

## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) <b>BEECH, MARY</b>				2. Social Security Number <b>(b) (6)</b>		3. Date of Birth <b>(b) (6)</b>		4. Effective Date <b>01/25/2021</b>						
<b>FIRST ACTION</b>					<b>SECOND ACTION</b>									
5-A. Code <b>170</b>		5-B. Nature of Action <b>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 3315</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					15. TO: Position Title and Number <b>CHIEF OF STAFF 66428054 C21287</b>									
8. Pay Plan		9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary		13. Pay Basis	16. Pay Plan <b>GS</b>		17. Occ. Code <b>0301</b>	18. Grade or Level <b>15</b>	19. Step or Rate <b>01</b>	20. Total Salary/Award <b>144,128.00</b>	21. Pay Basis <b>PA</b>
12A. Basic Pay		12B. Locality Adj. <b>.00</b>	12C. Adj. Basic Pay		12D. Other Pay <b>.00</b>		20A. Basic Pay <b>110,460.00</b>		20B. Locality Adj. <b>33,668.00</b>	20C. Adj. Basic Pay <b>144,128.00</b>	20D. Other Pay <b>.00</b>			
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization <b>EMPLOYEE BENEFITS SECURITY OFC OF THE ASST SECRETARY</b>  <b>DL PW0100000000000000 PP 02 2021</b>									
<b>EMPLOYEE DATA</b>														
23. Veterans Preference <b>1</b> 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%				24. Tenure <b>3</b> 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite			25. Agency Use		26. Veterans Preference for RIF <input type="checkbox"/> YES <input checked="" type="checkbox"/> X NO					
27. FEGLI <b>(b) (6)</b>				28. Annuitant Indicator <b>9</b> NOT APPLICABLE			29. Pay Rate Determinant <b>0</b> NOT APPLICABLE							
30. Retirement Plan <b>KF FERS (FRAE)</b>			31. Service Comp. Date (Leave) <b>01/25/2021</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</b> 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserve			35. FLSA Category <b>E</b> E - Exempt 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 DIST OF COLUMBIA DC</b>											
40. Agency Data		41.	42.	43.		44.								
45. Remarks APPOINTMENT AFFIDAVIT EXECUTED FROZEN SERVICE: YRS. MOS. CREDITABLE MILITARY SERVICE: YRS. MOS. PREVIOUS RETIREMENT COVERAGE:														
46. Employing Department or Agency <b>DEPARTMENT OF LABOR</b>					50. Signature/Authentication and Title of Approving Official <b>ELECTRONICALLY SIGNED BY:</b>									
47. Agency Code <b>DLPW</b>		48. Personnel Office ID <b>1193</b>		49. Approval Date <b>01/25/2021</b>	<b>DEMEATRIC GAMBLE PERSONNEL OFFICER</b>									