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

## NOTIFICATION OF PERSONNEL ACTION

FPM Supp. 296–33, Sub	cn. 4												
1. Name (Last, First, Middle)					2. Social Security Number			3. Date of Birth			4. Effective Date		
TODACHEENE, HEIDI J					(b) (6) 05/24/2021								
FIRST ACTIO		1	OND AC										
5-A. Code 170	5-B. Nature of Action EXC APPT			6-A. Co	de	6-B.	Nature of	Action					
5-C. Code Y7M	5-D. Legal Authority SCH C, 213.3312				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 TO THE ASSISTANT SECRETARY- INDIAN AFFAIRS 50000000 IGS1574								
8. Pay Plan 9. Occ. Cod	10. Grade or Level 11. Step or Rat	e 12. Total Salary	13. Pay Basis	16. Pay Plan   17. Occ. Code   1   GS     0301		18. Grade o 15	or Level 1	19.Step or Rate   20. Total Salary/Award   21.   01   \$144128.00			21. Pay Basis PA		
12A. Basic Pay	12B. Locality Adj. 12C. Adj.	Basic Pay	12D. Other Pay	20A. Basic Pay \$110460.00			20B. Locali			. Basic Pay 128.00			
14. Name and Locat	22. Name and Location of Position's Organization IN01 ASST SECY-INDIAN AFFAIRS  WASHINGTON,DC												
EMPLOYEE	DATA			•									
23 Veterans Preference					0 – None 1 – Permane				ncy Use	26. Veterans Preference for RIF  (b) (6) YES (b) (6) NO			
27 FEGLI					28. Annuitant Indicator  29. Pay Rate Determinant								
30. Retirement Plan 31. Service Comp. Date (Leave)					(D) (O)								
(b) (6) 01/05/2019				F FULL-TIME Biweekly Pay Period									
POSITION D	ATA												
1 - Competitive Service 3 - SES General			egory Exempt	36. Appr	36. Appropriation Code					37. Bargaining Unit Status 8888			
2 2 - Excepted Ser  38. Duty Station Co	14-1	N - Nonexempt  39. Duty Station (City - County											
11-0010-001 WASHINGTON, DISTRICT OF COLUMBIA													
40. Agency Data FUNC CLS 00 41 EDUC LVL 21 SUPV S					44. POSITION SENSITIVITY HIGH RISK								
45.Remarks APPOINTMENT AFFIDAVIT EXECUTED 05/24/21.  CREDITABLE MILITARY SERVICE: 5)(6) PREVIOUS RETIREMENT COVERAGE: PREVIOUSLY COVERED EMPLOYEE DUTY STATION IS IN REGION 01 - NORTH ATLANTIC - APPALACHIAN ELIGIBLE TO ELECT HEALTH BENEFITS COVERAGE WITHIN 60 DAYS OF THE EFFECTIVE DATE OF THIS PERSONNEL ACTION. AN ELECTION MUST BE MADE EVEN IF IT'S TO DECLINE HEALTH BENEFITS COVERAGE. IF YOU DON'T MAKE AN ELECTION, YOU ARE CONSIDERED TO HAVE DECLINED COVERAGE. POSITION IS AT THE FULL PERFORMANCE LEVEL OR BAND. EMPLOYEE IS AUTOMATICALLY COVERED UNDER (5)(6)													
46. Employing Department or Agency					50. Signature/Authentication and Title of Approving Official								
IN - OFC OF THE SECRETARY  47. Agency Code 48. Personnel Office ID 49. Approval Date					210940194 / ELECTRONICALLY SIGNED BY: ERICA J. WILLIAMS								
IN01	48. Personnel Office ID 4342	49. Approval 04/30/2021		HUMAN RESOURCES SPECIALIST									