

# Contents for Appendix B

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# Summary of Changes for Appendix B

*Note that changes are cumulative. Numbering of a section may be modified by a change made subsequently.*

## **1. Overall ELM Revisions**

The entire ELM is reformatted, with changes in typographical treatment where necessary, for ease of use for printing and online viewing. Addresses are reformatted to reflect machine readability standards.

Addresses and telephone numbers are updated in the text, and Appendix C, Addresses, previously added by PB 21809, 2/20/92, is deleted.

Form titles in the text and in Appendix B, Form Titles, were updated when the ELM was issued online in 1996. Any subsequent updating is noted in the revisions specific to this segment noted below. (PB 21929, 9/26/96)

## **2. Revisions Specific to This Segment**

Appendix B is updated to show form titles current through August 1996.

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## Appendix B

# Forms List

Form ID	Title	References
7	Service Record Card	314.61
50	Notification of Personnel Action	323.83, 364.11, 421.516, 421.526, 422.354, 422.355, 435.31, 437.4, 474.9, 512.554a,b,c,d, 514.52, 519.43, 552.411, 552.412, 552.5, 553.11, 553.111, 553.112, 553.113, 553.123, 553.132, 935.26
50-B	Request for Personnel Action (Processing Copy of New Hires Only)	546.633
85	Nonsensitive Security Clearance	314.24
180	Certificate of Training	732.15
202	Health Benefits Refund Payment Authorization	525.132c, 525.132d
337	Clearance Record for Separated Employee	365.173, 936.42
820	Ranking of Position Request	155.1, 215.2, 231.1, 232, 232.3, 233
1012	Travel Voucher	716.11, 742.411, 742.42
1017-A	Time Disallowance Record	432.72
1164	Claim for Reimbursement for Expenditures on Official Business	742.411
1188	Cancellation of Organization Dues From Payroll Withholdings	925.11, 925.122a,b,c,d, 925.4, 925.5
1216	Employee's Current Mailing Address	364.2, 593.33, 666.7
1221	Advance Sick Leave Authorization	513.522
1223	Statement of Earnings and Deductions	422.354, 924.71
1224	Court Duty Leave, Statement of Service	516.46a
1303	Salary Change Notices	437.4
1314-A	Auxiliary Rural Carrier Time Certificate	516.46b
1555	Statement of Account	867.133a
1723	Assignment Order	353.332, 422.42
1727	Award Recommendation/Authorization	471.32, 474.6, 474.9, 475.6, 635.32
1734	Record of Training	732.14, 742.5
1750	Employee Probationary Period Evaluation Report	378.11
1764	Accident Analysis Summary	821.44
1767	Report of Hazard, Unsafe Condition or Practice	825.511b, 825.7, 825.71, 825.72, 825.735
1768	Safe Driver Award Committee Decision	842.254c

Form ID	Title	References
1769	Accident Report	821.31, 821.311, 821.312f, 821.313, 821.314, 821.315, 821.316, 821.317, 821.33, 821.331, 821.341, 825.511b, 826.621
1772	Accident Log	821.32, 825.511b, 826.621
1773	Report of Hazard Log	825.734
1782	Training Request and Authorization	714.122, 732.13, 742.1, 742.21, 742.3, 742.3c,d, 742.411, 742.412, 742.42, 742.5, 743.1, 743.223, 743.423, 743.43, 753.11d, 754.6
1783	On-the-Job Safety Review Analysis	821.22d
1784 A & B	Safety and Health Inspection Checklist	825.12, 825.511b, 852.1, 852.2
1784-C	Safety and Health Deficiency Report	825.62, 825.64
1902	Justification for Billing Accounts Receivable	452.11, 743.43, 462.11
1903-DZ	Invoice and Statement	743.43
1961	Employee Uniform Allowance Statement	936.57
2146	Employee's Claim for Personal Property	645.2
2240	Pay, Leave, or other Hours Adjustment Request	452.11, 462.11, 594.32, 594.468, 594.5
2246	Terminal Leave Worksheet	512.71, 512.813
2248	Monetary Payroll Adjustment	452.11, 462.211
2342	Request: Unemployment Compensation Data	551.422
2411	Check List for Pre-Retirement Interviews	569.125
2417	Confidential Statement of Employment and Financial Interests (for Use by Postal Service Employees)	662.11, 662.13
2418	Confidential Statement of Employment and Financial Interests (for Use by Postal Service Employees)	662.14
2432	Individual Training Progress Report	438.222, 732.11
2548	Individual Training Record	732.12
2485	Medical Examination and Assessment	546.621b
2489	Identification of Physical/Mental Disability	546.621b
2490	Medical Bill Certification For Job-Related Injuries	541.3
2491	Medical Report—First Aid Injuries	541.3
2533	Limited Duty Assignment	314.43d
2556	Third Party Statement of Recovery	541.3, 545.871, 545.872, 545.873a,b(1), 545.874, Ex. 545.857a, Ex. 545.857c
2557	Employee's Third-Party Recovery Statement	541.3, 545.858d, Ex. 545.858a,c, Ex. 545.859c, 545.873a,b, 545.874
2559	Third Party Claim—Information Request	541.3, 545.859a, Ex. 545.859a,b
2560	Referral of Third Party Material	541.3, 545.859e
2562	Injury Compensation Program—Notice of Potential Third Party Claim	541.3, 545.855, Ex. 545.855, 545.857a,c(1), 545.858a, 545.859a
2572	Injury Compensation Data Collection	541.3
2572A	Injury Claims Analysis—Update Worksheet	541.3
2573	Request—OWCP Claim Status	541.3, 545.94

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2577	Assignment of Claim to the USPS	541.3, 545.859d,f, 545.872, Ex. 545.859f
2591	Application for Employment	323.84
3074	Request for Waiver of Claim for Erroneous Payment of Pay	437.32, 437.5
3111	Specific Notice to Employees Entering (or already in) Nonpay Status—Change in Health Benefits Regulations	525.222, 525.223
3132	Correspondence Course Application	
3189	Request for Temporary Schedule Change for Personal Convenience	516.44c
3239	Payroll Deduction Authorization to Liquidate Postal Service Indebtedness	Ex 452.22, Ex 452.233,462.5, 463.23
3241	Statement of Receipts and Disbursements	615.62, Ex. 615.62
3544	Post Office Receipt for Money	545.873b
3971	Request for or Notification of Absence	511.23, 511.42, 512.411, 512.412, 512.421, 512.422, 512.423, 513.34, 513.341, 513.342, 513.35, 514.51, 515.42, 515.51, 519.732a,b
3972	Absence Analysis	511.42
3973	Military Leave Control	517.91, 517.92
4584	Observation of Driving Practices	831.331
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5900	Hiring Worksheet	342.11
6375	Uniform Allowance Stop Payment Notice	936.56
6802	Request for Job Evaluation Action	142.21, 142.23, 142.24, 142.25, 143.1a, 215.1, Ex. 215.1, 222, 222.1, 222.4, 223.1, 223.21, 223.21a
6803	Wage and Separation Information	551.422, 552.32i, 552.611, 552.612, 553.131a,b,c,d, 553.132, 553.133, 553.212, 553.221, 553.23a,b,c
6886	Thrift Savings Plan Request for Retroactive Contributions	594.42, 594.43, 594.451, 594.461, 594.462, 594.467, 594.5
7314	Medical Agreement	867.131a,c
7380	Supply Center Requisition	529.31, 539.42, 442.3
7381	Requisition for Supplies, Services, or Equipment	753.12, 753.3
8006	Uniform Allowance Code Sheet	938.41
BRI 46-10	Notice of Recovery from Disability	323.334a, 323.335a
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CA-2	Notice of Occupational Disease and Claim for Compensation	314.43, 541.3, Ex. 514.4, 542.121, 544.12, 544.13, 544.17a, 544.22, 545.3a, 545.41, 545.42, 545.852, 821.311, 821.316

Form ID	Title	References
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CA-3	Report of Termination of Disability and/or Payment	541.3, 525.148, 545.63
CA-5	Claim for Compensation by Widow, Widower, and/or Children	541.3
CA-5b	Claim for Compensation by Parents, Brothers, Sisters, Grandparents, or Grandchildren	541.3
CA-6	US Dept of Labor Official Superior's Report of Employee's Death	821.316, 541.3, 542.211
CA-7	Claim for Compensation on Account of Traumatic Injury or Occupational Disease	545.711, 545.712, 545.713
CA-7/20	Claim for Compensation on Account of Traumatic Injury or Occupational Disease/Attending Physician's Report	525.141, 541.3, 525.144a,b
CA-8	Claim for Continuing Compensation on Account of Disability	545.713, 545.713a,d
CA-8/20a	Claim for Continuing Compensation on Account of Disability/Attending Physician's Supplemental Report	541.3, 545.713
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CA-17	Duty Status Report	314.43, 541.3, 544.16, 545.61, 545.62, 545.62b,c, 547.22, 547.23, 547.34a
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CA-35B	Evidence Required in Support of a Claim for Work-Related Hearing Loss	541.3
CA-35C	Evidence Required in Support of a Claim for Asbestos-Related Illness	541.3
CA-35D	Evidence Required in Support of a Claim for Work-Related Coronary/Vascular Condition	541.3
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CA-35F	Evidence Required in Support of a Claim for Work-Related Pulmonary Illness (not asbestosis)	541.3
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CFC 100	CFC Pledge Card	617.42
DD 214	Report of Transfer or Discharge	323.84
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ES 934	Request for Information or Reconsideration of Federal Findings	551.422, 552.423, 553.221, 553.222, 553.223, 553.224a,b,c
ES 936	Request for Verification of UCFE Wage and Separation Information Furnished on Form ES 931	551.422, 552.62, 553.23a,b,c,d
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FE 6-Dep	Statement of Claim—Option C, Family Life Insurance	538.3a, 538.341, 539.432
FE 7	Claim for Accidental Dismemberment	538.33a, 538.342, 539.41

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HCFA-1500	Health Insurance Claim Form	541.3
OPM 1431	Spouse's Consent To Survivor Election	564.24
OPM 1425	Application for Refund of Retirement Deductions	
OPM 1482	Agency Certification of Status of Reemployed Annuitant	537.131, 537.132b
OPM 1528	Notification of Earnings for Medicare Eligibility	574.251
(Request forms from OPM, Forms Management and Design Branch, Office of Financial Control and Management, 1900 E Street, NW, Washington, DC 20415-0001, on an as-needed basis.)		
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SF 54	(presently SF 2823, Designation of Beneficiary)	534.343b, 538.111
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SF 86	Security Investigation Data for Sensitive Position	313.61, 314.24
SF 127	Request for Official Personnel Folder (Separated Employee)	313.72
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SF 278	Financial Disclosure Report for Executive Branch Personnel	662.8, 662.11
SF 813	Verification of a Military Retiree's Service in Nonwartime Campaigns or Expeditions	512.223c(4) & Ex 512.223c
SF 1150	Record of Leave Data	512.811, 512.812a,b
SF 1153	Claim for Unpaid Compensation of Deceased Civilian Employee	567.31, 567.334
SF 1164	Claim for Reimbursement for Expenditures on Official Business	716.11
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SF 2801	Application for Immediate Retirement	562.352b, 564.31
SF 2802	Application for Refund of Retirement Deductions	565.462, 565.523
SF 2801-1	Certified Summary of Federal Service	569.126
SF 2803	Application To Make Deposit or Redeposit	565.23
SF 2804	Application to Make Voluntary Contributions	565.41
SF 2806	Individual Retirement Record	525.149, 536.42
SF 2809	Health Benefits Registration Form	521.613, 521.613a,b(1), 523.1, 523.33, 523.42, 523.611, 523.632d, 524.12, 524.12b,c, 524.322, 524.531c,d, 524.534d, 524.62, 524.64, 524.71, 524.921, 524.922, 524.95, 525.222c, 525.233b, 525.322b, 525.422, 525.425, 525.454, 526.512, 529.11, 529.23
SF 2810	Notice of Change in Health Benefits Enrollment	521.613(b), 523, 524.542a,b, 524.722, 524.731, 524.773, 524.966, 525.142, 525.143a, 525.144, 525.146b,c,d, 525.322, 525.422, 525.423, 525.425, 525.441, 525.512a,b, 526.52, 529.12, 632e

Form ID	Title	References
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SF 2817	Life Insurance Election (FGLI)	535.122a,b, 535.3, 535.521, 535.831c, 535.832a,c, 535.911, 536.41, 536.42, 536.612b, 537.132a,b, 537.144a,b,c, 539.11, 539.432
SF 2817B	A Description and Certification of Enrollment in the FGLI Program	539.432
SF 2818	Continuation of Life Insurance Coverage as a Retiree or Compensation	534.343a,b, 536.112, 536.41, 536.42, 539.432
SF 2819	Notice of Conversion Privilege	535.63a,b, 535.63a(4), 535.722, 539.432
SF 2821	Agency Certification of Insurance Status	534.341, 534.343b, 535.63, 535.63a,a(4),b, 535.722, 536.42, 537.172, 538.222a,b, 538.312a,b, 538.33c, 539.3, 539.12, 539.31, 539.32, 539.432
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SF 3107	Application for Immediate Retirement	582.782c
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