

# APPOINTMENT AFFIDAVITS

Expert  
(Position to which Appointed)

01/20/2025  
(Date Appointed)

Office of Personnel Management  
(Department or Agency)

Office of the Director  
(Bureau or Division)

Washington, D.C.  
(Place of Employment)

I, **OPM-3**, do solemnly swear (or affirm) that--

## A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So help me God.

## B. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof.

## C. AFFIDAVIT AS TO THE PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing this appointment.

**OPM-3**

(Signature of Appointee)

Subscribed and sworn (or affirmed) before me this 20 day of January, 2025

at Washington  
(City)

D.C.  
(State)

(SEAL)

Commission expires \_\_\_\_\_  
(If by a Notary Public, the date of his/her Commission should be shown)

(Signature of Officer)

(Title)

Note - If the appointee objects to the form of the oath on religious grounds, certain modifications may be permitted pursuant to the Religious Freedom Restoration Act. Please contact your agency's legal counsel for advice.

Standard Form 29  
Rev. 7/91  
U.S. Office of Personnel Management  
FPM Supp. 296-33, Subch. 4

## NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) OPM-3		2. Social Security Number [REDACTED]		3. Date of Birth [REDACTED]		4. Effective Date 01/20/2025	
<b>FIRST ACTION</b>				<b>SECOND ACTION</b>			
5-A. Code 171		5-B. Nature of Action EXC APPT NTE 07/18/2025		6-A. Code		6-B. Nature of Action	
5-C. Code H2L		5-D. Legal Authority REG 304.103.		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 EXPERT PD: 6A39740			
8. Pay Plan	9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis	16. Pay Plan ED	17. Occ. Code 0301
						18. Grade or Level 00	19. Step or Rate 00
						20. Total Salary/Award \$0	21. Pay Basis WC
12A. Basic Pay		12B. Locality Adj.		12C. Adj. Basic Pay		12D. Other Pay	
14. Name and Location of Position's Organization				22. Name and Location of Position's Organization OPM OFC OF THE DIRECTOR  WASHINGTON DC			
<b>EMPLOYEE DATA</b>							
23. Veterans Preference 1 - None 2 - 5 Point 3 - 10 Point/Disability 4 - 10 Point/Compensable 5 - 10 Point/Other 6 - 10 Point/Compensable/30%				24. Tenure 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite		25. Agency Use TG	
26. Veterans Preference for RIF YES X NO				27. FEGLI A0 [REDACTED]		28. Annuity Indicator 9 NOT APPLICABLE	
29. Pay Rate Determinant 0				30. Retirement Plan 4 [REDACTED]		31. Service Comp. Date (Leave) 01/20/2025	
32. Work Schedule F FULL TIME				33. Part-Time Hours Per Biweekly Pay Period			
<b>POSITION DATA</b>							
34. Position Occupied 2 - 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved				35. FLSA Category E - Exempt N - Nonexempt		36. Appropriation Code 41AA0	
37. Bargaining Unit Status 8888				38. Duty Station Code 11-0010-001		39. Duty Station (City - County - State or Overseas Location) WASHINGTON DISTRICT OF COLUMBIA DC	
40. Agency Data 10001		41.		42. 0000		43. 33.94	
						44. CRITICAL-SENSITIVE (CS)/HIGH R	
45. Remarks APPOINTMENT AFFIDAVIT EXECUTED 01/20/2025 REASON FOR TEMPORARY APPOINTMENT: TO PROVIDE A HIGH LEVEL OF EXPERTISE RELATIVE TO ISSUES WHICH HAVE A SIGNIFICANT IMPACT ON THE FORMULATION OF AGENCY GOALS AND OBJECTIVES TO THE OPM DIRECTOR. CREDITABLE MILITARY SERVICE: 0000 PREVIOUS RETIREMENT COVERAGE: NEVER COVERED.							
46. Employing Department or Agency OPM				50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: CARMEN GARCIA-WHITESIDE CHIEF HUMAN CAPITAL OFFICER AND DIRECTOR OF OPM HR			
47. Agency Code OM00	48. Personnel Office ID 1000	49. Approval Date 01/30/2025					

### **Acceptance of Uncompensated Services**

I understand that I may be employed with the United States Office of Personnel Management (OPM) under the authority of 5 U.S.C. § 3109. Under certain circumstances, OPM may use this authority to employ experts or consultants with or without pay, provided that such personnel agree in advance in writing to waive any claims for compensation for those services.

I desire to offer my services to OPM. Accordingly, I agree to being appointed as an uncompensated employee of OPM; I understand that I will not receive any pay or any other form of compensation from OPM, the federal Government, or any other source for the services I render to OPM.

In addition, I hereby waive any and all claims I may have in the future against OPM and/or the federal Government on account of the services I render to OPM.

Signed: \_\_\_\_\_ **OPM-3** \_\_\_\_\_

Printed Name of Appointee: **OPM-3**

Date: January 28, 2025

2/12/25

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**MEMORANDUM OF UNDERSTANDING BETWEEN THE SOCIAL SECURITY ADMINISTRATION,  
THE OFFICE OF PERSONNEL MANAGEMENT, THE DEPARTMENT OF EDUCATION,  
AND APPOINTEE OPM-3**

During Appointee's term of service at the Social Security Administration (SSA), Appointee may also serve as an unpaid Special Government Employee (SGE) for the Office of Personnel Management (OPM) and the Department of Education. The Appointee's duties, qualifications, and salary are contained in the attached Expert or Consultant Appointment Request & Certification (Appointment Request and Certification). To ensure compliance with applicable law, the Appointee, OPM, the Department of Education (DoEd.), and SSA (the parties) enter into this Memorandum of Understanding (MOU) and agree as follows:

1. During Appointee's term of service to SSA, Appointee will receive payment, as described in the Appointment Request and Certification, from SSA.
2. Neither OPM nor DoEd. shall not pay Appointee during his SSA term of service.
3. While on duty time at SSA, Appointee shall only perform duties for SSA.
4. While on duty time at SSA, Appointee shall not perform any work for or on behalf of OPM or DoEd..
5. Appointee shall perform SSA work only at SSA Headquarters (HQ) in Woodlawn, Maryland.
6. Appointee shall not perform any work for OPM or DoEd. at SSA facilities, including but not limited to SSA HQ.
7. SSA, OPM and DoEd. shall provide any equipment or systems access to ensure access to their respective networks. Neither SSA, OPM nor DoEd. shall be responsible for providing access to the other agency's network or systems.
8. Appointee shall not perform work for either OPM or DoEd. using SSA equipment or resources.
9. Appointee shall not perform SSA work using either OPM or DoEd. equipment or resources.
10. Appointee shall not share any Personally Identifiable Information accessed or obtained through the use of SSA systems or work performed for SSA, with any external entity, organization, or agency federal or state, including OPM and DoEd.
11. Appointee shall not share or disclose SSA information that is non- PII, non-public information with any non-federal entity. Any disclosure of non- PII, non-public information to another federal entity, organization, or agency shall be made only with expressed permission of the Office of the Commissioner.
12. Appointee shall not share or disclose OPM or DoEd. information to SSA without appropriate permission from each agency's appropriate authorizing official.
13. Appointee shall abide by all SSA regulations and policies regarding access to and protection of any agency records, information, and work products.
14. Appointee shall abide all SSA regulations and policies regarding ethics and employee conduct.
15. In the event of any lapse in appropriations, the Appointee will follow the instructions issued by SSA related to his SSA service.

**AUTHORIZING SIGNATURES AND DATES**

The signatories below warrant and represent that they have the competent authority on behalf of their respective agencies to enter into the obligations set forth in this MOU. This agreement will become effective on the date it is signed by last party.

Social Security Administration

Office of Personnel Management

Department of Education

*Florence Felix-Lawson*

[NAME] Florence Felix-Lawson  
[TITLE] Chief Human Capital Officer  
Social Security Administration  
2/13/25

Date: \_\_\_\_\_

*Brian Bjelde*

[NAME] Brian Bjelde  
[TITLE] Senior Advisor to  
Acting Director of OPM  
2/12/2025

Date: \_\_\_\_\_

*James P. Bergeron*

James P. Bergeron  
Acting Under Secretary

Date: 02/12/25

Appointee

**OPM-3**

Akash Bobba

Date: 02/12/2025

OPM-000013