

2024 ANNUAL PAY RAISE – AGENCY CONTACT INFORMATION FORM

Instructions: Please include contact information for your agency’s point of contact(s) and submit the completed form to the Annual Pay Raise mailbox at Annual.PayRaise@usda.gov. **NFC will only communicate with your agency contacts assigned to this project.** Agency contacts will be responsible for submitting your agency’s processing requirements, table updates, and any issues to ensure that the annual pay raise can be completed to your satisfaction.

DEPT CODE/AGENCY CODE	
SECTION A: NO CHANGES REQUIRED	
<input type="checkbox"/> CHECK IF NO CHANGES TO PRIOR YEAR'S AGENCY CONTACT LIST. If this box is checked, you are done and do not need to complete SECTION B.	
SECTION B: INDIVIDUAL CHANGES	
CHANGE AGENCY CONTACTS LIST AS INDICATED BELOW. Complete contact information and mark the ADD or DELETE box for each entry.	
CONTACT NAME	CONTACT PHONE NUMBER
CONTACT EMAIL ADDRESS	CONTACT FAX NUMBER
<input type="checkbox"/> CHECK IF PRIMARY CONTACT <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List.	
CONTACT NAME	CONTACT PHONE NUMBER
CONTACT EMAIL ADDRESS	CONTACT FAX NUMBER
<input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List.	
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