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

NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle)					2. Social Security Number 3. Date of Birth 4. Effective Date								
HOFF, CHRISTOPHER M					(6)		(b) (6)			01/20/2021			
FIRST ACTION SECOND ACTION													
5-A. Code 146	5-B. Nature of Action SES NONCAREER APPT			6-A. Coo	6-A. Code 6-B. Nature of Action								
5-C. Code V4L	5-D. Legal Authority 5 USC 3394(A)				6-C. Code 6-D. Legal Authority								
5-E. Code 5-F. Legal Authority AWM OPM FORM 1652				6-E. Code 6-F. Legal Authority									
7. FROM: Position Title and Number BUSINESS AND INDUSTRY SPECIALIST 15206636 MC044					15. TO: Position Title and Number DEPUTY ASSIST SECRETARY FOR SERVICES 65800400 ES0768								
8. Pay Plan 9. Occ. Cod	e 10. Grade or Level 11. Step or Ra	te 12. Total Salary	13. Pay Basis	16. Pay Pl ES		Occ. Code	18. Grade or 00		Step or Rat	te 20. Total Sal 183,100.		21. Pay Basis PA	
12A. Basic Pay	12B. Locality Adj. 12C. Adj			20A. Basic Pay 183,100.00			20B. Locality	Adj.	20C. Adj. Basic Pa 183,100.00		20D. Other Pay .00		
14. Name and Location of Position's Organization					22. Name and Location of Position's Organization INTERNATIONAL TRADE ADMINISTRATION INDUSTRY AND ANALYSIS DAS FOR SERVICES CM 553505000000000000 PP 02 2021								
EMPLOYEE DATA													
23. Veterans Preference					24. Tenure 2 - Conditional 0 0 - None 2 - Conditional 1 - Permanent 3 - Indefinite 25. Agency Use				y Use	26. Veterans Preference for RIF (b) (6)			
27. FEGLI (b) (6)					28. Annuitant Indicator 9 NOT APPLICABLE						29. Pay Rate Determinant 0 NOT APPLICABLE		
30. Retirement Plan (b) (6) 31. Service Comp. Date (Lea			Comp. Date (Leave)	32. Work	32. Work Schedule F FULL TIME 33. Part-Time Hours I Biweekly Pay Period						er		
POSITION D								-					
34. Position Occupie	E-	35. FLSA Category E - Exempt N - Nonexempt		36. Appropriation Code				37. Bargaining Unit Status 8888					
38. Duty Station Cod 11-0010-001	39. Duty Stat	39. Duty Station (City – County WASHINGTON DIST OF								0000			
40. Agency Data	42.	43.			44.								
45.00													
45. Remarks (b) (6) (b) (6) (b) (6)													
46. Employing Department or Agency DEPARTMENT OF COMMERCE					50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY:								
47. Agency Code	48. Personnel Office ID	KURT	KURT BERSANI										
CM55	1426	01/20/202	1	DIRECTOR, HCCS									