

# NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>DANIEL-DAVIS, LAURA E.</b>		2. Social Security Number <b>(b) (6)</b>	3. Date of Birth <b>(b) (6)</b>	4. Effective Date <b>08-22-93</b>
<b>FIRST ACTION</b>		<b>SECOND ACTION</b>		
5-A. Code <b>570</b>	5-B. Nature of Action <b>CONV TO EXC APPT</b>	6-A. Code	6-B. Nature of Action	
5-C. Code <b>Y7M</b>	5-D. Legal Authority <b>SCH C 213.3312</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>DEPUTY SCHEDULER</b> <b>10000 -93-194</b>					15. TO: Position Title and Number <b>DEPUTY SCHEDULER</b> <b>10000 -93-205</b>						
8. Pay Plan <b>GS</b>	9. Occ. Code <b>0301</b>	10. Grade/Level <b>08</b>	11. Step/Rate <b>01</b>	12. Total Salary <b>\$25159</b>	13. Pay Basis <b>PA</b>	15. Pay Plan <b>GS</b>	17. Occ. Code <b>0301</b>	18. Grade/Level <b>08</b>	19. Step/Rate <b>01</b>	20. Total Salary/Award <b>\$25159</b>	21. Pay Basis <b>PA</b>
12A. Basic Pay <b>\$25159</b>	12B. Locality Adj. <b>\$0</b>	12C. Adj. Basic Pay <b>\$25159</b>	12D. Other Pay <b>\$0</b>		20A. Basic Pay <b>\$25159</b>	20B. Locality Adj. <b>\$0</b>	20C. Adj. Basic Pay <b>\$25159</b>	20D. Other Pay <b>\$0</b>			

14. Name and Location of Position's Organization <b>SECRETARY'S IMMEDIATE OFFICE WASHINGTON, D.C.</b>					22. Name and Location of Position's Organization <b>SECRETARY'S IMMEDIATE OFFICE WASHINGTON, D.C.</b>				
--	--	--	--	--	--	--	--	--	--

### EMPLOYEE DATA

23. Veterans Preference <input checked="" type="checkbox"/> 1 - None <input type="checkbox"/> 2 - 5-Point <input type="checkbox"/> 3 - 10-Point/Disability <input type="checkbox"/> 4 - 10-Point/Compensable <input type="checkbox"/> 5 - 10-Point/Other <input type="checkbox"/> 6 - 10-Point/Compensable/30%	24. Tenure <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 0 - None <input type="checkbox"/> 1 - Permanent <input type="checkbox"/> 2 - Conditional <input type="checkbox"/> 3 - Indefinite	25. Agency Use <input type="checkbox"/> F <input checked="" type="checkbox"/> BEX	26. Veterans Preference for RIF <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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>06-01-93</b>	32. Work Schedule <input type="checkbox"/> F <input checked="" type="checkbox"/> FULL - TIME	33. Part-Time Hours Per Biweekly Pay Period
34. Position Occupied <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 1 - Competitive Service <input type="checkbox"/> 2 - Excepted Service <input type="checkbox"/> 3 - SES General <input type="checkbox"/> 4 - SES Career Reserved	35. FLSA Category <input checked="" type="checkbox"/> E <input type="checkbox"/> E - Exempt <input type="checkbox"/> N - Nonexempt	36. Appropriation Code	37. Bargaining Unit Status <b>8888</b>
38. Duty Station Code <b>11-0010-001</b>	39. Duty Station (City - County - State or Overseas Location) <b>WASHINGTON DC, DISTRICT OF COLUMBIA, DC</b>		
40. AGENCY DATA CLS. <b>00</b>	41. EDUC. LVL. <b>(b) (6)</b>	42. EMPV. IND. <b>13</b>	43. POSITION-SENSITIVITY <b>CRITICAL SENSITIVE</b>

45. Remarks  
EMPLOYEE IS AUTOMATICALLY COVERED UNDER **(b) (6)**.  
**(b) (6)**  
FROZEN SERVICE **(b) (6)**  
CREDITABLE MILITARY SERVICE: **(b) (6)**  
PREVIOUS RETIREMENT COVERAGE: **(b) (6)**

46. Employing Department or Agency <b>INT-OFC OF THE SECT'Y</b>			50. Signature/Authentication and Title of Approving Official <b>01841DC7859L</b> <i>[Signature]</i> <b>AUTHORIZING OFFICIAL</b>	
47. Agency Code <b>IN01</b>	48. Personnel Office ID <b>1841</b>	49. Approval Date <b>08-20-93</b>		