVERAGE: NEVER COVERED FROZEN SERVICE 0000 EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS, FERS-RAE OR FERS-FRAE. OPM FORM 1019 DATED 2/16/21. DATE OF LAST EQUIVALENT INCREASE 02/16/21. 46. Employing Department or Agency ED-OFC OF COMM & OUTREACH 50. Signature/Authentication and Title of Approving Official 210498891/ELECTRONICALLY SIGNED BY:	38. Duty Station C		39. Duty St	ation (City - County	- State or Overseas Location)									
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PREVIOUS RETIREMENT COVERAGE: NEVER COVERED FROZEN SERVICE 0000 EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS, FERS-RAE OR FERS-FRAE. OPM FORM 1019 DATED 2/16/21. DATE OF LAST EQUIVALENT INCREASE 02/16/21. 46. Employing Department or Agency ED - OFC OF COMM & OUTREACH 50. Signature/Authentication and Title of Approving Official 210498891 / ELECTRONICALLY SIGNED BY:														
ED - OFC OF COMM & OUTREACH 210498891 / ELECTRONICALLY SIGNED BY:	PREVIOUS F FROZEN SEF EMPLOYEE I OPM FORM 1	RETIREMENT CO RVICE 0000 IS AUTOMATICA 1019 DATED 2/	VERAGE: N LLY COVER 16/21.	NEVER CO	NOS OVERED ER FERS, FER	S-RAE	OR FERS-FI	RAE.						
47. Agency Code 48. Personnel Office ID 49. Approval Date ANTONIA HARRIS				49. Appro	val Date	210498	8891 / ELECTR		-	7	icial .			