NAME FIRST	MIDDLE	LAST	HOME PHONE	DATE OF BIRTH YR MO DAY	COLLEGE NO.	CS SUF
GARY	L.	EISER	[redacted]		128703	2

CURRENT HOME ADDRESS	CITY	STATE	ZIP CODE	SEX
[redacted]				M

PERMANENT ADDRESS IF OTHER THAN CURRENT	CITY	STATE	ZIP CODE	M	VETERANS PREF	UNION CODE
				M	N	

SOCIAL SECURITY NO.	BADGE NO.	CITIZENSHIP
[redacted]		USA

YR	CERTIFICATE OR LICENSE			
16				

DEGREE	(CODE)	COLLEGE OR UNIVERSITY ATTENDED	CODE	YEAR
CHEMITRY	1057	OUACHITA UNIV	0994	7

JOB, ORGANIZATION, SALARY

JOB TITLE	CODE	BOND CD	YR	MO	DAY	SA	PAY RATE
MGR	2186	M	09	89	03	20	69016

BOARD	COO	GROUP	OPERATIONS	
BOARD	COO	NUC POWER	NUCLEAR OPS	SQN SITE

			ORGANIZATION CODE
PLANT MGT	PLANT OPRS	CHEMISTRY	C111252800

TYPE APPT	NT SO EXT PERM	YR	MO	DAY					OFFICIAL STATION	POST OFFICE OF OFFICIAL STATION	STATE	CODE
11					1H	E	91	09	08	BEQ NCLR PL SODDY-DAISY	TN	41118

SERVICE DATES

TVA YR	TVA MO	TVA DAY	FEDERAL YR	FEDERAL MO	FEDERAL DAY	CURRENT YR	CURRENT MO	CURRENT DAY	HTL LAYOFF YR	HTL LAYOFF MO	HTL LAYOFF DAY
87	09	08	87	09	08	87	09	08			

EXP OR REEMP YR	EXP OR REEMP MO	EXP OR REEMP DAY	OPTIONAL YR	OPTIONAL MO	OPTIONAL DAY	OPTIONAL YR	OPTIONAL MO	OPTIONAL DAY
87	09	08						

OTHER ITEMS

	RETR MILITARY
JEUNC L21	

SUPVR INDICATOR	PROB PAY ENDS
SUPERVISORY	

ACCESSIONS AND SEPARATIONS

LEAVE WITHOUT PAY FOR MORE THAN THIRTY DAYS OR MILITARY FURLOUGH

WORK SCHEDULE FROM	TO	DAYS OFF	LAST DAY OF WORK YR	MO	DAY	HOUR

LWOP STARTS YR	MO	DAY	HOUR	LWOP ENDS YR	MO	DAY

TVA CONTR TO RETIRE	BD ACTION REQUIRED	DATE ENTR MIL SERV YR	MO	DAY

MILITARY LEAVE FROM YR	MO	DAY	TO YR	MO	DAY	ANNUAL LEAVE FROM YR	MO	DAY	TO YR	MO	DAY

LEAVE WITHOUT PAY FROM YR	MO	DAY	TO YR	MO	DAY

TERMINATION

WORK SCHEDULE FROM	TO	DAYS OFF	EMPLOYEE BEGAN WORK YR	MO	DAY	HOUR

TERMINATION YR	MO	EFFECTIVE DAY	LWOP	LAST DAY OF WORK YR	MO	DAY	SEV. PAY ELIG	RE-EMPLOY. ELIG

ACCOUNT NUMBER

ORG	SUBVP	OCC	COST ANALYSIS 1	COST ANALYSIS 2
[redacted]				

EMERGENCY CONTACT

NAME FIRST	MIDDLE	LAST	RELATIONSHIP	PHONE
[redacted]				

ADDRESS	CITY	STATE
[redacted]		

REMARKS

INDIVIDUAL INCREASE PROGRAM AWARD.
(LUMP SUM IN AMOUNT OF
$ 03795)

APPROVAL SIGNATURES

EMPLOYEE

MGMT REP

MGMT REP

I CERTIFY TO THE ACCURACY OF THIS FORM AND THIS ACTION'S COMPLIANCE WITH ALL APPLICABLE TVA REQUIREMENTS.

HRO K. Jill Wallace K. JILL WALLACE

SUMMARY OF ACTION

ACTION CODE	TYPE ACTION	EFFECTIVE DATE OF THIS ACTION YR	MO	DAY
87	ITP	90	10	01

DATE OF ISSUE 90 10 04

1 1. PERSONNEL M. RECORDS 2. CENTRAL PAYROLL OFFICE, KNOXVILLE 3. MEDICAL SERVICES 4. ORGANIZATION 5. ORGANIZATION 6. EMPLOYEE

EMPLOYEE STATUS AND INFORMATION RECORD

TVA 9660 (REV 6-89)