

SECRET  
(When Filled In)

109301

REQUEST FOR PERSONNEL ACTION

DATE PREPARED  
15 September 1964

1. SERIAL NUMBER: 025798  
2. NAME (Last-First-Middle): WILCOTT, James Bernard, Jr.

3. NATURE OF PERSONNEL ACTION: Reassignment & Transfer to Vouchered Funds  
4. EFFECTIVE DATE REQUESTED: MONTH, DAY, YEAR  
5. CATEGORY OF EMPLOYMENT: Regular

6. FUNDS: V TO V, V TO CF, CF TO V, CF TO CF  
7. COST CENTER NO. CHARGEABLE: 5277-0003  
8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS: DDS OFFICE OF FINANCE, Confidential Funds Division, Compensation and Tax Accounts Branch, Contract Agents Accounts Section  
10. LOCATION OF OFFICIAL STATION: Washington, D. C.

11. POSITION TITLE: Finance Assistant  
12. POSITION NUMBER: 470  
13. CAREER SERVICE DESIGNATION: SF

14. CLASSIFICATION SCHEDULE (GS, LB, etc.): GS  
15. OCCUPATIONAL SERIES: 0510.16  
16. GRADE AND STEP: 7/4  
17. SALARY OR RATE: 6650.

18. REMARKS: From: FE [Redacted] Date: 21 SEP 1964  
CONCUR: Security Approval has been granted for the use of [Redacted] by his request.  
FE/Personnel Chief, Personnel Security Division  
lcc - Sec  
lcc - Payroll  
Forms W-4 and

18A. SIGNATURE OF REQUESTING OFFICIAL: Acting Chief, C&T Division  
DATE SIGNED  
18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER: Adm. Officer-O/Finance  
DATE SIGNED

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE, 20. EMPLOY. CODE, 21. OFFICE CODING, 22. STATION CODE, 23. INTEGREE CODE, 24. MOOTRS. CODE, 25. DATE OF BIRTH, 26. DATE OF GRADE, 27. DATE OF LEI, 28. NTE EXPIRES, 29. SPECIAL REFERENCE, 30. RETIREMENT DATA, 31. SEPARATION DATA CODE, 32. CORRECTION/CANCELLATION DATA, 33. SECURITY REQ. NO., 34. SEX, 35. VET. PREFERENCE, 36. SERV. COMP. DATE, 37. LONG. COMP. DATE, 38. CAREER CATEGORY, 39. FEGLI / HEALTH INSURANCE, 40. SOCIAL SECURITY NO., 41. PREVIOUS GOVERNMENT SERVICE DATA, 42. LEAVE CAT. CODE, 43. FEDERAL TAX DATA, 44. STATE TAX DATA, 45. POSITION CONTROL CERTIFICATION, 46. O.P. APPROVAL, DATE APPROVED

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OFFICE OF PERSONNEL

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE \_\_\_\_\_ FOR THE FOLLOWING REASON:

(Date)

SEP 20 SEP 23 11 03 AM '64

MAIL ROOM MAIL ROOM

MY LAST WORKING DAY WILL BE

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, Zone, State)

INSTRUCTIONS

Items 1 thru 7 and Items 9 thru 18a The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains only to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 "Category of Employment" should show one of the following entries:

- Regular
- Part Time
- Temporary
- Temporary -- Part Time
- Summer
- Detail Out
- Detail In
- WAE
- Consultant
- Military

Item 9 "Organizational Designations" should show all levels of organization pertinent to identifying the location of the position:

- Major Component (Director, Deputy Director, etc.)
- Office, Major Staff, etc.
- Division or Staff (subordinate to first line)
- Branch
- Section
- Unit

Item 11 "Position Title" should reflect the standard abbreviated title given in the most current edition of the Position Control Register or reported on Form 261, Staffing Complement Change Authorization.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the gaining Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING - The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of the Comptroller, one copy only will be sent to the Office(s) concerned.

SECRET