

NOTIFICATION OF PERSONNEL ACTION

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|--|--|--|--|--|--|---|-------------------------------------|--|---|--|---|----------------------------|
| 1. Name (Last, First, Middle) SILVERS, ROBERT P | | | | 2. Social Security Number (b)(6) | | 3. Date of Birth (b)(6) | | 4. Effective Date 08/10/2021 | | | | |
| FIRST ACTION | | | | | SECOND ACTION | | | | | | | |
| 5-A. Code 170 | | 5-B. Nature of Action EXC APPT | | | 6-A. Code | | 6-B. Nature of Action | | | | | |
| 5-C. Code ZNM | | 5-D. Legal Authority 6 USC 113 A 1 K | | | 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 UNDER SECRETARY FOR STRATEGY, POLICY A 90951760 078574 | | | | | | | |
| 8. Pay Plan | | 9. Occ. Code | 10. Grade or Level | 11. Step or Rate | 12. Total Salary | 13. Pay Basis | 16. Pay Plan EX | 17. Occ. Code 0301 | 18. Grade or Level 03 | 19. Step or Rate 00 | 20. Total Salary/Award 168,400.00 | 21. Pay Basis PA |
| 12A. Basic Pay | | 12B. Locality Adj. .00 | 12C. Adj. Basic Pay | | 12D. Other Pay .00 | | 20A. Basic Pay 168,400.00 | | 20B. Locality Adj. .00 | 20C. Adj. Basic Pay 168,400.00 | 20D. Other Pay .00 | |
| 14. Name and Location of Position's Organization | | | | | 22. Name and Location of Position's Organization IMMEDIATE OFFICE OF THE SECRETARY OSEM OFFICE OF POLICY HS OS0112000000000000 PP 16 2021 | | | | | | | |
| EMPLOYEE DATA | | | | | | | | | | | | |
| 23. Veterans Preference (b)(6) 1 - None 3 - 10-Point/Disability 5 - 10-Point/Other 2 - 5-Point 4 - 10-Point/Compensable 6 - 10-Point/Compensable/30% | | | | 24. Tenure (b)(6) 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite | | | | 25. Agency Use | | 26. Veterans Preference for RIF (b)(6) | | |
| 27. FEGLI (b)(6) | | | | 28. Annuitant Indicator | | | | 29. Pay Rate Determinant | | | | |
| 30. Retirement Plan (b)(6) | | | 31. Service Comp. Date (Leave) | | 32. Work Schedule F FULL TIME | | | 33. Part-Time Hours Per Biweekly Pay Period | | | | |
| POSITION DATA | | | | | | | | | | | | |
| 34. Position Occupied 2 1 - Competitive Service 3 - SES General 2 - Excepted Service 4 - SES Career Reserved | | | 35. FLSA Category (b)(6) E - Exempt N - Nonexempt | | | 36. Appropriation Code | | | 37. Bargaining Unit Status 8888 | | | |
| 38. Duty Station Code 11-0010-001 | | | 39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | | | | | | | | | |
| 40. Agency Data | | 41. | | 42. | | 43. | | 44. | | | | |
| 45. Remarks APPOINTED BY THE PRESIDENT WITH THE ADVICE AND CONSENT OF THE SENATE. INELIGIBLE FOR LEAVE. APPOINTMENT AFFIDAVIT EXECUTED 08/10/2021 EMPLOYEE SUBJECT TO POST-EMPLOYMENT RESTRICTIONS UNDER 18 U.S.C. 207(C). THE PAY RATE OF AN EMPLOYEE OCCUPYING A POSITION SUBJECT TO THE PAY FREEZE FOR CERTAIN SENIOR POLITICAL OFFICIALS SHALL BE BASED ON THE RATE OF PAY AND APPLICABLE PAY LIMITATIONS IN EFFECT ON DECEMBER 31, 2013. FEDERAL EMPLOYEES' HEALTH BENEFITS (FEHB): YOU HAVE 60 DAYS FROM THE DATE OF HIRE TO ENROLL. SEND YOUR COMPLETED SF-2809 TO OCHCO-HRMS-BENEFITS. TO COMPARE PLANS AND GET MORE INFORMATION, VISIT WWW.OPM.GOV/INSURE FEDERAL EMPLOYEES' GROUP LIFE INSURANCE (FEGLI): YOU ARE AUTOMATICALLY ENROLLED IN BASIC COVERAGE. YOU HAVE 60 *** REMARKS CONTINUED ON THE NEXT PAGE *** | | | | | | | | | | | | |
| 46. Employing Department or Agency HOMELAND SECURITY | | | | | | 50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: NICOLE C. BARKSDALE-PERRY EXECUTIVE DIRECTOR, HRMS | | | | | | |
| 47. Agency Code HSAA | | 48. Personnel Office ID 5500 | | 49. Approval Date 08/11/2021 | | | | | | | | |

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| 5-C. Code ZNM | | 5-D. Legal Authority 6 USC 113 A 1 K | | | 6-C. Code | | 6-D. Legal Authority | | | | | | |
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| 7. FROM: Position Title and Number | | | | | 15. TO: Position Title and Number UNDER SECRETARY FOR STRATEGY, POLICY A 90951760 078574 | | | | | | | | |
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| 38. Duty Station Code 11-0010-001 | | | 39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | | | | | | | | | | |
| 40. Agency Data | | 41. | | 42. | | 43. | | 44. | | | | | |
| 45. Remarks *** REMARKS CONTINUED *** DAYS FROM THE DATE OF HIRE TO ELECT OPTIONAL COVERAGE. SEND YOUR COMPLETED SF-2817 TO OCHCO-HRMS-BENEFITS. TO GET MORE INFORMATION AND USE THE FEGLI CALCULATOR, VISIT HTTP://WWW.OPM.GOV/INSURE/LIFE . FLEXIBLE SPENDING ACCOUNT (FSA): YOU HAVE 60 DAYS FROM THE DATE OF HIRE BUT NO LATER THAN OCT 1ST TO ENROLL IN A HEALTH CARE OR DEPENDENT CARE FSA. IF HIRED ON/AFTER OCT 1ST YOU WILL BE ELIGIBLE TO ENROLL DURING THE FSA OPEN SEASON. TO GET MORE INFORMATION AND ENROLL ONLINE, VISIT WWW.FSAFED.COM . ONLINE ENROLLMENT IS MANDATORY. FEDERAL DENTAL AND VISION PROGRAM (FEDVIP): YOU HAVE 60 DAYS FROM THE DATE OF HIRE TO ENROLL IN A SUPPLEMENTAL DENTAL AND/OR VISION PLAN. TO GET MORE INFORMATION AND ENROLL ONLINE, VISIT WWW.BENEFEDS.COM ONLINE ENROLLMENT IS MANDATORY. *** REMARKS CONTINUED ON THE NEXT PAGE *** | | | | | | | | | | | | | |
| 46. Employing Department or Agency HOMELAND SECURITY | | | | | 50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: NICOLE C. BARKSDALE-PERRY EXECUTIVE DIRECTOR, HRMS | | | | | | | | |
| 47. Agency Code HSAA | | 48. Personnel Office ID 5500 | | 49. Approval Date 08/11/2021 | | | | | | | | | |

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| EX | | 0301 | | 03 | | 00 | | 168,400.00 | | PA |
| 12A. Basic Pay | | 12B. Locality Adj. | | 12C. Adj. Basic Pay | | 12D. Other Pay | | 20A. Basic Pay | | 20B. Locality Adj. |
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| 45. Remarks *** REMARKS CONTINUED *** THRIFT SAVINGS PLAN (TSP): YOU ARE ELIGIBLE TO CONTRIBUTE TO TSP. YOU ARE AUTOMATICALLY ENROLLED AT THE RATE OF 5%. TO INCREASE OR DECREASE YOUR CONTRIBUTION AMOUNT, COMPLETE A TSP-1 AND SEND IT TO OCHCO-HRMS-BENEFITS FERS EMPLOYEES ONLY: YOU WILL IMMEDIATELY RECEIVE AN AGENCY AUTOMATIC CONTRIBUTION OF 1% OF YOUR PAY AND QUALIFY FOR UP TO 4% MATCHING. TO GET INFORMATION, VISIT WWW.TSP.GOV/FORMS/TSPBK08.PDF | | | | | | | | | | |
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