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

## NOTIFICATION OF PERSONNEL ACTION

FPM Supp. 296-33, Subch. 4  1. Name (Last, First, Middle)  HARDMAN, LATRICIA					2. Social Security Number 3. Date of Birth 4. Effective Date (b)(6) 02/16/2021								
FIRST ACTI						ND ACTIO	N	N-1/-/		ZU	300 T		
5-A. Code 170	5-B. Nature of Action EXC APPT					6-A. Code 6-B. Nature of Action							
5-C. Code Y7M	5-D. Legal Authority SCH C, 213.33SCH C 213.3317				6-C. Co	le 6-	6-D. Legal Authority						
5-E. Code	5-F. Legal Authority					6-E. Code 6-F. Legal Authority							
7. FROM: Position	Title and Number				CON	Position Title and FIDENTIAL AS			-			Ī	
8. Pay Plan 9. Occ. Code 10. Grade or Level 11. Step or Rate 12. Total Salary 13. Pay Basis					EE 16. Pay Pl GS	Plan 17. Occ. Code 18. Grade or Level 19.Step or Rate 20. Total Salary/Award 2						21. Pay Basis PA	
2A. Basic Pay	12B. Locality Adj.	12C. Adj. Bas	ic Pay	12D. Other Pay	20A. Basic \$5575			ocality Adj. 5994.00		i. Basic Pay	20D. Other P \$0.00	ay	
					WASH	NGTON,DC							
EMPLOYEE  23. Veterans Prefer					24. Tenu	re		25. Age	ency Use	26. Vetera	ans Preference	for RIF	
1 - None 3 - 10-Point/Disability 5 - 10-Point/Other 2 - 5-Point 4 - 10-Point/Compensable 6 - 10-Point/Compensable/30%					3 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite					YES X NO			
27. FEGLI					28. Annuitant Indicator					29. Pay Rate Determinant			
CO BASIC ONLY						9 NOT APPLICABLE 0							
30. Retirement Plan  KF FERS-FRAE & FICA			31. Service Comp. Date (Leave) 02/16/2021		32. Worl	FULL-TIME				33. Part-Time Hours Per Biweekly Pay Period			
POSITION I	DATA												
1 - Competitive Service 3 - SES General				35. FLSA Category  E - Exempt N - Nonocompt		36. Appropriation Code				37. Bargaining Unit Status 8888			
2 2 - Excepted S 38. Duty Station C 11-0010-001		39. Duty St	N – Nonexempt ation (City – County GTON,DISTRICT	- State or Overseas Location)									
40. Agency Data FUNC CLS 00  41.  42.  EDUC LVL 13				43.						NSITIVE/	LOW RI		
PREVIOUS F FROZEN SEF EMPLOYEE I OPM FORM 1	T AFFIDAVIT MILITARY SE RETIREMENT CO VICE 0000 S AUTOMATICA O19 DATED 2/ AST EQUIVALEN	RVICE: NO VERAGE: N LLY COVER 11/21.	NE IEVER CO RED UNDE	OVERED ER FERS, FER	S-RAE	OR FERS-FF	RAE.						
46. Employing Department or Agency ED - OFC OF THE UNDER SECY						nature/Authentica 1750 / ELECTR				ĭicial			
47. Agency Code EDEE	48. Personnel Office	e ID	49. Appro 02/19/20		ANTONIA HARRIS CHIEF HUMAN CAPITAL OFFICER								